



**Neighborhood
Health Plan**
OF RHODE ISLAND™

2023 INDIVIDUAL/FAMILY & SMALL GROUP DRUG FORMULARY

**PLEASE READ: THIS DOCUMENT HAS INFORMATION ABOUT THE
PRESCRIPTION DRUGS WE COVER.**

Please refer to your “Certificate of Coverage or other plan materials” to determine if your drug is covered. This Drug Formulary does not guarantee coverage and is subject to change without notice. Members must use participating pharmacies to fill their prescription drugs.

Tiers are groups of drugs on our Drug List.

- Tier 0 drugs are drugs that qualify as an Affordable Care Act Preventative Drug
- Tier 1 drugs are generic drugs in the Adherence Drug Program
- Tier 2 drugs are generic drugs not included in the Adherence Drug Program
- Tier 3 drugs are preferred brand drugs
- Tier 4 drugs are non-preferred brand drugs
- Tier 5 drugs are preferred specialty drugs
- Tier 6 drugs are non-preferred specialty drugs

For the most recent information or other questions, please contact Neighborhood Member Services at 1-833-486-5274 (ITY 711).

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium tab er 24hr 100 mg</i>	Tier 2	
<i>etodolac cap 200 mg</i>	Tier 2	
<i>etodolac cap 300 mg</i>	Tier 2	
<i>etodolac tab 400 mg</i>	Tier 2	
<i>etodolac tab 500 mg</i>	Tier 2	
<i>etodolac tab er 24hr 400 mg</i>	Tier 2	
<i>etodolac tab er 24hr 500 mg</i>	Tier 2	
<i>etodolac tab er 24hr 600 mg</i>	Tier 2	
<i>fenoprofen calcium tab 600 mg</i>	Tier 4	
<i>flurbiprofen tab 50 mg</i>	Tier 2	
<i>flurbiprofen tab 100 mg</i>	Tier 2	
<i>ibuprofen jr chw 100mg</i>	Tier 1	OTC
<i>ibuprofen susp 100 mg/5ml</i>	Tier 2	
<i>ibuprofen tab 400 mg</i>	Tier 2	
<i>ibuprofen tab 600 mg</i>	Tier 2	
<i>ibuprofen tab 800 mg</i>	Tier 2	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	Tier 2	
<i>ketorolac tromethamine inj 15 mg/ml</i>	Tier 2	
<i>ketorolac tromethamine inj 30 mg/ml</i>	Tier 2	
<i>ketorolac tromethamine tab 10 mg</i>	Tier 2	QL (20 tabs every 30 days)
<i>meclofenamate sodium cap 50 mg</i>	Tier 2	
<i>meclofenamate sodium cap 100 mg</i>	Tier 2	
<i>mefenamic acid cap 250 mg</i>	Tier 2	
<i>meloxicam tab 7.5 mg</i>	Tier 2	
<i>meloxicam tab 15 mg</i>	Tier 2	
MOTRIN CHILD SUS 100/5ML	Tier 1	OTC
<i>motrin ib tab 200mg</i>	Tier 1	OTC
MOTRIN INFAN DRO 50/1.25	Tier 1	OTC
<i>nabumetone tab 500 mg</i>	Tier 2	
<i>nabumetone tab 750 mg</i>	Tier 2	
<i>naproxen sod tab 220mg</i>	Tier 1	OTC
<i>naproxen tab 250 mg</i>	Tier 2	
<i>naproxen tab 375 mg</i>	Tier 2	
<i>naproxen tab 500 mg</i>	Tier 2	
<i>oxaprozin tab 600 mg</i>	Tier 2	
<i>piroxicam cap 10 mg</i>	Tier 2	
<i>piroxicam cap 20 mg</i>	Tier 2	
<i>sulindac tab 150 mg</i>	Tier 2	
<i>sulindac tab 200 mg</i>	Tier 2	
<i>tolmetin sodium cap 400 mg</i>	Tier 2	
<i>tolmetin sodium tab 600 mg</i>	Tier 2	
<i>wal-profen cap 200mg</i>	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** - Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** - Step Therapy

Drug Name	Drug Tier	Requirements/Limits
NSAIDS, COMBINATIONS		
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	Tier 2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	Tier 2	
OPIOID ANALGESICS		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	Tier 2	PA, QL (2700 mL every 30 days); Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-15 mg</i>	Tier 2	PA, QL (400 tabs every 30 days); Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-30 mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-60 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i>	Tier 2	ST, QL (300 caps every 30 days); Subject to initial 7-day limit
<i>butorphanol tartrate inj 1 mg/ml</i>	Tier 2	
<i>butorphanol tartrate inj 2 mg/ml</i>	Tier 2	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	Tier 2	QL (2 bottles every 30 days)
CODEINE SULF TAB 60MG	Tier 4	PA, QL (42 tabs every 30 days); Subject to initial 7-day limit
<i>codeine sulfate tab 30 mg</i>	Tier 2	PA, QL (42 tabs every 30 days); Subject to initial 7-day limit
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	Tier 2	PA, QL (120 lozenges every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl td patch 72hr 12 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days); High Strength Requires PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days); High Strength Requires PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	Tier 2	PA, QL (10 patches every 30 days); High Strength Requires PA
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	Tier 2	PA, QL (Initial fill 30 tabs, then 60 tabs/30 days); High Strength Requires PA
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	Tier 2	PA, QL (Initial fill 30 tabs, then 60 tabs/30 days); High Strength Requires PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	Tier 2	PA, QL (2700 ml every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	Tier 2	PA, QL (240 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	Tier 2	PA, QL (50 tabs every 30 days); Subject to initial 7-day limit

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Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl inj 2 mg/ml</i>	Tier 2	
<i>hydromorphone hcl tab 2 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>hydromorphone hcl tab 4 mg</i>	Tier 2	PA, QL (150 tabs every 30 days); Subject to initial 7-day limit
<i>hydromorphone hcl tab 8 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); Subject to initial 7-day limit
<i>hydromorphone hcl tab er 24hr 8 mg</i>	Tier 2	ST, QL (30 tabs every 30 days)
<i>hydromorphone hcl tab er 24hr 12 mg</i>	Tier 2	ST, QL (30 tabs every 30 days)
<i>hydromorphone hcl tab er 24hr 16 mg</i>	Tier 2	ST, QL (30 tabs every 30 days)
<i>hydromorphone hcl tab er 24hr 32 mg</i>	Tier 2	ST, PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>methadone con 10mg/ml</i>	Tier 2	PA, QL (60 mL every 30 days)
<i>methadone hcl conc 10 mg/ml</i>	Tier 2	PA, QL (30 mL every 30 days)
<i>methadone hcl soln 5 mg/5ml</i>	Tier 2	PA, QL (450 ml every 30 days)
<i>methadone hcl soln 10 mg/5ml</i>	Tier 2	PA, QL (300 mL every 30 days)
<i>methadone hcl tab 5 mg</i>	Tier 2	PA, QL (90 tabs every 30 days)
<i>methadone hcl tab 10 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>methadone hcl tab for oral susp 40 mg</i>	Tier 2	PA, QL (9 tabs every 30 days)
<i>methadose tab 40mg</i>	Tier 2	PA, QL (9 tabs every 30 days)
<i>morphine sulfate beads cap er 24hr 30 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 45 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 60 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 75 mg</i>	Tier 2	PA, QL (30 caps every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate beads cap er 24hr 90 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate beads cap er 24hr 120 mg</i>	Tier 2	PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>morphine sulfate cap er 24hr 10 mg</i>	Tier 2	PA, QL (60 caps every 30 days)
<i>morphine sulfate cap er 24hr 20 mg</i>	Tier 2	PA, QL (60 caps every 30 days)
<i>morphine sulfate cap er 24hr 30 mg</i>	Tier 2	PA, QL (60 caps every 30 days)
<i>morphine sulfate cap er 24hr 50 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate cap er 24hr 60 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate cap er 24hr 80 mg</i>	Tier 2	PA, QL (30 caps every 30 days)
<i>morphine sulfate cap er 24hr 100 mg</i>	Tier 2	PA; High Strength Requires PA
<i>morphine sulfate iv soln 4 mg/ml</i>	Tier 2	
<i>morphine sulfate iv soln 10 mg/ml</i>	Tier 2	
<i>morphine sulfate oral soln 10 mg/5ml</i>	Tier 2	PA, QL (900 mL every 30 days); Subject to initial 7-day limit
<i>morphine sulfate oral soln 20 mg/5ml</i>	Tier 2	PA, QL (675 mL every 30 days); Subject to initial 7-day limit
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	Tier 2	PA, QL (135 mL every 30 days); Subject to initial 7-day limit
<i>morphine sulfate tab 15 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>morphine sulfate tab 30 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
<i>morphine sulfate tab er 15 mg</i>	Tier 2	PA, QL (90 tabs every 30 days)
<i>morphine sulfate tab er 30 mg</i>	Tier 2	PA, QL (90 tabs every 30 days)
<i>morphine sulfate tab er 60 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); High Strength Requires PA

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tab er 100 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>morphine sulfate tab er 200 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>nalbuphine hcl inj 10 mg/ml</i>	Tier 2	PA
<i>nalbuphine hcl inj 20 mg/ml</i>	Tier 2	PA
NUCYNTA ER TAB 50MG	Tier 4	PA, QL (60 tabs every 30 days)
NUCYNTA ER TAB 100MG	Tier 4	PA, QL (60 tabs every 30 days)
NUCYNTA ER TAB 150MG	Tier 4	PA, QL (90 tabs every 30 days); High Strength Requires PA
NUCYNTA ER TAB 200MG	Tier 4	PA, QL (60 tabs every 30 days); High Strength Requires PA
NUCYNTA ER TAB 250MG	Tier 4	PA, QL (60 tabs every 30 days); High Strength Requires PA
NUCYNTA TAB 50MG	Tier 3	PA, QL (120 tabs every 30 days); Subject to initial 7-day limit
NUCYNTA TAB 75MG	Tier 3	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
NUCYNTA TAB 100MG	Tier 3	PA, QL (60 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl cap 5 mg</i>	Tier 2	PA, QL (180 caps every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	Tier 2	PA, QL (90 mL every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl soln 5 mg/5ml</i>	Tier 2	PA, QL (900 mL every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 5 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl tab 10 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 15 mg</i>	Tier 2	PA, QL (120 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 20 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab 30 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	Tier 2	PA; High Strength Requires PA
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	Tier 2	PA; High Strength Requires PA
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	Tier 2	PA, QL (360 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	Tier 2	PA, QL (240 tabs every 30 days); Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxymorphone hcl tab 5 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>oxymorphone hcl tab 10 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); Subject to initial 7-day limit
<i>oxymorphone hcl tab er 12hr 5 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 10 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>oxymorphone hcl tab er 12hr 15 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>oxymorphone hcl tab er 12hr 20 mg</i>	Tier 2	PA, QL (90 tabs every 30 days); High Strength Requires PA
<i>oxymorphone hcl tab er 12hr 30 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>oxymorphone hcl tab er 12hr 40 mg</i>	Tier 2	PA, QL (60 tabs every 30 days); High Strength Requires PA
<i>tramadol hcl tab 50 mg</i>	Tier 2	PA, QL (180 tabs every 30 days); Subject to initial 7-day limit
<i>tramadol hcl tab er 24hr 100 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>tramadol hcl tab er 24hr 200 mg</i>	Tier 2	PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>tramadol hcl tab er 24hr 300 mg</i>	Tier 2	PA, QL (30 tabs every 30 days); High Strength Requires PA
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	Tier 2	PA, QL (40 tabs every 30 days); Subject to initial 7-day limit
XTAMPZA ER CAP 9MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 13.5MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 18MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 27MG	Tier 3	ST, QL (60 caps every 30 days)
XTAMPZA ER CAP 36MG	Tier 3	ST, PA, QL (90 caps every 30 days); High Strength Requires Prior Auth
OPIOID PARTIAL AGONISTS		
BELBUCA MIS 75MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 150MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 300MCG	Tier 3	ST, QL (60 films every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
BELBUCA MIS 450MCG	Tier 3	ST, QL (60 films every 30 days)
BELBUCA MIS 600MCG	Tier 3	ST, PA, QL (60 films every 30 days); High Strength Requires Prior Auth
BELBUCA MIS 750MCG	Tier 3	ST, PA, QL (60 films every 30 days); High Strength Requires Prior Auth
BELBUCA MIS 900MCG	Tier 3	ST, PA, QL (60 films every 30 days); High Strength Requires Prior Auth
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	Tier 2	
<i>buprenorphine td patch weekly 5 mcg/hr</i>	Tier 2	ST, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	Tier 2	ST, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 10 mcg/hr</i>	Tier 2	ST, QL (4 patches every 30 days)
<i>buprenorphine td patch weekly 15 mcg/hr</i>	Tier 2	ST, PA, QL (4 patches every 30 days); High Strength Requires Prior Auth
<i>buprenorphine td patch weekly 20 mcg/hr</i>	Tier 2	ST, PA, QL (4 patches every 30 days); High Strength Requires Prior Auth
SUBLOCADE INJ 100/0.5	Tier 5	
SUBLOCADE INJ 300/1.5	Tier 5	
SALICYLATES		
<i>diflunisal tab 500 mg</i>	Tier 2	
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
EXCEDRIN TAB MIGRAINE	Tier 1	OTC
ANALGESICS OTHER		
<i>acephen sup 325mg</i>	Tier 1	OTC
<i>acephen sup 650mg</i>	Tier 1	OTC
<i>acetaminophen soln 160 mg/5ml</i>	Tier 1	OTC
<i>ed-apap liq 80mg/2.5</i>	Tier 1	OTC
FEVERALL INF SUP 80MG	Tier 1	OTC
<i>non-aspirin chw 80mg</i>	Tier 1	OTC
<i>pain/fever sup 120mg</i>	Tier 1	OTC
<i>tgt apap dro infants</i>	Tier 1	OTC
TYLENOL 8 HR TAB 650MG	Tier 1	OTC

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Drug Name	Drug Tier	Requirements/Limits
TYLENOL INFA SUS 160/5ML	Tier 1	OTC
TYLENOL SORE LIQ THROAT	Tier 1	OTC
TYLENOL TAB 325MG	Tier 1	OTC
TYLENOL TAB 500MG	Tier 1	OTC

SALICYLATES

ALKA-SELTZER TAB 325MG	Tier 1	OTC
ALKA-SELTZER TAB 500MG	Tier 1	OTC
<i>aspirin chw 81mg</i>	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members at risk for preeclampsia, otherwise not covered
<i>aspirin low tab 81mg ec</i>	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members at risk for preeclampsia, otherwise not covered
<i>aspirin tab 325mg</i>	Tier 0	OTC
<i>aspirin tab 500 mg</i>	Tier 1	OTC
<i>bayer asa tab 325mg</i>	Tier 0	OTC
BAYER PLUS TAB 500MG	Tier 1	OTC
BUFFERIN TAB 325MG	Tier 1	OTC
ECOTRIN M/S TAB 500MG EC	Tier 1	OTC

ANESTHETICS

LOCAL ANESTHETICS

<i>lidocaine hcl local inj 0.5%</i>	Tier 2	
<i>lidocaine hcl local inj 1%</i>	Tier 2	
<i>lidocaine hcl local inj 2%</i>	Tier 2	
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	Tier 2	
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	Tier 2	
<i>lidocaine hcl local preservative free (pf) inj 2%</i>	Tier 2	

ANORECTAL AND RELATED PRODUCTS

RECTAL COMBINATIONS

<i>hemorrhoidal cre</i>	Tier 1	OTC
<i>hemorrhoidal gel 0.25-50%</i>	Tier 1	OTC
<i>hemorrhoidal sup</i>	Tier 1	OTC

ANTACIDS

ANTACID COMBINATIONS

<i>antacid plus sus gas rel</i>	Tier 1	OTC
<i>maalox advan sus max st</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
ANTACIDS - ALUMINUM SALTS		
ALUM HYDROX SUS 320/5ML	Tier 1	OTC
ANTACIDS - BICARBONATE		
sodium bicarbonate tab 650 mg	Tier 1	OTC
ANTACIDS - CALCIUM SALTS		
cal antacid chw 1000mg	Tier 1	OTC
calc antacid chw 500mg	Tier 1	OTC
calc antacid chw 750mg	Tier 1	OTC
CALCIUM CARB TAB 648MG	Tier 1	OTC
calcium carbonate (antacid) susp 1250 mg/5ml	Tier 1	OTC
ANTHELMINTICS		
ANTHELMINTICS		
pinworm med sus 144mg/ml	Tier 1	OTC
ANTI-INFECTIVES		
ANTHELMINTICS		
albendazole tab 200 mg	Tier 4	QL (336 tabs every 365 days)
EMVERM CHW 100MG	Tier 4	QL (12 tabs every 365 days)
ivermectin tab 3 mg	Tier 2	PA
praziquantel tab 600 mg	Tier 2	QL (24 tabs every 365 days)
ANTI-BACTERIALS - MISCELLANEOUS		
amikacin sulfate inj 1 gm/4ml (250 mg/ml)	Tier 2	
amikacin sulfate inj 500 mg/2ml (250 mg/ml)	Tier 2	
fosfomycin tromethamine powd pack 3 gm (base equivalent)	Tier 2	
gentamicin sulfate inj 40 mg/ml	Tier 2	
neomycin sulfate tab 500 mg	Tier 2	
paromomycin sulfate cap 250 mg	Tier 2	
sulfadiazine tab 500 mg	Tier 2	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	Tier 2	
sulfamethoxazole-trimethoprim tab 400-80 mg	Tier 2	
sulfamethoxazole-trimethoprim tab 800-160 mg	Tier 2	
tinidazole tab 250 mg	Tier 2	
tinidazole tab 500 mg	Tier 2	
tobramycin sulfate for inj 1.2 gm	Tier 2	QL (2 vials every day); Initial limit allows up to a 10 day course every 365 days

Drug Name	Drug Tier	Requirements/Limits
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	Tier 2	QL (36 mL every day); Initial limit allows up to a 10 day course every 365 days
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	Tier 2	QL (36 mL every day); Initial limit allows up to a 10 day course every 365 days

ANTIFUNGALS

<i>amphotericin b for iv soln 50 mg</i>	Tier 2	QL (3 vials every day); Initial limit allows up to a 14 day course every 365 days
CRESEMBA CAP 74.5MG	Tier 4	
CRESEMBA CAP 186 MG	Tier 4	
<i>fluconazole for susp 10 mg/ml</i>	Tier 2	
<i>fluconazole for susp 40 mg/ml</i>	Tier 2	
<i>fluconazole tab 50 mg</i>	Tier 2	
<i>fluconazole tab 100 mg</i>	Tier 2	
<i>fluconazole tab 150 mg</i>	Tier 2	
<i>fluconazole tab 200 mg</i>	Tier 2	
<i>griseofulvin microsize susp 125 mg/5ml</i>	Tier 2	
<i>griseofulvin microsize tab 500 mg</i>	Tier 2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	Tier 2	
<i>griseofulvin ultramicrosize tab 250 mg</i>	Tier 2	
<i>itraconazole cap 100 mg</i>	Tier 2	PA
<i>itraconazole oral soln 10 mg/ml</i>	Tier 2	PA
<i>nystatin tab 500000 unit</i>	Tier 2	
<i>posaconazole susp 40 mg/ml</i>	Tier 2	PA
<i>posaconazole tab delayed release 100 mg</i>	Tier 4	PA
<i>terbinafine hcl tab 250 mg</i>	Tier 2	
<i>voriconazole for susp 40 mg/ml</i>	Tier 4	PA
<i>voriconazole tab 50 mg</i>	Tier 4	PA
<i>voriconazole tab 200 mg</i>	Tier 4	PA

ANTIMALARIALS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	Tier 2	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	Tier 2	
<i>chloroquine phosphate tab 250 mg</i>	Tier 2	
<i>chloroquine phosphate tab 500 mg</i>	Tier 2	
COARTEM TAB 20-120MG	Tier 4	
<i>mefloquine hcl tab 250 mg</i>	Tier 2	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	Tier 2	
<i>quinine sulfate cap 324 mg</i>	Tier 2	

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	Tier 2	QL (900 mL every 30 days)
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C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 13
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>abacavir sulfate tab 300 mg (base equiv)</i>	Tier 2	QL (60 tabs every 30 days)
APTIVUS CAP 250MG	Tier 3	QL (120 caps every 30 days)
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	Tier 2	QL (30 caps every 30 days)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	Tier 2	QL (60 caps every 30 days)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	Tier 2	QL (30 caps every 30 days)
<i>darunavir tab 600 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>darunavir tab 800 mg</i>	Tier 2	QL (30 tabs every 30 days)
EDURANT TAB 25MG	Tier 3	QL (60 tabs every 30 days)
<i>efavirenz cap 50 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>efavirenz cap 200 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>efavirenz tab 600 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine caps 200 mg</i>	Tier 2	QL (30 caps every 30 days)
EMTRIVA SOL 10MG/ML	Tier 3	QL (680 ml every 28 days)
<i>etravirine tab 100 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>etravirine tab 200 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	Tier 2	QL (120 tabs every 30 days)
FUZEON INJ 90MG	Tier 5	PA, QL (60 vials every 30 days)
INTELENCE TAB 25MG	Tier 3	QL (120 tabs every 30 days)
ISENTRESS CHW 25MG	Tier 3	QL (180 tabs every 30 days)
ISENTRESS CHW 100MG	Tier 3	QL (180 tabs every 30 days)
ISENTRESS HD TAB 600MG	Tier 3	QL (60 tabs every 30 days)
ISENTRESS POW 100MG	Tier 3	QL (60 packets every 30 days)
ISENTRESS TAB 400MG	Tier 3	QL (120 tabs every 30 days)
<i>lamivudine oral soln 10 mg/ml</i>	Tier 2	QL (960 ml every 30 days)
<i>lamivudine tab 150 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>lamivudine tab 300 mg</i>	Tier 2	QL (30 tabs every 30 days)
LEXIVA SUS 50MG/ML	Tier 3	QL (1575 mL every 28 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>maraviroc tab 150 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>maraviroc tab 300 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>nevirapine susp 50 mg/5ml</i>	Tier 2	QL (1200 mL every 30 days)
<i>nevirapine tab 200 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>nevirapine tab er 24hr 100 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>nevirapine tab er 24hr 400 mg</i>	Tier 2	QL (30 tabs every 30 days)
NORVIR POW 100MG	Tier 3	QL (360 packets every 30 days)
NORVIR SOL 80MG/ML	Tier 3	QL (480 mL every 30 days)
PREZISTA SUS 100MG/ML	Tier 3	QL (400 ml every 30 days)
PREZISTA TAB 75MG	Tier 3	QL (300 tabs every 30 days)
PREZISTA TAB 150MG	Tier 3	QL (180 tabs every 30 days)
PREZISTA TAB 600MG	Tier 3	QL (60 tabs every 30 days)
PREZISTA TAB 800MG	Tier 3	QL (30 tabs every 30 days)
RETROVIR INJ 10MG/ML	Tier 3	
REYATAZ POW 50MG	Tier 3	QL (180 packets every 30 days)
<i>ritonavir tab 100 mg</i>	Tier 2	QL (360 tabs every 30 days)
SELZENTRY SOL 20MG/ML	Tier 3	QL (1840 mL every 30 days)
SELZENTRY TAB 25MG	Tier 3	QL (240 tabs every 30 days)
SELZENTRY TAB 75MG	Tier 3	QL (60 tabs every 30 days)
<i>stavudine cap 15 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>stavudine cap 20 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>stavudine cap 30 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>stavudine cap 40 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	Tier 2	QL (30 tabs every 30 days)
TIVICAY PD TAB 5MG	Tier 3	QL (360 tabs every 30 days)
TIVICAY TAB 10MG	Tier 3	QL (240 tabs every 30 days)
TIVICAY TAB 25MG	Tier 3	QL (60 tabs every 30 days)
TIVICAY TAB 50MG	Tier 3	QL (60 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 15
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
TROGARZO INJ 150MG/ML	Tier 5	
TYBOST TAB 150MG	Tier 3	QL (30 tabs every 30 days)
VIRACEPT TAB 250MG	Tier 3	QL (300 tabs every 30 days)
VIRACEPT TAB 625MG	Tier 3	QL (120 tabs every 30 days)
VIREAD POW 40MG/GM	Tier 3	QL (240 gm every 30 days)
VIREAD TAB 150MG	Tier 3	QL (30 tabs every 30 days)
VIREAD TAB 200MG	Tier 3	QL (30 tabs every 30 days)
VIREAD TAB 250MG	Tier 3	QL (30 tabs every 30 days)
<i>zidovudine cap 100 mg</i>	Tier 2	QL (180 caps every 30 days)
<i>zidovudine syrup 10 mg/ml</i>	Tier 2	QL (1920 ml every 30 days)
<i>zidovudine tab 300 mg</i>	Tier 2	QL (60 tabs every 30 days)

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
BIKTARVY TAB	Tier 3	QL (30 tabs every 30 days)
CIMDUO TAB 300-300	Tier 3	QL (30 tabs every 30 days)
DESCOVY TAB 120-15MG	Tier 3	QL (30 tabs every 30 days)
DESCOVY TAB 200/25MG	Tier 3	QL (30 tabs every 30 days); Exception process available for \$0 copay when medically necessary for pre-exposure prophylaxis
DOVATO TAB 50-300MG	Tier 3	QL (30 tabs every 30 days)
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	Tier 2	QL (30 tabs every 30 days); \$0 copay for pre-exposure prophylaxis
EVOTAZ TAB 300-150	Tier 3	QL (30 tabs every 30 days)
GENVOYA TAB	Tier 3	QL (30 tabs every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>lamivudine-zidovudine tab 150-300 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	Tier 2	QL (480 ml every 30 days)
<i>lopinavir-ritonavir tab 100-25 mg</i>	Tier 2	QL (300 tabs every 30 days)
<i>lopinavir-ritonavir tab 200-50 mg</i>	Tier 2	QL (120 tabs every 30 days)
ODEFSEY TAB	Tier 3	QL (30 tabs every 30 days)
PREZCOBIX TAB 800-150	Tier 3	QL (30 tabs every 30 days)
SYM TUZA TAB	Tier 4	QL (30 tabs every 30 days)
TRIUMEQ PD TAB	Tier 4	QL (180 tabs every 30 days)
TRIUMEQ TAB	Tier 4	QL (30 tabs every 30 days)

ANTITUBERCULAR AGENTS

<i>cycloserine cap 250 mg</i>	Tier 2	
<i>ethambutol hcl tab 100 mg</i>	Tier 2	
<i>ethambutol hcl tab 400 mg</i>	Tier 2	
<i>isoniazid inj 100 mg/ml</i>	Tier 2	
<i>isoniazid syrup 50 mg/5ml</i>	Tier 2	
<i>isoniazid tab 100 mg</i>	Tier 2	
<i>isoniazid tab 300 mg</i>	Tier 2	
PASER GRA 4GM	Tier 4	
PRIFTIN TAB 150MG	Tier 3	
<i>pyrazinamide tab 500 mg</i>	Tier 2	
<i>rifabutin cap 150 mg</i>	Tier 2	
<i>rifampin cap 150 mg</i>	Tier 2	
<i>rifampin cap 300 mg</i>	Tier 2	
<i>rifampin for inj 600 mg</i>	Tier 2	
SIR TURO TAB 20MG	Tier 6	PA
SIR TURO TAB 100MG	Tier 6	PA
TRECA TOR TAB 250MG	Tier 3	

ANTIVIRALS

<i>acyclovir cap 200 mg</i>	Tier 2	
<i>acyclovir susp 200 mg/5ml</i>	Tier 2	
<i>acyclovir tab 400 mg</i>	Tier 2	
<i>acyclovir tab 800 mg</i>	Tier 2	
<i>adefovir dipivoxil tab 10 mg</i>	Tier 5	
BARA CLUDE SOL	Tier 5	PA, QL (630 mL every 30 days)
<i>cidofovir iv inj 75 mg/ml</i>	Tier 2	
<i>entecavir tab 0.5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>entecavir tab 1 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>EPIVIR HBV SOL 5MG/ML</i>	Tier 3	
<i>famciclovir tab 125 mg</i>	Tier 2	
<i>famciclovir tab 250 mg</i>	Tier 2	
<i>famciclovir tab 500 mg</i>	Tier 2	
<i>lamivudine tab 100 mg (hbv)</i>	Tier 2	
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	Tier 2	QL (40 caps every 90 days)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	Tier 2	QL (20 caps every 90 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	Tier 2	QL (20 caps every 90 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	Tier 2	QL (360 mL every 90 days)
RELENZA MIS DISKHALE	Tier 3	QL (2 inhalers every 90 days)
<i>ribavirin for inhal soln 6 gm</i>	Tier 2	
<i>rimantadine hydrochloride tab 100 mg</i>	Tier 2	
<i>valacyclovir hcl tab 1 gm</i>	Tier 2	
<i>valacyclovir hcl tab 500 mg</i>	Tier 2	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	Tier 5	PA, QL (1000 mL every 30 days)
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	Tier 5	PA, QL (120 tabs every 30 days)
VEMLIDY TAB 25MG	Tier 4	PA, QL (30 tabs every 30 days)

CEPHALOSPORINS

<i>cefaclor cap 250 mg</i>	Tier 2	
<i>cefaclor cap 500 mg</i>	Tier 2	
<i>cefaclor for susp 125 mg/5ml</i>	Tier 2	
<i>cefaclor for susp 250 mg/5ml</i>	Tier 2	
<i>cefaclor for susp 375 mg/5ml</i>	Tier 2	
<i>cefadroxil cap 500 mg</i>	Tier 2	
<i>cefadroxil for susp 250 mg/5ml</i>	Tier 2	
<i>cefadroxil for susp 500 mg/5ml</i>	Tier 2	
<i>cefadroxil tab 1 gm</i>	Tier 2	
<i>cefazolin sodium for inj 1 gm</i>	Tier 2	
<i>cefdinir cap 300 mg</i>	Tier 2	
<i>cefdinir for susp 125 mg/5ml</i>	Tier 2	
<i>cefdinir for susp 250 mg/5ml</i>	Tier 2	
<i>cefepime hcl for inj 1 gm</i>	Tier 2	
<i>cefepime hcl for iv soln 2 gm</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>cefixime cap 400 mg</i>	Tier 2	
<i>cefixime for susp 100 mg/5ml</i>	Tier 2	
<i>cefixime for susp 200 mg/5ml</i>	Tier 2	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	Tier 2	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	Tier 2	
<i>cefpodoxime proxetil tab 100 mg</i>	Tier 2	
<i>cefpodoxime proxetil tab 200 mg</i>	Tier 2	
<i>cefprozil for susp 125 mg/5ml</i>	Tier 2	
<i>cefprozil for susp 250 mg/5ml</i>	Tier 2	
<i>cefprozil tab 250 mg</i>	Tier 2	
<i>cefprozil tab 500 mg</i>	Tier 2	
<i>ceftazidime for iv soln 2 gm</i>	Tier 2	
<i>ceftriaxone sodium for inj 1 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 2 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 10 gm</i>	Tier 2	QL (0.5 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 250 mg</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for inj 500 mg</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for iv soln 1 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>ceftriaxone sodium for iv soln 2 gm</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>cefuroxime axetil tab 250 mg</i>	Tier 2	
<i>cefuroxime axetil tab 500 mg</i>	Tier 2	
<i>cephalexin cap 250 mg</i>	Tier 2	
<i>cephalexin cap 500 mg</i>	Tier 2	
<i>cephalexin cap 750 mg</i>	Tier 2	
<i>cephalexin for susp 125 mg/5ml</i>	Tier 2	
<i>cephalexin for susp 250 mg/5ml</i>	Tier 2	
<i>cephalexin tab 250 mg</i>	Tier 2	
<i>cephalexin tab 500 mg</i>	Tier 2	
SUPRAX CHW 100MG	Tier 3	

Drug Name	Drug Tier	Requirements/Limits
SUPRAX CHW 200MG	Tier 3	
SUPRAX SUS 500/5ML	Tier 3	
tazicef inj 1gm	Tier 2	

ERYTHROMYCINS/MACROLIDES

azithromycin for susp 100 mg/5ml	Tier 2	
azithromycin for susp 200 mg/5ml	Tier 2	
azithromycin powd pack for susp 1 gm	Tier 2	
azithromycin tab 250 mg	Tier 2	
azithromycin tab 500 mg	Tier 2	
azithromycin tab 600 mg	Tier 2	
clarithromycin for susp 125 mg/5ml	Tier 2	
clarithromycin for susp 250 mg/5ml	Tier 2	
clarithromycin tab 250 mg	Tier 2	
clarithromycin tab 500 mg	Tier 2	
clarithromycin tab er 24hr 500 mg	Tier 2	
DIFICID SUS	Tier 3	PA
DIFICID TAB 200MG	Tier 3	PA
ery-tab tab 250mg ec	Tier 2	
ery-tab tab 333mg ec	Tier 2	
ery-tab tab 500mg ec	Tier 2	
erythrocin tab 250mg	Tier 2	
erythromycin ethylsuccinate for susp 200 mg/5ml	Tier 2	
erythromycin ethylsuccinate for susp 400 mg/5ml	Tier 2	
erythromycin ethylsuccinate tab 400 mg	Tier 2	
erythromycin tab 250 mg	Tier 2	
erythromycin tab 500 mg	Tier 2	
erythromycin w/ delayed release particles cap 250 mg	Tier 2	

FLUOROQUINOLONES

BAXDELA TAB 450MG	Tier 4	
CIPRO (10%) SUS 500MG/5	Tier 4	
ciprofloxacin hcl tab 100 mg (base equiv)	Tier 2	
ciprofloxacin hcl tab 250 mg (base equiv)	Tier 2	
ciprofloxacin hcl tab 500 mg (base equiv)	Tier 2	
ciprofloxacin hcl tab 750 mg (base equiv)	Tier 2	
levofloxacin iv soln 25 mg/ml	Tier 2	QL (40 mL every day); Initial limit allows up to a 14 day course every 365 days
levofloxacin oral soln 25 mg/ml	Tier 2	
levofloxacin tab 250 mg	Tier 2	
levofloxacin tab 500 mg	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>levofloxacin tab 750 mg</i>	Tier 2	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	Tier 2	
<i>ofloxacin tab 300 mg</i>	Tier 2	
<i>ofloxacin tab 400 mg</i>	Tier 2	

HEPATITIS C

EPCLUSA PAK 150-37.5	Tier 5	PA, QL (28 pellets every 28 days)
EPCLUSA PAK 200-50MG	Tier 5	PA, QL (28 pellets every 28 days)
EPCLUSA TAB 200-50MG	Tier 5	PA, QL (28 tabs every 28 days)
EPCLUSA TAB 400-100	Tier 5	PA, QL (28 tabs every 28 days)
HARVONI PAK	Tier 5	PA, QL (28 pellets every 28 days)
HARVONI PAK 45-200MG	Tier 5	PA, QL (28 pellets every 28 days)
HARVONI TAB 45-200MG	Tier 5	PA, QL (28 tabs every 28 days)
HARVONI TAB 90-400MG	Tier 5	PA, QL (28 tabs every 28 days)
PEGASYS INJ	Tier 5	PA
PEGASYS INJ 180MCG/ML	Tier 5	PA
<i>ribavirin cap 200 mg</i>	Tier 2	PA
<i>ribavirin tab 200 mg</i>	Tier 2	PA
SOVALDI PAK 150MG	Tier 6	ST, PA, QL (28 pellets every 28 days)
SOVALDI PAK 200MG	Tier 6	ST, PA, QL (28 pellets every 28 days)
SOVALDI TAB 200MG	Tier 6	ST, PA, QL (28 tabs every 28 days)
SOVALDI TAB 400MG	Tier 6	ST, PA, QL (28 tabs every 28 days)
VOSEVI TAB	Tier 5	PA, QL (28 tabs every 28 days)
ZEPATIER TAB 50-100MG	Tier 6	ST, PA, QL (28 tabs every 28 days)

MISCELLANEOUS

ALINIA SUS 100/5ML	Tier 4	QL (540 mL every 30 days)
<i>atovaquone susp 750 mg/5ml</i>	Tier 2	
<i>aztreonam for inj 1 gm</i>	Tier 2	
<i>aztreonam for inj 2 gm</i>	Tier 2	
<i>clindamycin hcl cap 75 mg</i>	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin hcl cap 150 mg</i>	Tier 2	
<i>clindamycin hcl cap 300 mg</i>	Tier 2	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	Tier 2	
<i>clindamycin phosphate inj 9 gm/60ml</i>	Tier 2	
<i>clindamycin phosphate inj 300 mg/2ml</i>	Tier 2	
<i>clindamycin phosphate inj 600 mg/4ml</i>	Tier 2	
<i>dapsone tab 25 mg</i>	Tier 2	
<i>dapsone tab 100 mg</i>	Tier 2	
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>linezolid for susp 100 mg/5ml</i>	Tier 2	
LINEZOLID INJ 2MG/ML	Tier 2	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	Tier 2	
<i>linezolid tab 600 mg</i>	Tier 2	
<i>meropenem iv for soln 1 gm</i>	Tier 2	QL (6 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>meropenem iv for soln 500 mg</i>	Tier 2	QL (12 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>methenamine hippurate tab 1 gm</i>	Tier 2	
<i>metronidazole cap 375 mg</i>	Tier 2	
<i>metronidazole iv soln 500 mg/100ml</i>	Tier 2	
<i>metronidazole tab 250 mg</i>	Tier 2	
<i>metronidazole tab 500 mg</i>	Tier 2	
<i>nitazoxanide tab 500 mg</i>	Tier 2	QL (20 tabs every 30 days)
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin susp 25 mg/5ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>pentamidine isethionate for inj soln 300 mg</i>	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>pentamidine isethionate for nebulization soln 300 mg</i>	Tier 2	
<i>polymyxin b sulfate for inj 500000 unit</i>	Tier 2	
<i>pyrimethamine tab 25 mg</i>	Tier 4	PA
<i>trimethoprim tab 100 mg</i>	Tier 2	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	Tier 2	QL (80 caps every 10 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	Tier 2	QL (80 caps every 10 days)
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	Tier 2	QL (2 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	Tier 2	QL (0.3 bottles every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	Tier 2	QL (0.3 bottles every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	Tier 2	QL (4 vials every day); Initial limit allows up to a 14 day course every 365 days
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	Tier 2	QL (4 vials every day); Initial limit allows up to a 14 day course every 365 days
XIFAXAN TAB 200MG	Tier 3	QL (9 tabs every 30 days)
XIFAXAN TAB 550MG	Tier 3	PA

PENICILLINS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	Tier 2	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	Tier 2	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	Tier 2	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	Tier 2	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	Tier 2	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	Tier 2	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	Tier 2	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	Tier 2	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	Tier 2	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	Tier 2	
<i>amoxicillin (trihydrate) cap 250 mg</i>	Tier 2	
<i>amoxicillin (trihydrate) cap 500 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	Tier 2	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	Tier 2	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	Tier 2	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	Tier 2	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	Tier 2	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	Tier 2	
<i>amoxicillin (trihydrate) tab 500 mg</i>	Tier 2	
<i>amoxicillin (trihydrate) tab 875 mg</i>	Tier 2	
<i>ampicillin cap 500 mg</i>	Tier 2	
<i>ampicillin sodium for inj 1 gm</i>	Tier 2	
<i>ampicillin sodium for inj 2 gm</i>	Tier 2	
<i>dicloxacillin sodium cap 250 mg</i>	Tier 2	
<i>dicloxacillin sodium cap 500 mg</i>	Tier 2	
<i>penicillin g potassium for inj 5000000 unit</i>	Tier 2	
<i>penicillin g potassium for inj 20000000 unit</i>	Tier 2	
<i>penicillin g sodium for inj 5000000 unit</i>	Tier 2	
<i>penicillin v potassium for soln 125 mg/5ml</i>	Tier 2	
<i>penicillin v potassium for soln 250 mg/5ml</i>	Tier 2	
<i>penicillin v potassium tab 250 mg</i>	Tier 2	
<i>penicillin v potassium tab 500 mg</i>	Tier 2	
<i>pfizerpen inj 20000000</i>	Tier 2	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	Tier 2	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	Tier 2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	Tier 2	

TETRACYCLINES

<i>avidoxy tab 100mg</i>	Tier 2	
<i>demeclocycline hcl tab 150 mg</i>	Tier 2	
<i>demeclocycline hcl tab 300 mg</i>	Tier 2	
<i>doxy 100 inj 100mg</i>	Tier 2	
<i>doxycycline hyclate cap 50 mg</i>	Tier 2	
<i>doxycycline hyclate cap 100 mg</i>	Tier 2	
<i>doxycycline hyclate for inj 100 mg</i>	Tier 2	
<i>doxycycline hyclate tab 20 mg</i>	Tier 2	
<i>doxycycline hyclate tab 100 mg</i>	Tier 2	
<i>doxycycline monohydrate cap 50 mg</i>	Tier 2	
<i>doxycycline monohydrate cap 100 mg</i>	Tier 2	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	Tier 2	
<i>doxycycline monohydrate tab 50 mg</i>	Tier 2	
<i>doxycycline monohydrate tab 75 mg</i>	Tier 2	
<i>doxycycline monohydrate tab 150 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 24
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl cap 50 mg</i>	Tier 2	
<i>minocycline hcl cap 75 mg</i>	Tier 2	
<i>minocycline hcl cap 100 mg</i>	Tier 2	
<i>minocycline hcl tab 50 mg</i>	Tier 2	
<i>minocycline hcl tab 75 mg</i>	Tier 2	
<i>minocycline hcl tab 100 mg</i>	Tier 2	
<i>tetracycline hcl cap 250 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>tetracycline hcl cap 500 mg</i>	Tier 2	QL (120 caps every 30 days)
VIBRAMYCIN SYP 50MG/5ML	Tier 4	

ANTIDIARRHEAL/PROBIOTIC AGENTS

ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.

<i>soothe tab 262mg</i>	Tier 1	OTC
<i>stomach relf chw 262mg</i>	Tier 1	OTC
<i>stomach relf sus 262/15ml</i>	Tier 1	OTC
<i>stomach relf sus 525/15ml</i>	Tier 1	OTC

ANTIPERISTALTIC AGENTS

ANTI-DIARRHE LIQ 1MG/5ML	Tier 1	OTC
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	Tier 2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	Tier 2	
IMODIUM A-D CAP 2MG	Tier 1	OTC
IMODIUM A-D SOL 1MG/7.5	Tier 1	OTC
IMODIUM A-D TAB 2MG	Tier 1	OTC
MOTOFEN TAB 1-0.025	Tier 4	

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

<i>busulfan inj 6 mg/ml</i>	Tier 2	
<i>carmustine for inj 100 mg</i>	Tier 2	
<i>cyclophosphamide cap 25 mg</i>	Tier 2	
<i>cyclophosphamide cap 50 mg</i>	Tier 2	
<i>cyclophosphamide for inj 1 gm</i>	Tier 5	
<i>cyclophosphamide for inj 2 gm</i>	Tier 5	
<i>cyclophosphamide for inj 500 mg</i>	Tier 5	
<i>dacarbazine for inj 100 mg</i>	Tier 2	
<i>dacarbazine for inj 200 mg</i>	Tier 2	
EMCYT CAP 140MG	Tier 5	
GLEOSTINE CAP 10MG	Tier 5	
GLEOSTINE CAP 40MG	Tier 5	
GLEOSTINE CAP 100MG	Tier 5	
GLIADEL WAF 7.7MG	Tier 3	
<i>ifosfamide for inj 1 gm</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	Tier 2	
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	Tier 2	
LEUKERAN TAB 2MG	Tier 3	
MATULANE CAP 50MG	Tier 3	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	Tier 2	
<i>melphalan tab 2 mg</i>	Tier 2	
TEMODAR INJ 100MG	Tier 5	PA
<i>temozolomide cap 5 mg</i>	Tier 5	PA
<i>temozolomide cap 20 mg</i>	Tier 5	PA
<i>temozolomide cap 100 mg</i>	Tier 5	PA
<i>temozolomide cap 140 mg</i>	Tier 5	PA
<i>temozolomide cap 180 mg</i>	Tier 5	PA
<i>temozolomide cap 250 mg</i>	Tier 5	PA

ANTIBIOTICS

<i>adriamycin inj 50mg</i>	Tier 2	
<i>bleomycin sulfate for inj 15 unit</i>	Tier 2	
<i>bleomycin sulfate for inj 30 unit</i>	Tier 2	
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	Tier 2	
<i>doxorubicin hcl for inj 10 mg</i>	Tier 2	
<i>doxorubicin hcl inj 2 mg/ml</i>	Tier 2	
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	Tier 2	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	Tier 2	
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	Tier 2	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	Tier 2	
<i>mitomycin for iv soln 5 mg</i>	Tier 2	
<i>mitomycin for iv soln 20 mg</i>	Tier 2	
<i>mitomycin for iv soln 40 mg</i>	Tier 2	
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	Tier 5	
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	Tier 5	
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	Tier 5	

ANTIMETABOLITES

<i>azacitidine for inj 100 mg</i>	Tier 5	PA
<i>capecitabine tab 150 mg</i>	Tier 5	PA
<i>capecitabine tab 500 mg</i>	Tier 5	PA
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	Tier 2	
<i>clofarabine iv soln 1 mg/ml</i>	Tier 2	
<i>cytarabine inj 20 mg/ml</i>	Tier 2	
<i>cytarabine inj pf 20 mg/ml</i>	Tier 2	
<i>cytarabine inj pf 100 mg/ml</i>	Tier 2	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>decitabine for inj 50 mg</i>	Tier 5	PA
<i>floxuridine for inj 0.5 gm</i>	Tier 2	
<i>fludarabine phosphate for inj 50 mg</i>	Tier 2	
<i>fludarabine phosphate inj 25 mg/ml</i>	Tier 2	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	Tier 2	
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	Tier 2	
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	Tier 2	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	Tier 2	
<i>gemcitabine hcl for inj 1 gm</i>	Tier 5	
<i>gemcitabine hcl for inj 2 gm</i>	Tier 5	
<i>gemcitabine hcl for inj 200 mg</i>	Tier 5	
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	Tier 5	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	Tier 5	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	Tier 5	
<i>mercaptopurine tab 50 mg</i>	Tier 2	
<i>methotrexate sodium for inj 1 gm</i>	Tier 2	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	Tier 2	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	Tier 2	
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	Tier 5	
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	Tier 5	
TABLOID TAB 40MG	Tier 3	
ANTIMITOTIC, TAXOIDS		
<i>docetaxel for inj conc 20 mg/ml</i>	Tier 2	
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	Tier 2	
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	Tier 2	
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	Tier 2	
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	Tier 2	
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	Tier 2	
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	Tier 2	
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	Tier 2	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	Tier 2	
<i>paclitaxel protein-bound particles for iv susp 100 mg</i>	Tier 2	
ANTIMITOTIC, VINCA ALKALOIDS		
<i>vinblastine sulfate inj 1 mg/ml</i>	Tier 2	
<i>vincristine sulfate iv soln 1 mg/ml</i>	Tier 2	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	Tier 2	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	Tier 2	
ANTINEOPLASTIC, BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	Tier 5	PA, QL (120 tabs every 30 days)
VENCLEXTA TAB 50MG	Tier 5	PA, QL (120 tabs every 30 days)
VENCLEXTA TAB 100MG	Tier 5	PA, QL (180 tabs every 30 days)
VENCLEXTA TAB START PK	Tier 5	PA, QL (1 pack every 28 days)
BIOLOGIC RESPONSE MODIFIERS		
ERBITUX INJ 100MG	Tier 5	PA
ERBITUX INJ 200MG	Tier 5	PA
ERIVEDGE CAP 150MG	Tier 5	PA, QL (30 caps every 30 days)
GAZYVA INJ 25MG/ML	Tier 5	PA
KADCYLA INJ 100MG	Tier 5	PA
KADCYLA INJ 160MG	Tier 5	PA
KEYTRUDA INJ 100MG/4ML	Tier 5	PA
POLIVY INJ 30MG	Tier 6	PA
POLIVY INJ 140MG	Tier 6	PA
POMALYST CAP 1MG	Tier 5	PA, QL (21 caps every 28 days)
POMALYST CAP 2MG	Tier 5	PA, QL (21 caps every 28 days)
POMALYST CAP 3MG	Tier 5	PA, QL (21 caps every 28 days)
POMALYST CAP 4MG	Tier 5	PA, QL (21 caps every 28 days)
REVLIMID CAP 2.5MG	Tier 5	PA, QL (28 caps every 28 days)
REVLIMID CAP 5MG	Tier 5	PA, QL (28 caps every 28 days)
REVLIMID CAP 10MG	Tier 5	PA, QL (28 caps every 28 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 28
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
REVLIMID CAP 15MG	Tier 5	PA, QL (28 caps every 28 days)
REVLIMID CAP 20MG	Tier 5	PA, QL (21 caps every 28 days)
REVLIMID CAP 25MG	Tier 5	PA, QL (21 caps every 28 days)
THALOMID CAP 50MG	Tier 5	PA, QL (28 caps every 28 days)
THALOMID CAP 100MG	Tier 5	PA, QL (28 caps every 28 days)
THALOMID CAP 150MG	Tier 5	PA, QL (56 caps every 28 days)
THALOMID CAP 200MG	Tier 5	PA, QL (56 caps every 28 days)
TICE BCG INJ	Tier 3	

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	Tier 5	PA, QL (120 tabs every 30 days)
<i>abiraterone acetate tab 500 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>anastrozole tab 1 mg</i>	Tier 2	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>bicalutamide tab 50 mg</i>	Tier 2	
ELIGARD INJ 7.5MG	Tier 5	PA
ELIGARD INJ 22.5MG	Tier 5	PA
ELIGARD INJ 30MG	Tier 5	PA
ELIGARD INJ 45MG	Tier 5	PA
ERLEADA TAB 60MG	Tier 5	PA, QL (120 tabs every 30 days)
ERLEADA TAB 240MG	Tier 5	PA, QL (30 tabs every 30 days)
<i>exemestane tab 25 mg</i>	Tier 2	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>flutamide cap 125 mg</i>	Tier 2	
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	Tier 5	PA
<i>letrozole tab 2.5 mg</i>	Tier 2	
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	Tier 5	PA
LYSODREN TAB 500MG	Tier 3	
<i>megestrol acetate susp 40 mg/ml</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>megestrol acetate tab 20 mg</i>	Tier 2	
<i>megestrol acetate tab 40 mg</i>	Tier 2	
<i>nilutamide tab 150 mg</i>	Tier 2	
NUBEQA TAB 300MG	Tier 5	PA, QL (120 tabs every 30 days)
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	Tier 0	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	Tier 0	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>toremifene citrate tab 60 mg (base equivalent)</i>	Tier 2	
XTANDI CAP 40MG	Tier 5	PA, QL (120 caps every 30 days)
XTANDI TAB 40MG	Tier 5	PA, QL (120 tabs every 30 days)
XTANDI TAB 80MG	Tier 5	PA, QL (60 tabs every 30 days)
YONSA TAB 125MG	Tier 5	PA, QL (120 tabs every 30 days)

KINASE INHIBITORS

ALECENSA CAP 150MG	Tier 5	PA, QL (240 caps every 30 days)
CABOMETRYX TAB 20MG	Tier 5	PA, QL (30 tabs every 30 days)
CABOMETRYX TAB 40MG	Tier 5	PA, QL (30 tabs every 30 days)
CABOMETRYX TAB 60MG	Tier 5	PA, QL (30 tabs every 30 days)
CALQUENCE CAP 100MG	Tier 6	PA, QL (60 caps every 30 days)
CALQUENCE TAB 100MG	Tier 6	PA, QL (60 tabs every 30 days)
CAPRELSA TAB 100MG	Tier 5	PA, QL (60 tabs every 30 days)
CAPRELSA TAB 300MG	Tier 5	PA, QL (30 tabs every 30 days)
COMETRIQ KIT 60MG	Tier 5	PA, QL (1 kit every 28 days)
COMETRIQ KIT 100MG	Tier 5	PA, QL (1 kit every 28 days)
COMETRIQ KIT 140MG	Tier 5	PA, QL (1 kit every 28 days)
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	Tier 5	PA, QL (60 tabs every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 2.5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 7.5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab 10 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>everolimus tab for oral susp 2 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>everolimus tab for oral susp 3 mg</i>	Tier 5	PA, QL (90 tabs every 30 days)
<i>everolimus tab for oral susp 5 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
IBRANCE CAP 75MG	Tier 5	PA, QL (21 caps every 28 days)
IBRANCE CAP 100MG	Tier 5	PA, QL (21 caps every 28 days)
IBRANCE CAP 125MG	Tier 5	PA, QL (21 caps every 28 days)
IBRANCE TAB 75MG	Tier 5	PA, QL (21 tabs every 28 days)
IBRANCE TAB 100MG	Tier 5	PA, QL (21 tabs every 28 days)
IBRANCE TAB 125MG	Tier 5	PA, QL (21 tabs every 28 days)
ICLUSIG TAB 10MG	Tier 5	PA, QL (30 tabs every 30 days)
ICLUSIG TAB 15MG	Tier 5	PA, QL (30 tabs every 30 days)
ICLUSIG TAB 30MG	Tier 5	PA, QL (30 tabs every 30 days)
ICLUSIG TAB 45MG	Tier 5	PA, QL (30 tabs every 30 days)
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	Tier 5	PA, QL (120 tabs every 30 days)
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	Tier 5	PA, QL (60 tabs every 30 days)
IMBRUVICA CAP 70MG	Tier 5	PA, QL (30 caps every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 31
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
IMBRUVICA CAP 140MG	Tier 5	PA, QL (90 caps every 30 days)
IMBRUVICA SUS 70MG/ML	Tier 5	PA, QL (216 ml every 36 days)
IMBRUVICA TAB 140MG	Tier 5	PA, QL (30 tabs every 30 days)
IMBRUVICA TAB 280MG	Tier 5	PA, QL (30 tabs every 30 days)
IMBRUVICA TAB 420MG	Tier 5	PA, QL (30 tabs every 30 days)
IMBRUVICA TAB 560MG	Tier 5	PA, QL (30 tabs every 30 days)
INLYTA TAB 1MG	Tier 5	PA, QL (240 tabs every 30 days)
INLYTA TAB 5MG	Tier 5	PA, QL (120 tabs every 30 days)
JAKAFI TAB 5MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 10MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 15MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 20MG	Tier 5	PA, QL (60 tabs every 30 days)
JAKAFI TAB 25MG	Tier 5	PA, QL (60 tabs every 30 days)
KISQALI TAB 200DOSE	Tier 5	PA, QL (21 tabs every 28 days); 200 mg dose
KISQALI TAB 400DOSE	Tier 5	PA, QL (42 tabs every 28 days); 400 mg dose
KISQALI TAB 600DOSE	Tier 5	PA, QL (63 tabs every 28 days); 600 mg dose
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	Tier 5	PA, QL (180 tabs every 30 days)
LENVIMA CAP 4MG	Tier 5	PA, QL (30 caps every 30 days)
LENVIMA CAP 8 MG	Tier 5	PA, QL (60 caps every 30 days)
LENVIMA CAP 10 MG	Tier 5	PA, QL (30 caps every 30 days)
LENVIMA CAP 12MG	Tier 5	PA, QL (90 caps every 30 days)
LENVIMA CAP 14 MG	Tier 5	PA, QL (60 caps every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 32
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
LENVIMA CAP 18 MG	Tier 5	PA, QL (90 caps every 30 days)
LENVIMA CAP 20 MG	Tier 5	PA, QL (60 caps every 30 days)
LENVIMA CAP 24 MG	Tier 5	PA, QL (90 caps every 30 days)
LORBRENA TAB 25MG	Tier 6	PA, QL (90 tabs every 30 days)
LORBRENA TAB 100MG	Tier 6	PA, QL (30 tabs every 30 days)
MEKINIST SOL 0.05/ML	Tier 5	PA, QL (12 bottles every 28 days)
MEKINIST TAB 0.5MG	Tier 5	PA, QL (90 tabs every 30 days)
MEKINIST TAB 2MG	Tier 5	PA, QL (30 tabs every 30 days)
RYDAPT CAP 25MG	Tier 6	PA, QL (224 caps every 28 days)
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	Tier 5	PA, QL (120 tabs every 30 days)
SPRYCEL TAB 20MG	Tier 5	PA, QL (90 tabs every 30 days)
SPRYCEL TAB 50MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 70MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 80MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 100MG	Tier 5	PA, QL (30 tabs every 30 days)
SPRYCEL TAB 140MG	Tier 5	PA, QL (30 tabs every 30 days)
STIVARGA TAB 40MG	Tier 5	PA, QL (84 tabs every 28 days)
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>sunitinib malate cap 25 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>sunitinib malate cap 50 mg (base equivalent)</i>	Tier 5	PA, QL (30 caps every 30 days)
TAFINLAR CAP 50MG	Tier 5	PA, QL (120 caps every 30 days)

Drug Name	Drug Tier	Requirements/Limits
TAFINLAR CAP 75MG	Tier 5	PA, QL (120 caps every 30 days)
TAFINLAR TAB 10MG	Tier 5	PA, QL (4 bottles every 28 days)
TUKYSA TAB 50MG	Tier 6	PA, QL (120 tabs every 30 days)
TUKYSA TAB 150MG	Tier 6	PA, QL (120 tabs every 30 days)
VITRAKVI CAP 25MG	Tier 6	PA, QL (180 caps every 30 days)
VITRAKVI CAP 100MG	Tier 6	PA, QL (60 caps every 30 days)
VITRAKVI SOL 20MG/ML	Tier 6	PA, QL (300 mL every 30 days)
VOTRIENT TAB 200MG	Tier 5	PA, QL (120 tabs every 30 days)
XALKORI CAP 200MG	Tier 5	PA, QL (120 caps every 30 days)
XALKORI CAP 250MG	Tier 5	PA, QL (120 caps every 30 days)
ZELBORAF TAB 240MG	Tier 5	PA, QL (240 tabs every 30 days)
ZYDELIG TAB 100MG	Tier 5	PA, QL (60 tabs every 30 days)
ZYDELIG TAB 150MG	Tier 5	PA, QL (60 tabs every 30 days)
ZYKADIA TAB 150MG	Tier 5	PA, QL (90 tabs every 30 days)

MISCELLANEOUS

<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	Tier 2	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	Tier 2	
<i>bexarotene cap 75 mg</i>	Tier 5	PA
<i>hydroxyurea cap 500 mg</i>	Tier 2	
IDHIFA TAB 50MG	Tier 5	PA, QL (30 tabs every 30 days)
IDHIFA TAB 100MG	Tier 5	PA, QL (30 tabs every 30 days)
LYNPARZA TAB 100MG	Tier 5	PA, QL (120 tabs every 30 days)
LYNPARZA TAB 150MG	Tier 5	PA, QL (120 tabs every 30 days)
NIPENT INJ 10MG	Tier 3	
ODOMZO CAP 200MG	Tier 5	PA, QL (30 caps every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ONCASPAR INJ 750/ML	Tier 5	PA
PHOTOFRIN INJ 75MG	Tier 3	
<i>tretinoin cap 10 mg</i>	Tier 2	
ZEJULA CAP 100MG	Tier 5	PA, QL (90 caps every 30 days)
ZEJULA TAB 100MG	Tier 5	PA, QL (30 tabs every 30 days)
ZEJULA TAB 200MG	Tier 5	PA, QL (30 tabs every 30 days)
ZEJULA TAB 300MG	Tier 5	PA, QL (30 tabs every 30 days)
ZOLINZA CAP 100MG	Tier 5	PA, QL (120 caps every 30 days)

PLATINUM-BASED AGENTS

<i>carboplatin iv soln 50 mg/5ml</i>	Tier 2	
<i>carboplatin iv soln 150 mg/15ml</i>	Tier 2	
<i>carboplatin iv soln 450 mg/45ml</i>	Tier 2	
<i>carboplatin iv soln 600 mg/60ml</i>	Tier 2	
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	Tier 2	
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	Tier 2	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	Tier 2	
<i>oxaliplatin for iv inj 50 mg</i>	Tier 5	
<i>oxaliplatin for iv inj 100 mg</i>	Tier 5	
<i>oxaliplatin iv soln 50 mg/10ml</i>	Tier 5	
<i>oxaliplatin iv soln 100 mg/20ml</i>	Tier 5	
<i>paraplatin inj 1000mg</i>	Tier 2	

PROTECTIVE AGENTS

<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	Tier 2	
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	Tier 2	
<i>leucovorin calcium for inj 50 mg</i>	Tier 2	
<i>leucovorin calcium for inj 100 mg</i>	Tier 2	
<i>leucovorin calcium for inj 200 mg</i>	Tier 2	
<i>leucovorin calcium for inj 350 mg</i>	Tier 2	
<i>leucovorin calcium for inj 500 mg</i>	Tier 2	
<i>leucovorin calcium tab 5 mg</i>	Tier 2	
<i>leucovorin calcium tab 10 mg</i>	Tier 2	
<i>leucovorin calcium tab 15 mg</i>	Tier 2	
<i>leucovorin calcium tab 25 mg</i>	Tier 2	
<i>mesna inj 100 mg/ml</i>	Tier 2	
MESNEX TAB 400MG	Tier 5	

Drug Name	Drug Tier	Requirements/Limits
TOPOISOMERASE INHIBITORS		
<i>etoposide cap 50 mg</i>	Tier 2	
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	Tier 2	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	Tier 2	
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	Tier 2	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	Tier 5	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	Tier 5	
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	Tier 2	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	Tier 5	
<i>topotecan hcl for inj 4 mg (base equiv)</i>	Tier 2	

ANTIVIRALS

ANTIVIRAL COMBINATIONS

PAXLOVID TAB 150-100	Tier 4	QL (40 ea every 30 days)
PAXLOVID TAB 150-100	Tier 4	QL (40 tabs every 30 days)
PAXLOVID TAB 300-100	Tier 4	QL (40 ea every 30 days)
PAXLOVID TAB 300-100	Tier 4	QL (40 tabs every 30 days)

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

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

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

ACE INHIBITORS

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

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Drug Name	Drug Tier	Requirements/Limits
<i>ramipril cap 5 mg</i>	Tier 1	
<i>ramipril cap 10 mg</i>	Tier 1	
<i>trandolapril tab 1 mg</i>	Tier 1	
<i>trandolapril tab 2 mg</i>	Tier 1	
<i>trandolapril tab 4 mg</i>	Tier 1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone tab 25 mg</i>	Tier 2	
<i>eplerenone tab 50 mg</i>	Tier 2	
ALPHA BLOCKERS		
<i>prazosin hcl cap 1 mg</i>	Tier 2	
<i>prazosin hcl cap 2 mg</i>	Tier 2	
<i>prazosin hcl cap 5 mg</i>	Tier 2	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	Tier 1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	Tier 1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	Tier 1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	Tier 1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	Tier 1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	Tier 1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	Tier 1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	Tier 1	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	Tier 1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	Tier 1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	Tier 1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	Tier 1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	Tier 1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	Tier 1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 40-5 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	Tier 1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	Tier 1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	Tier 1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	Tier 1	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	Tier 1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	Tier 1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	Tier 1	
<i>candesartan cilexetil tab 8 mg</i>	Tier 1	
<i>candesartan cilexetil tab 16 mg</i>	Tier 1	
<i>candesartan cilexetil tab 32 mg</i>	Tier 1	
<i>irbesartan tab 75 mg</i>	Tier 1	
<i>irbesartan tab 150 mg</i>	Tier 1	
<i>irbesartan tab 300 mg</i>	Tier 1	
<i>losartan potassium tab 25 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium tab 50 mg</i>	Tier 1	
<i>losartan potassium tab 100 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 5 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 20 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 40 mg</i>	Tier 1	
<i>telmisartan tab 20 mg</i>	Tier 1	
<i>telmisartan tab 40 mg</i>	Tier 1	
<i>telmisartan tab 80 mg</i>	Tier 1	
<i>valsartan tab 40 mg</i>	Tier 1	
<i>valsartan tab 80 mg</i>	Tier 1	
<i>valsartan tab 160 mg</i>	Tier 1	
<i>valsartan tab 320 mg</i>	Tier 1	

ANTIARRHYTHMICS

<i>amiodarone hcl tab 200 mg</i>	Tier 2	
<i>amiodarone hcl tab 400 mg</i>	Tier 2	
<i>disopyramide phosphate cap 100 mg</i>	Tier 2	
<i>disopyramide phosphate cap 150 mg</i>	Tier 2	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	Tier 2	PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	Tier 2	PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	Tier 2	PA
<i>flecainide acetate tab 50 mg</i>	Tier 2	
<i>flecainide acetate tab 100 mg</i>	Tier 2	
<i>flecainide acetate tab 150 mg</i>	Tier 2	
<i>lidocaine hcl (cardiac) iv pf soln pref syr 50 mg/5ml(1%)</i>	Tier 2	
<i>lidocaine hcl (cardiac) iv soln pref syr 100 mg/5ml (2%)</i>	Tier 2	
MULTAQ TAB 400MG	Tier 4	PA
NORPACE CAP 100MG CR	Tier 3	
NORPACE CAP 150MG CR	Tier 3	
<i>pacerone tab 100mg</i>	Tier 2	
<i>pacerone tab 200mg</i>	Tier 2	
<i>procainamide hcl inj 100 mg/ml</i>	Tier 2	
<i>propafenone hcl cap er 12hr 225 mg</i>	Tier 2	
<i>propafenone hcl cap er 12hr 325 mg</i>	Tier 2	
<i>propafenone hcl cap er 12hr 425 mg</i>	Tier 2	
<i>propafenone hcl tab 150 mg</i>	Tier 2	
<i>propafenone hcl tab 225 mg</i>	Tier 2	
<i>propafenone hcl tab 300 mg</i>	Tier 2	
<i>sotalol hcl (afib/af) tab 80 mg</i>	Tier 2	
<i>sotalol hcl (afib/af) tab 120 mg</i>	Tier 2	
<i>sotalol hcl (afib/af) tab 160 mg</i>	Tier 2	
<i>sotalol hcl tab 80 mg</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
sotalol hcl tab 120 mg	Tier 2	
sotalol hcl tab 160 mg	Tier 2	
sotalol hcl tab 240 mg	Tier 2	
ANTILIPEMICS, BILE ACID RESINS		
cholestyramine light powder 4 gm/dose	Tier 2	
cholestyramine light powder packets 4 gm	Tier 2	
cholestyramine powder 4 gm/dose	Tier 2	
cholestyramine powder packets 4 gm	Tier 2	
colestipol hcl granule packets 5 gm	Tier 2	
colestipol hcl granules 5 gm	Tier 2	
colestipol hcl tab 1 gm	Tier 2	
prevalite pow 4gm	Tier 2	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR		
ezetimibe tab 10 mg	Tier 2	
ANTILIPEMICS, FIBRATES		
choline fenofibrate cap dr 45 mg (fenofibric acid equiv)	Tier 2	
choline fenofibrate cap dr 135 mg (fenofibric acid equiv)	Tier 2	
fenofibrate cap 150 mg	Tier 2	
fenofibrate micronized cap 43 mg	Tier 2	
fenofibrate micronized cap 67 mg	Tier 2	
fenofibrate micronized cap 134 mg	Tier 2	
fenofibrate micronized cap 200 mg	Tier 2	
fenofibrate tab 48 mg	Tier 2	
fenofibrate tab 54 mg	Tier 2	
fenofibrate tab 145 mg	Tier 2	
fenofibrate tab 160 mg	Tier 2	
gemfibrozil tab 600 mg	Tier 2	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS		
ezetimibe-simvastatin tab 10-10 mg	Tier 2	
ezetimibe-simvastatin tab 10-20 mg	Tier 2	
ezetimibe-simvastatin tab 10-40 mg	Tier 2	
ezetimibe-simvastatin tab 10-80 mg	Tier 2	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
atorvastatin calcium tab 10 mg (base equivalent)	Tier 0	\$0 copay for members age 40 through 75
atorvastatin calcium tab 20 mg (base equivalent)	Tier 0	\$0 copay for members age 40 through 75

Drug Name	Drug Tier	Requirements/Limits
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	Tier 0	\$0 copay for members age 40 through 75
<i>lovastatin tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>lovastatin tab 20 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>lovastatin tab 40 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 20 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 40 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 80 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 5 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75

Drug Name	Drug Tier	Requirements/Limits
<i>rosuvastatin calcium tab 20 mg</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>rosuvastatin calcium tab 40 mg</i>	Tier 1	Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
<i>simvastatin tab 5 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 10 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 20 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 40 mg</i>	Tier 0	\$0 copay for members age 40 through 75
<i>simvastatin tab 80 mg</i>	Tier 1	ST; PA**; Exception process available for \$0 copay for members age 40 through 75 when medically necessary for primary prevention of cardiovascular disease
ANTILIPEMICS, MISCELLANEOUS		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	Tier 2	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	Tier 2	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	Tier 2	
ANTILIPEMICS, OMEGA-3 FATTY ACIDS		
<i>icosapent ethyl cap 0.5 gm</i>	Tier 2	
<i>icosapent ethyl cap 1 gm</i>	Tier 2	Only indicated as an adjunct to diet to reduce TG levels in adult patients with severe (greater than or equal to 500 mg/dL) hypertriglyceridemia
<i>omega-3-acid ethyl esters cap 1 gm</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
ANTILIPEMICS, PCSK9 INHIBITORS		
PRALUENT INJ 75MG/ML	Tier 5	PA, QL (2 pens every 28 days)
PRALUENT INJ 150MG/ML	Tier 5	PA, QL (2 pens every 28 days)
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	Tier 2	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	Tier 2	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	Tier 2	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 2	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	Tier 2	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	Tier 2	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	Tier 2	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	Tier 2	
BETA-BLOCKERS		
<i>acebutolol hcl cap 200 mg</i>	Tier 2	
<i>acebutolol hcl cap 400 mg</i>	Tier 2	
<i>atenolol tab 25 mg</i>	Tier 2	
<i>atenolol tab 50 mg</i>	Tier 2	
<i>atenolol tab 100 mg</i>	Tier 2	
<i>betaxolol hcl tab 10 mg</i>	Tier 2	
<i>betaxolol hcl tab 20 mg</i>	Tier 2	
<i>bisoprolol fumarate tab 5 mg</i>	Tier 2	
<i>bisoprolol fumarate tab 10 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 10 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	Tier 2	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	Tier 2	
<i>carvedilol tab 3.125 mg</i>	Tier 2	
<i>carvedilol tab 6.25 mg</i>	Tier 2	
<i>carvedilol tab 12.5 mg</i>	Tier 2	
<i>carvedilol tab 25 mg</i>	Tier 2	
<i>labetalol hcl tab 100 mg</i>	Tier 2	
<i>labetalol hcl tab 200 mg</i>	Tier 2	
<i>labetalol hcl tab 300 mg</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	Tier 2	
<i>metoprolol tartrate tab 25 mg</i>	Tier 2	
<i>metoprolol tartrate tab 50 mg</i>	Tier 2	
<i>metoprolol tartrate tab 100 mg</i>	Tier 2	
<i>nadolol tab 20 mg</i>	Tier 2	
<i>nadolol tab 40 mg</i>	Tier 2	
<i>nadolol tab 80 mg</i>	Tier 2	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	Tier 2	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	Tier 2	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	Tier 2	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	Tier 2	
<i>pindolol tab 5 mg</i>	Tier 2	
<i>pindolol tab 10 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 60 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 80 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 120 mg</i>	Tier 2	
<i>propranolol hcl cap er 24hr 160 mg</i>	Tier 2	
<i>propranolol hcl oral soln 20 mg/5ml</i>	Tier 2	
<i>propranolol hcl oral soln 40 mg/5ml</i>	Tier 2	
<i>propranolol hcl tab 10 mg</i>	Tier 2	
<i>propranolol hcl tab 20 mg</i>	Tier 2	
<i>propranolol hcl tab 40 mg</i>	Tier 2	
<i>propranolol hcl tab 60 mg</i>	Tier 2	
<i>propranolol hcl tab 80 mg</i>	Tier 2	
<i>timolol maleate tab 5 mg</i>	Tier 2	
<i>timolol maleate tab 10 mg</i>	Tier 2	
<i>timolol maleate tab 20 mg</i>	Tier 2	

CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	Tier 1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	Tier 1	

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	Tier 2	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	Tier 2	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	Tier 2	
<i>cartia xt cap 120/24hr</i>	Tier 2	
<i>cartia xt cap 180/24hr</i>	Tier 2	
<i>cartia xt cap 240/24hr</i>	Tier 2	
<i>cartia xt cap 300/24hr</i>	Tier 2	
<i>dilt-xr cap 120mg</i>	Tier 2	
<i>dilt-xr cap 180mg</i>	Tier 2	
<i>dilt-xr cap 240mg</i>	Tier 2	
<i>diltiazem hcl cap er 12hr 60 mg</i>	Tier 2	
<i>diltiazem hcl cap er 12hr 90 mg</i>	Tier 2	
<i>diltiazem hcl cap er 12hr 120 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	Tier 2	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	Tier 2	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	Tier 2	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	Tier 2	
<i>diltiazem hcl tab 30 mg</i>	Tier 2	
<i>diltiazem hcl tab 60 mg</i>	Tier 2	
<i>diltiazem hcl tab 90 mg</i>	Tier 2	
<i>diltiazem hcl tab 120 mg</i>	Tier 2	
<i>diltiazem hcl tab er 24hr 120 mg</i>	Tier 2	
<i>felodipine tab er 24hr 2.5 mg</i>	Tier 2	
<i>felodipine tab er 24hr 5 mg</i>	Tier 2	
<i>felodipine tab er 24hr 10 mg</i>	Tier 2	
<i>isradipine cap 2.5 mg</i>	Tier 2	
<i>isradipine cap 5 mg</i>	Tier 2	
<i>matzim la tab 180mg/24</i>	Tier 2	
<i>matzim la tab 240mg/24</i>	Tier 2	
<i>matzim la tab 300mg/24</i>	Tier 2	
<i>matzim la tab 360mg/24</i>	Tier 2	
<i>matzim la tab 420mg/24</i>	Tier 2	
<i>nicardipine hcl cap 20 mg</i>	Tier 2	
<i>nicardipine hcl cap 30 mg</i>	Tier 2	
<i>nifedipine tab er 24hr 30 mg</i>	Tier 2	
<i>nifedipine tab er 24hr 60 mg</i>	Tier 2	
<i>nifedipine tab er 24hr 90 mg</i>	Tier 2	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	Tier 2	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	Tier 2	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	Tier 2	
<i>nimodipine cap 30 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 8.5 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 17 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 20 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 25.5 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 30 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 34 mg</i>	Tier 2	
<i>nisoldipine tab er 24hr 40 mg</i>	Tier 2	
<i>taztia xt cap 120mg/24</i>	Tier 2	
<i>taztia xt cap 180mg/24</i>	Tier 2	
<i>taztia xt cap 240mg/24</i>	Tier 2	
<i>taztia xt cap 300mg er</i>	Tier 2	
<i>taztia xt cap 360mg/24</i>	Tier 2	
<i>verapamil hcl cap er 24hr 100 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 120 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 180 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 200 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 240 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 47
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl cap er 24hr 300 mg</i>	Tier 2	
<i>verapamil hcl cap er 24hr 360 mg</i>	Tier 2	
<i>verapamil hcl tab 40 mg</i>	Tier 2	
<i>verapamil hcl tab 80 mg</i>	Tier 2	
<i>verapamil hcl tab 120 mg</i>	Tier 2	
<i>verapamil hcl tab er 120 mg</i>	Tier 2	
<i>verapamil hcl tab er 180 mg</i>	Tier 2	
<i>verapamil hcl tab er 240 mg</i>	Tier 2	
DIGITALIS GLYCOSIDES		
<i>digoxin oral soln 0.05 mg/ml</i>	Tier 2	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	Tier 2	
<i>digoxin tab 125 mcg (0.125 mg)</i>	Tier 2	
<i>digoxin tab 250 mcg (0.25 mg)</i>	Tier 2	
DIRECT RENIN INHIBITORS/COMBINATIONS		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	Tier 2	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	Tier 2	
DIURETICS		
<i>acetazolamide cap er 12hr 500 mg</i>	Tier 2	
<i>acetazolamide tab 125 mg</i>	Tier 2	
<i>acetazolamide tab 250 mg</i>	Tier 2	
ALDACTAZIDE TAB 50/50	Tier 3	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	Tier 2	
<i>amiloride hcl tab 5 mg</i>	Tier 2	
<i>bumetanide tab 0.5 mg</i>	Tier 2	
<i>bumetanide tab 1 mg</i>	Tier 2	
<i>bumetanide tab 2 mg</i>	Tier 2	
<i>chlorthalidone tab 25 mg</i>	Tier 2	
<i>chlorthalidone tab 50 mg</i>	Tier 2	
DIURIL SUS 250/5ML	Tier 4	
<i>ethacrynic acid tab 25 mg</i>	Tier 4	
<i>furosemide inj 10 mg/ml</i>	Tier 2	
<i>furosemide oral soln 8 mg/ml</i>	Tier 2	
<i>furosemide oral soln 10 mg/ml</i>	Tier 2	
<i>furosemide tab 20 mg</i>	Tier 2	
<i>furosemide tab 40 mg</i>	Tier 2	
<i>furosemide tab 80 mg</i>	Tier 2	
<i>hydrochlorothiazide cap 12.5 mg</i>	Tier 2	
<i>hydrochlorothiazide tab 12.5 mg</i>	Tier 2	
<i>hydrochlorothiazide tab 25 mg</i>	Tier 2	
<i>hydrochlorothiazide tab 50 mg</i>	Tier 2	
<i>indapamide tab 1.25 mg</i>	Tier 2	
<i>indapamide tab 2.5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>mannitol iv soln 20%</i>	Tier 2	
<i>mannitol iv soln 25%</i>	Tier 2	
<i>methazolamide tab 25 mg</i>	Tier 2	
<i>methazolamide tab 50 mg</i>	Tier 2	
<i>metolazone tab 2.5 mg</i>	Tier 2	
<i>metolazone tab 5 mg</i>	Tier 2	
<i>metolazone tab 10 mg</i>	Tier 2	
<i>osmitrol inj 10%</i>	Tier 2	
<i>osmitrol inj 15%</i>	Tier 2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	Tier 2	
<i>spironolactone tab 25 mg</i>	Tier 2	
<i>spironolactone tab 50 mg</i>	Tier 2	
<i>spironolactone tab 100 mg</i>	Tier 2	
<i>toremide tab 5 mg</i>	Tier 2	
<i>toremide tab 10 mg</i>	Tier 2	
<i>toremide tab 20 mg</i>	Tier 2	
<i>toremide tab 100 mg</i>	Tier 2	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	Tier 2	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	Tier 2	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	Tier 2	
<i>triamterene cap 50 mg</i>	Tier 2	
<i>triamterene cap 100 mg</i>	Tier 2	
HEART FAILURE		
<i>CORLANOR SOL 5MG/5ML</i>	Tier 3	
<i>CORLANOR TAB 5MG</i>	Tier 3	
<i>CORLANOR TAB 7.5MG</i>	Tier 3	
<i>ENTRESTO TAB 24-26MG</i>	Tier 3	
<i>ENTRESTO TAB 49-51MG</i>	Tier 3	
<i>ENTRESTO TAB 97-103MG</i>	Tier 3	
MISCELLANEOUS		
<i>clonidine hcl tab 0.1 mg</i>	Tier 2	
<i>clonidine hcl tab 0.2 mg</i>	Tier 2	
<i>clonidine hcl tab 0.3 mg</i>	Tier 2	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	Tier 2	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	Tier 2	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	Tier 2	
<i>guanfacine hcl tab 1 mg</i>	Tier 2	
<i>guanfacine hcl tab 2 mg</i>	Tier 2	
<i>hydralazine hcl tab 10 mg</i>	Tier 2	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>hydralazine hcl tab 25 mg</i>	Tier 2	
<i>hydralazine hcl tab 50 mg</i>	Tier 2	
<i>hydralazine hcl tab 100 mg</i>	Tier 2	
<i>methyldopa tab 250 mg</i>	Tier 2	
<i>methyldopa tab 500 mg</i>	Tier 2	
<i>midodrine hcl tab 2.5 mg</i>	Tier 2	
<i>midodrine hcl tab 5 mg</i>	Tier 2	
<i>midodrine hcl tab 10 mg</i>	Tier 2	
<i>minoxidil tab 2.5 mg</i>	Tier 2	
<i>minoxidil tab 10 mg</i>	Tier 2	
<i>phenoxybenzamine hcl cap 10 mg</i>	Tier 5	PA, QL (360 caps every 30 days)
<i>ranolazine tab er 12hr 500 mg</i>	Tier 2	ST; PA**
<i>ranolazine tab er 12hr 1000 mg</i>	Tier 2	ST; PA**

NITRATES

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

PULMONARY ARTERIAL HYPERTENSION

ADEMPAS TAB 0.5MG	Tier 6	PA, QL (90 tabs every 30 days)
ADEMPAS TAB 1.5MG	Tier 6	PA, QL (90 tabs every 30 days)
ADEMPAS TAB 1MG	Tier 6	PA, QL (90 tabs every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ADEMPAS TAB 2.5MG	Tier 6	PA, QL (90 tabs every 30 days)
ADEMPAS TAB 2MG	Tier 6	PA, QL (90 tabs every 30 days)
<i>ambrisentan tab 5 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>ambrisentan tab 10 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>bosentan tab 62.5 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>bosentan tab 125 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)
OPSUMIT TAB 10MG	Tier 5	PA, QL (30 tabs every 30 days)
ORENITRAM TAB 0.25MG	Tier 5	PA
ORENITRAM TAB 0.125MG	Tier 5	PA
ORENITRAM TAB 1MG	Tier 5	PA
ORENITRAM TAB 2.5MG	Tier 5	PA
ORENITRAM TAB 5MG	Tier 5	PA
ORENITRAM TAB MONTH 1	Tier 5	PA
ORENITRAM TAB MONTH 2	Tier 5	PA
ORENITRAM TAB MONTH 3	Tier 5	PA
REMODULIN INJ 1MG/ML	Tier 6	PA
REMODULIN INJ 2.5MG/ML	Tier 6	PA
REMODULIN INJ 5MG/ML	Tier 6	PA
REMODULIN INJ 10MG/ML	Tier 6	PA
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	Tier 5	PA
<i>sildenafil citrate tab 20 mg</i>	Tier 5	PA, QL (360 tabs every 30 days)
<i>tadalafil tab 20 mg (pah)</i>	Tier 6	PA, QL (60 tabs every 30 days)
TYVASO REFIL SOL 0.6MG/ML	Tier 5	PA, QL (28 ampules every 28 days)
TYVASO SOL 0.6MG/ML	Tier 5	PA, QL (28 ampules every 28 days)
TYVASO START SOL 0.6MG/ML	Tier 5	PA, QL (28 ampules every 28 days)
UPTRAVI INJ 1800MCG	Tier 5	PA
UPTRAVI PACK TAB 200/800	Tier 5	PA, QL (1 pack every 28 days)
UPTRAVI TAB 200MCG	Tier 5	PA, QL (140 tabs every 28 days)

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TAB 400MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 600MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 800MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1000MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1200MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1400MCG	Tier 5	PA, QL (60 tabs every 30 days)
UPTRAVI TAB 1600MCG	Tier 5	PA, QL (60 tabs every 30 days)
VENTAVIS SOL 10MCG/ML	Tier 5	PA, QL (270 ampules every 30 days)
VENTAVIS SOL 20MCG/ML	Tier 5	PA, QL (270 ampules every 30 days)

CENTRAL NERVOUS SYSTEM

ALCOHOL DETERRENTS

<i>acamprosate calcium tab delayed release 333 mg</i>	Tier 2	PA
<i>disulfiram tab 250 mg</i>	Tier 2	
<i>disulfiram tab 500 mg</i>	Tier 2	

ANTI-ANXIETY

ALPRAZOLAM CON 1 MG/ML	Tier 3	QL (300 mL every 30 days)
<i>alprazolam orally disintegrating tab 0.5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam orally disintegrating tab 0.25 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam orally disintegrating tab 1 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam orally disintegrating tab 2 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 0.5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 0.25 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 1 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>alprazolam tab 2 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>bupirone hcl tab 5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>buspirone hcl tab 7.5 mg</i>	Tier 2	
<i>buspirone hcl tab 10 mg</i>	Tier 2	
<i>buspirone hcl tab 15 mg</i>	Tier 2	
<i>buspirone hcl tab 30 mg</i>	Tier 2	
<i>chlordiazepoxide hcl cap 5 mg</i>	Tier 2	QL (360 caps every 30 days)
<i>chlordiazepoxide hcl cap 10 mg</i>	Tier 2	QL (360 caps every 30 days)
<i>chlordiazepoxide hcl cap 25 mg</i>	Tier 2	QL (360 caps every 30 days)
<i>fluvoxamine maleate tab 25 mg</i>	Tier 2	
<i>fluvoxamine maleate tab 50 mg</i>	Tier 2	
<i>fluvoxamine maleate tab 100 mg</i>	Tier 2	
<i>lorazepam conc 2 mg/ml</i>	Tier 2	QL (150 mL every 30 days)
<i>lorazepam tab 0.5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>lorazepam tab 1 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>lorazepam tab 2 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>meprobamate tab 200 mg</i>	Tier 2	
<i>meprobamate tab 400 mg</i>	Tier 2	
<i>oxazepam cap 10 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>oxazepam cap 15 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>oxazepam cap 30 mg</i>	Tier 2	QL (120 caps every 30 days)

ANTIDEMENTIA

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	Tier 2	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	Tier 2	
<i>donepezil hydrochloride tab 5 mg</i>	Tier 2	
<i>donepezil hydrochloride tab 10 mg</i>	Tier 2	
<i>donepezil hydrochloride tab 23 mg</i>	Tier 2	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	Tier 2	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	Tier 2	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	Tier 2	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	Tier 2	
<i>galantamine hydrobromide tab 4 mg</i>	Tier 2	
<i>galantamine hydrobromide tab 8 mg</i>	Tier 2	
<i>galantamine hydrobromide tab 12 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl cap er 24hr 7 mg</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl cap er 24hr 14 mg</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl cap er 24hr 21 mg</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl cap er 24hr 28 mg</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl oral solution 2 mg/ml</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl tab 5 mg</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl tab 10 mg</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	Tier 2	PA; PA applies for members less than 30 years of age
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	Tier 2	PA
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	Tier 2	PA
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	Tier 2	PA
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	Tier 2	PA
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	Tier 2	PA
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	Tier 2	PA
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	Tier 2	PA
ANTIDEPRESSANTS		
<i>amitriptyline hcl tab 10 mg</i>	Tier 2	QL (150 tabs every 30 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 25 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 50 mg</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>amitriptyline hcl tab 75 mg</i>	Tier 2	PA; High strength requires PA for members age 65 and older
<i>amitriptyline hcl tab 100 mg</i>	Tier 2	PA; High strength requires PA for members age 65 and older
<i>amitriptyline hcl tab 150 mg</i>	Tier 2	PA; High strength requires PA for members age 65 and older
<i>amoxapine tab 25 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>amoxapine tab 50 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>amoxapine tab 100 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>amoxapine tab 150 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>bupropion hcl tab 75 mg</i>	Tier 2	
<i>bupropion hcl tab 100 mg</i>	Tier 2	
<i>bupropion hcl tab er 12hr 100 mg</i>	Tier 2	
<i>bupropion hcl tab er 12hr 150 mg</i>	Tier 2	
<i>bupropion hcl tab er 12hr 200 mg</i>	Tier 2	
<i>bupropion hcl tab er 24hr 150 mg</i>	Tier 2	
<i>bupropion hcl tab er 24hr 300 mg</i>	Tier 2	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	Tier 2	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	Tier 2	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	Tier 2	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	Tier 2	
<i>clomipramine hcl cap 25 mg</i>	Tier 2	QL (150 caps every 30 days); QL applies to members age 65 and older
<i>clomipramine hcl cap 50 mg</i>	Tier 2	QL (150 caps every 30 days); QL applies to members age 65 and older
<i>clomipramine hcl cap 75 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>desipramine hcl tab 10 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 25 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 50 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 75 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 100 mg</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>desipramine hcl tab 150 mg</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	Tier 2	ST, QL (30 tabs every 30 days); (generic of Pristiq) PA**
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	Tier 2	ST, QL (30 tabs every 30 days); (generic of Pristiq) PA**
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	Tier 2	ST, QL (30 tabs every 30 days); (generic of Pristiq) PA**
<i>doxepin hcl cap 10 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 25 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 50 mg</i>	Tier 2	QL (90 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 75 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl cap 100 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl cap 150 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>doxepin hcl conc 10 mg/ml</i>	Tier 2	QL (450 mL every 30 days); QL applies to members age 65 and older
<i>duloxetine hcl cap 20 mg</i>	Tier 2	
<i>duloxetine hcl cap 30 mg</i>	Tier 2	
<i>duloxetine hcl cap 60 mg</i>	Tier 2	
EMSAM DIS 6MG/24HR	Tier 4	PA
EMSAM DIS 9MG/24HR	Tier 4	PA
EMSAM DIS 12MG/24H	Tier 4	PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	Tier 2	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	Tier 2	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	Tier 2	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	Tier 2	
FETZIMA CAP 20MG	Tier 4	ST, QL (30 caps every 30 days); PA**
FETZIMA CAP 40MG	Tier 4	ST, QL (30 caps every 30 days); PA**
FETZIMA CAP 80MG	Tier 4	ST, QL (30 caps every 30 days); PA**
FETZIMA CAP 120MG	Tier 4	ST, QL (30 caps every 30 days); PA**
FETZIMA CAP TITRATIO	Tier 4	ST, QL (30 caps every 30 days); PA**
<i>fluoxetine hcl cap 10 mg</i>	Tier 2	
<i>fluoxetine hcl cap 20 mg</i>	Tier 2	
<i>fluoxetine hcl cap 40 mg</i>	Tier 2	
<i>fluoxetine hcl cap delayed release 90 mg</i>	Tier 2	
<i>fluoxetine hcl solution 20 mg/5ml</i>	Tier 2	
<i>fluoxetine hcl tab 10 mg</i>	Tier 2	(generic Sarafem not covered)
<i>fluoxetine hcl tab 20 mg</i>	Tier 2	(generic Sarafem not covered)
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	Tier 2	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	Tier 2	
<i>imipramine hcl tab 10 mg</i>	Tier 2	QL (120 tabs every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>imipramine hcl tab 25 mg</i>	Tier 2	QL (120 tabs every 30 days); QL applies to members age 65 and older
<i>imipramine hcl tab 50 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 75 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 100 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 125 mg</i>	Tier 2	PA, QL (Max DD of 200mg); High strength requires PA for members age 65 and older
<i>imipramine pamoate cap 150 mg</i>	Tier 2	PA, QL (Max DD of 200mg); High strength requires PA for members age 65 and older
MARPLAN TAB 10MG	Tier 4	
<i>mirtazapine orally disintegrating tab 15 mg</i>	Tier 2	
<i>mirtazapine orally disintegrating tab 30 mg</i>	Tier 2	
<i>mirtazapine orally disintegrating tab 45 mg</i>	Tier 2	
<i>mirtazapine tab 7.5 mg</i>	Tier 2	
<i>mirtazapine tab 15 mg</i>	Tier 2	
<i>mirtazapine tab 30 mg</i>	Tier 2	
<i>mirtazapine tab 45 mg</i>	Tier 2	
<i>nefazodone hcl tab 50 mg</i>	Tier 2	
<i>nefazodone hcl tab 100 mg</i>	Tier 2	
<i>nefazodone hcl tab 150 mg</i>	Tier 2	
<i>nefazodone hcl tab 200 mg</i>	Tier 2	
<i>nefazodone hcl tab 250 mg</i>	Tier 2	
<i>nortriptyline hcl cap 10 mg</i>	Tier 2	QL (150 caps every 30 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 25 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 50 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>nortriptyline hcl cap 75 mg</i>	Tier 2	PA, QL (Max DD of 150mg); High strength requires PA for members age 65 and older
<i>nortriptyline hcl soln 10 mg/5ml</i>	Tier 2	QL (750 mL every 30 days); QL applies to members age 65 and older
<i>paroxetine hcl tab 10 mg</i>	Tier 2	
<i>paroxetine hcl tab 20 mg</i>	Tier 2	
<i>paroxetine hcl tab 30 mg</i>	Tier 2	
<i>paroxetine hcl tab 40 mg</i>	Tier 2	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	Tier 2	
<i>paroxetine hcl tab er 24hr 25 mg</i>	Tier 2	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	Tier 2	
<i>phenelzine sulfate tab 15 mg</i>	Tier 2	
<i>protriptyline hcl tab 5 mg</i>	Tier 2	QL (90 tabs every 30 days); QL applies to members age 65 and older
<i>protriptyline hcl tab 10 mg</i>	Tier 2	QL (60 tabs every 30 days); QL applies to members age 65 and older
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	Tier 2	
<i>sertraline hcl tab 25 mg</i>	Tier 2	
<i>sertraline hcl tab 50 mg</i>	Tier 2	
<i>sertraline hcl tab 100 mg</i>	Tier 2	
<i>tranylcypromine sulfate tab 10 mg</i>	Tier 2	
<i>trazodone hcl tab 50 mg</i>	Tier 2	
<i>trazodone hcl tab 100 mg</i>	Tier 2	
<i>trazodone hcl tab 150 mg</i>	Tier 2	
<i>trazodone hcl tab 300 mg</i>	Tier 2	
<i>trimipramine maleate cap 25 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>trimipramine maleate cap 50 mg</i>	Tier 2	QL (60 caps every 30 days); QL applies to members age 65 and older
<i>trimipramine maleate cap 100 mg</i>	Tier 2	QL (30 caps every 30 days); QL applies to members age 65 and older
TRINTELLIX TAB 5MG	Tier 4	ST; PA**
TRINTELLIX TAB 10MG	Tier 4	ST; PA**
TRINTELLIX TAB 20MG	Tier 4	ST; PA**

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	Tier 2	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	Tier 2	
VIIBRYD KIT STARTER	Tier 4	
<i>vilazodone hcl tab 10 mg</i>	Tier 2	
<i>vilazodone hcl tab 20 mg</i>	Tier 2	
<i>vilazodone hcl tab 40 mg</i>	Tier 2	
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl cap 100 mg</i>	Tier 2	
<i>amantadine hcl soln 50 mg/5ml</i>	Tier 2	
<i>amantadine hcl tab 100 mg</i>	Tier 2	
APOKYN INJ 10MG/ML	Tier 6	PA, QL (20 cartridges every 30 days)
<i>benztropine mesylate inj 1 mg/ml</i>	Tier 2	
<i>benztropine mesylate tab 0.5 mg</i>	Tier 2	
<i>benztropine mesylate tab 1 mg</i>	Tier 2	
<i>benztropine mesylate tab 2 mg</i>	Tier 2	
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	Tier 2	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	Tier 2	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	Tier 2	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	Tier 2	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	Tier 2	
<i>carbidopa & levodopa tab 10-100 mg</i>	Tier 2	
<i>carbidopa & levodopa tab 25-100 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa tab 25-250 mg</i>	Tier 2	
<i>carbidopa & levodopa tab er 25-100 mg</i>	Tier 2	
<i>carbidopa & levodopa tab er 50-200 mg</i>	Tier 2	
<i>carbidopa tab 25 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	Tier 2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	Tier 2	
<i>entacapone tab 200 mg</i>	Tier 2	
INBRIJA CAP 42MG	Tier 5	PA, QL (300 caps every 30 days)
NEUPRO DIS 1MG/24HR	Tier 3	
NEUPRO DIS 2MG/24HR	Tier 3	
NEUPRO DIS 3MG/24HR	Tier 3	
NEUPRO DIS 4MG/24HR	Tier 3	
NEUPRO DIS 6MG/24HR	Tier 3	
NEUPRO DIS 8MG/24HR	Tier 3	
ONGENTYS CAP 25MG	Tier 4	PA
ONGENTYS CAP 50MG	Tier 4	PA
<i>pramipexole dihydrochloride tab 0.5 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 1 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	Tier 2	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	Tier 2	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	Tier 2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	Tier 2	
<i>ropinirole hydrochloride tab 0.5 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 0.25 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 1 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 2 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 3 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 4 mg</i>	Tier 2	
<i>ropinirole hydrochloride tab 5 mg</i>	Tier 2	
<i>selegiline hcl cap 5 mg</i>	Tier 2	
<i>selegiline hcl tab 5 mg</i>	Tier 2	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	Tier 2	
<i>trihexyphenidyl hcl tab 2 mg</i>	Tier 2	
<i>trihexyphenidyl hcl tab 5 mg</i>	Tier 2	

ANTIPSYCHOTICS

<i>aripiprazole oral solution 1 mg/ml</i>	Tier 2	
<i>aripiprazole orally disintegrating tab 10 mg</i>	Tier 2	
<i>aripiprazole orally disintegrating tab 15 mg</i>	Tier 2	
<i>aripiprazole tab 2 mg</i>	Tier 2	
<i>aripiprazole tab 5 mg</i>	Tier 2	
<i>aripiprazole tab 10 mg</i>	Tier 2	
<i>aripiprazole tab 15 mg</i>	Tier 2	
<i>aripiprazole tab 20 mg</i>	Tier 2	
<i>aripiprazole tab 30 mg</i>	Tier 2	
ARISTADA INJ 441MG/1.	Tier 3	
ARISTADA INJ 662MG/2	Tier 3	
ARISTADA INJ 882MG/3	Tier 3	
ARISTADA INJ 1064MG	Tier 3	
ARISTADA INJ INITIO	Tier 3	
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	Tier 2	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	Tier 2	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	Tier 2	
<i>chlorpromazine hcl inj 25 mg/ml</i>	Tier 2	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	Tier 2	
<i>chlorpromazine hcl tab 10 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 25 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 50 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 100 mg</i>	Tier 2	
<i>chlorpromazine hcl tab 200 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 12.5 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 25 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 100 mg</i>	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>clozapine orally disintegrating tab 150 mg</i>	Tier 2	
<i>clozapine orally disintegrating tab 200 mg</i>	Tier 2	
<i>clozapine tab 25 mg</i>	Tier 2	
<i>clozapine tab 50 mg</i>	Tier 2	
<i>clozapine tab 100 mg</i>	Tier 2	
<i>clozapine tab 200 mg</i>	Tier 2	
<i>fluphenazine decanoate inj 25 mg/ml</i>	Tier 2	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	Tier 2	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	Tier 2	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	Tier 2	
<i>fluphenazine hcl tab 1 mg</i>	Tier 2	
<i>fluphenazine hcl tab 2.5 mg</i>	Tier 2	
<i>fluphenazine hcl tab 5 mg</i>	Tier 2	
<i>fluphenazine hcl tab 10 mg</i>	Tier 2	
<i>haloperidol decanoate im soln 50 mg/ml</i>	Tier 2	
<i>haloperidol decanoate im soln 100 mg/ml</i>	Tier 2	
<i>haloperidol lactate inj 5 mg/ml</i>	Tier 2	
<i>haloperidol lactate oral conc 2 mg/ml</i>	Tier 2	
<i>haloperidol tab 0.5 mg</i>	Tier 2	
<i>haloperidol tab 1 mg</i>	Tier 2	
<i>haloperidol tab 2 mg</i>	Tier 2	
<i>haloperidol tab 5 mg</i>	Tier 2	
<i>haloperidol tab 10 mg</i>	Tier 2	
<i>haloperidol tab 20 mg</i>	Tier 2	
<i>loxapine succinate cap 5 mg</i>	Tier 2	
<i>loxapine succinate cap 10 mg</i>	Tier 2	
<i>loxapine succinate cap 25 mg</i>	Tier 2	
<i>loxapine succinate cap 50 mg</i>	Tier 2	
<i>lurasidone hcl tab 20 mg</i>	Tier 2	
<i>lurasidone hcl tab 40 mg</i>	Tier 2	
<i>lurasidone hcl tab 60 mg</i>	Tier 2	
<i>lurasidone hcl tab 80 mg</i>	Tier 2	
<i>lurasidone hcl tab 120 mg</i>	Tier 2	
<i>olanzapine for im inj 10 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 5 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 10 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 15 mg</i>	Tier 2	
<i>olanzapine orally disintegrating tab 20 mg</i>	Tier 2	
<i>olanzapine tab 2.5 mg</i>	Tier 2	
<i>olanzapine tab 5 mg</i>	Tier 2	
<i>olanzapine tab 7.5 mg</i>	Tier 2	
<i>olanzapine tab 10 mg</i>	Tier 2	
<i>olanzapine tab 15 mg</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine tab 20 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 1.5 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 3 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 6 mg</i>	Tier 2	
<i>paliperidone tab er 24hr 9 mg</i>	Tier 2	
<i>perphenazine tab 2 mg</i>	Tier 2	
<i>perphenazine tab 4 mg</i>	Tier 2	
<i>perphenazine tab 8 mg</i>	Tier 2	
<i>perphenazine tab 16 mg</i>	Tier 2	
<i>quetiapine fumarate tab 25 mg</i>	Tier 2	
<i>quetiapine fumarate tab 50 mg</i>	Tier 2	
<i>quetiapine fumarate tab 100 mg</i>	Tier 2	
<i>quetiapine fumarate tab 200 mg</i>	Tier 2	
<i>quetiapine fumarate tab 300 mg</i>	Tier 2	
<i>quetiapine fumarate tab 400 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	Tier 2	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 0.5 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 0.25 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 1 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 2 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 3 mg</i>	Tier 2	
<i>risperidone orally disintegrating tab 4 mg</i>	Tier 2	
<i>risperidone soln 1 mg/ml</i>	Tier 2	
<i>risperidone tab 0.5 mg</i>	Tier 2	
<i>risperidone tab 0.25 mg</i>	Tier 2	
<i>risperidone tab 1 mg</i>	Tier 2	
<i>risperidone tab 2 mg</i>	Tier 2	
<i>risperidone tab 3 mg</i>	Tier 2	
<i>risperidone tab 4 mg</i>	Tier 2	
<i>thioridazine hcl tab 10 mg</i>	Tier 2	
<i>thioridazine hcl tab 25 mg</i>	Tier 2	
<i>thioridazine hcl tab 50 mg</i>	Tier 2	
<i>thioridazine hcl tab 100 mg</i>	Tier 2	
<i>thiothixene cap 1 mg</i>	Tier 2	
<i>thiothixene cap 2 mg</i>	Tier 2	
<i>thiothixene cap 5 mg</i>	Tier 2	
<i>thiothixene cap 10 mg</i>	Tier 2	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	Tier 2	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 64
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	Tier 2	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	Tier 2	
VRAYLAR CAP 1.5-3MG	Tier 3	ST; PA**
VRAYLAR CAP 1.5MG	Tier 3	ST; PA**
VRAYLAR CAP 3MG	Tier 3	ST; PA**
VRAYLAR CAP 4.5MG	Tier 3	ST; PA**
VRAYLAR CAP 6MG	Tier 3	ST; PA**
<i>ziprasidone hcl cap 20 mg</i>	Tier 2	
<i>ziprasidone hcl cap 40 mg</i>	Tier 2	
<i>ziprasidone hcl cap 60 mg</i>	Tier 2	
<i>ziprasidone hcl cap 80 mg</i>	Tier 2	

ANTISEIZURE AGENTS

<i>carbamazepine cap er 12hr 100 mg</i>	Tier 2	
<i>carbamazepine cap er 12hr 200 mg</i>	Tier 2	
<i>carbamazepine cap er 12hr 300 mg</i>	Tier 2	
<i>carbamazepine chew tab 100 mg</i>	Tier 2	
<i>carbamazepine susp 100 mg/5ml</i>	Tier 2	
<i>carbamazepine tab 200 mg</i>	Tier 2	
<i>carbamazepine tab er 12hr 100 mg</i>	Tier 2	
<i>carbamazepine tab er 12hr 200 mg</i>	Tier 2	
<i>carbamazepine tab er 12hr 400 mg</i>	Tier 2	
<i>clobazam suspension 2.5 mg/ml</i>	Tier 2	
<i>clobazam tab 10 mg</i>	Tier 2	
<i>clobazam tab 20 mg</i>	Tier 2	
<i>clonazepam tab 0.5 mg</i>	Tier 2	
<i>clonazepam tab 1 mg</i>	Tier 2	
<i>clonazepam tab 2 mg</i>	Tier 2	
<i>clorazepate dipotassium tab 3.75 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>clorazepate dipotassium tab 7.5 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>clorazepate dipotassium tab 15 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>diazepam con 5mg/ml</i>	Tier 2	QL (240 mL every 30 days)
<i>diazepam inj 5 mg/ml</i>	Tier 2	
<i>diazepam oral soln 1 mg/ml</i>	Tier 2	QL (1200 mL every 30 days)
<i>diazepam tab 2 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>diazepam tab 5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>diazepam tab 10 mg</i>	Tier 2	QL (120 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
DILANTIN CAP 30MG	Tier 4	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	Tier 2	
<i>divalproex sodium tab delayed release 125 mg</i>	Tier 2	
<i>divalproex sodium tab delayed release 250 mg</i>	Tier 2	
<i>divalproex sodium tab delayed release 500 mg</i>	Tier 2	
<i>divalproex sodium tab er 24 hr 250 mg</i>	Tier 2	
<i>divalproex sodium tab er 24 hr 500 mg</i>	Tier 2	
<i>epitol tab 200mg</i>	Tier 2	
<i>ethosuximide cap 250 mg</i>	Tier 2	
<i>ethosuximide soln 250 mg/5ml</i>	Tier 2	
<i>felbamate susp 600 mg/5ml</i>	Tier 2	
<i>felbamate tab 400 mg</i>	Tier 2	
<i>felbamate tab 600 mg</i>	Tier 2	
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	Tier 2	
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	Tier 2	
FYCOMPA SUS 0.5MG/ML	Tier 4	
FYCOMPA TAB 2MG	Tier 4	
FYCOMPA TAB 4MG	Tier 4	
FYCOMPA TAB 6MG	Tier 4	
FYCOMPA TAB 8MG	Tier 4	
FYCOMPA TAB 10MG	Tier 4	
FYCOMPA TAB 12MG	Tier 4	
<i>gabapentin cap 100 mg</i>	Tier 2	QL (6 caps every day)
<i>gabapentin cap 300 mg</i>	Tier 2	QL (6 caps every day)
<i>gabapentin cap 400 mg</i>	Tier 2	QL (6 caps every day)
<i>gabapentin oral soln 250 mg/5ml</i>	Tier 2	QL (72 mL every day)
<i>gabapentin tab 600 mg</i>	Tier 2	QL (6 tabs every day)
<i>gabapentin tab 800 mg</i>	Tier 2	QL (4 tabs every day)
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	Tier 2	
<i>lacosamide oral solution 10 mg/ml</i>	Tier 2	
<i>lacosamide tab 50 mg</i>	Tier 2	
<i>lacosamide tab 100 mg</i>	Tier 2	
<i>lacosamide tab 150 mg</i>	Tier 2	
<i>lacosamide tab 200 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 25 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 50 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 100 mg</i>	Tier 2	
<i>lamotrigine orally disintegrating tab 200 mg</i>	Tier 2	
<i>lamotrigine tab 25 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	Tier 2	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	Tier 2	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	Tier 2	
<i>lamotrigine tab 100 mg</i>	Tier 2	
<i>lamotrigine tab 150 mg</i>	Tier 2	
<i>lamotrigine tab 200 mg</i>	Tier 2	
<i>lamotrigine tab chewable dispersible 5 mg</i>	Tier 2	
<i>lamotrigine tab chewable dispersible 25 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 25 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 50 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 100 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 200 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 250 mg</i>	Tier 2	
<i>lamotrigine tab er 24hr 300 mg</i>	Tier 2	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	Tier 2	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	Tier 2	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	Tier 2	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	Tier 2	
<i>levetiracetam oral soln 100 mg/ml</i>	Tier 2	
<i>levetiracetam tab 250 mg</i>	Tier 2	
<i>levetiracetam tab 500 mg</i>	Tier 2	
<i>levetiracetam tab 750 mg</i>	Tier 2	
<i>levetiracetam tab 1000 mg</i>	Tier 2	
<i>levetiracetam tab er 24hr 500 mg</i>	Tier 2	
<i>levetiracetam tab er 24hr 750 mg</i>	Tier 2	
<i>methsuximide cap 300 mg</i>	Tier 2	
NAYZILAM SPR 5MG	Tier 3	QL (10 units every 30 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	Tier 2	
<i>oxcarbazepine tab 150 mg</i>	Tier 2	
<i>oxcarbazepine tab 300 mg</i>	Tier 2	
<i>oxcarbazepine tab 600 mg</i>	Tier 2	
<i>phenobarbital elixir 20 mg/5ml</i>	Tier 2	
<i>phenobarbital tab 15 mg</i>	Tier 2	
<i>phenobarbital tab 16.2 mg</i>	Tier 2	
<i>phenobarbital tab 30 mg</i>	Tier 2	
<i>phenobarbital tab 32.4 mg</i>	Tier 2	
<i>phenobarbital tab 60 mg</i>	Tier 2	
<i>phenobarbital tab 64.8 mg</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>phenobarbital tab 97.2 mg</i>	Tier 2	
<i>phenobarbital tab 100 mg</i>	Tier 2	
<i>phenytoin chw 50mg</i>	Tier 2	
<i>phenytoin sodium extended cap 100 mg</i>	Tier 2	
<i>phenytoin sodium extended cap 200 mg</i>	Tier 2	
<i>phenytoin sodium extended cap 300 mg</i>	Tier 2	
<i>phenytoin sodium inj 50 mg/ml</i>	Tier 2	
<i>phenytoin susp 125 mg/5ml</i>	Tier 2	
<i>pregabalin cap 25 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 50 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 75 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 100 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 150 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 200 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 225 mg</i>	Tier 2	ST; PA**
<i>pregabalin cap 300 mg</i>	Tier 2	ST; PA**
<i>pregabalin soln 20 mg/ml</i>	Tier 2	ST; PA**
<i>primidone tab 50 mg</i>	Tier 2	
<i>primidone tab 250 mg</i>	Tier 2	
<i>rufinamide susp 40 mg/ml</i>	Tier 2	
<i>rufinamide tab 200 mg</i>	Tier 2	
<i>rufinamide tab 400 mg</i>	Tier 2	
<i>tiagabine hcl tab 2 mg</i>	Tier 2	
<i>tiagabine hcl tab 4 mg</i>	Tier 2	
<i>tiagabine hcl tab 12 mg</i>	Tier 2	
<i>tiagabine hcl tab 16 mg</i>	Tier 2	
<i>topiramate sprinkle cap 15 mg</i>	Tier 2	
<i>topiramate sprinkle cap 25 mg</i>	Tier 2	
<i>topiramate tab 25 mg</i>	Tier 2	
<i>topiramate tab 50 mg</i>	Tier 2	
<i>topiramate tab 100 mg</i>	Tier 2	
<i>topiramate tab 200 mg</i>	Tier 2	
<i>valproate sodium inj 100 mg/ml</i>	Tier 2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	Tier 2	
<i>valproic acid cap 250 mg</i>	Tier 2	
<i>vigabatrin powd pack 500 mg</i>	Tier 5	PA, QL (180 packets every 30 days)
<i>vigabatrin tab 500 mg</i>	Tier 5	PA, QL (180 tabs every 30 days)
XCOPRI PAK 12.5-25	Tier 3	
XCOPRI PAK 50-100MG	Tier 3	
XCOPRI PAK 100-150	Tier 3	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
XCOPRI PAK 150-200	Tier 3	
XCOPRI TAB 50MG	Tier 3	
XCOPRI TAB 100MG	Tier 3	
XCOPRI TAB 150MG	Tier 3	
XCOPRI TAB 200MG	Tier 3	
<i>zonisamide cap 25 mg</i>	Tier 2	
<i>zonisamide cap 50 mg</i>	Tier 2	
<i>zonisamide cap 100 mg</i>	Tier 2	

ATTENTION DEFICIT HYPERACTIVITY DISORDER

ADZENYS XR TAB 3.1MG	Tier 4	QL (60 tabs every 30 days)
ADZENYS XR TAB 6.3MG	Tier 4	QL (60 tabs every 30 days)
ADZENYS XR TAB 9.4MG	Tier 4	QL (60 tabs every 30 days)
ADZENYS XR TAB 12.5MG	Tier 4	QL (30 tabs every 30 days)
ADZENYS XR TAB 15.7 MG	Tier 4	QL (30 tabs every 30 days)
ADZENYS XR TAB 18.8MG	Tier 4	QL (30 tabs every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	Tier 2	QL (90 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	Tier 2	
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	Tier 2	
AZSTARYS CAP 26.1-5.2	Tier 4	QL (30 caps every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
AZSTARYS CAP 39.2-7.8	Tier 4	QL (30 caps every 30 days)
AZSTARYS CAP 52.3-10.	Tier 4	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	Tier 2	QL (30 caps every 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	Tier 2	QL (120 caps every 30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	Tier 2	QL (1,200 mL every 30 days)
<i>dextroamphetamine sulfate tab 5 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dextroamphetamine sulfate tab 10 mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>dextroamphetamine sulfate tab 15 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>dextroamphetamine sulfate tab 20 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>dextroamphetamine sulfate tab 30 mg</i>	Tier 2	QL (30 tabs every 30 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	Tier 2	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	Tier 2	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	Tier 2	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 70
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>methamphetamine hcl tab 5 mg</i>	Tier 2	QL (150 tabs every 30 days)
<i>methylphenidate hcl cap er 10 mg (cd)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 20 mg (cd)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 30 mg (cd)</i>	Tier 2	QL (60 caps every 30 days)
<i>methylphenidate hcl cap er 40 mg (cd)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 50 mg (cd)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl cap er 60 mg (cd)</i>	Tier 2	QL (30 caps every 30 days)
<i>methylphenidate hcl chew tab 2.5 mg</i>	Tier 2	QL (180 chew tabs every 30 days)
<i>methylphenidate hcl chew tab 5 mg</i>	Tier 2	QL (180 chew tabs every 30 days)
<i>methylphenidate hcl chew tab 10 mg</i>	Tier 2	QL (180 chew tabs every 30 days)
<i>methylphenidate hcl soln 5 mg/5ml</i>	Tier 2	QL (1800 mL every 30 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	Tier 2	QL (900 mL every 30 days)
<i>methylphenidate hcl tab 5 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>methylphenidate hcl tab 10 mg</i>	Tier 2	QL (180 tabs every 30 days)
<i>methylphenidate hcl tab 20 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	Tier 2	QL (90 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	Tier 2	QL (60 tabs every 30 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	Tier 2	QL (60 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 71
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	Tier 2	QL (30 tabs every 30 days)
VYVANSE CAP 10MG	Tier 3	QL (60 caps every 30 days)
VYVANSE CAP 20MG	Tier 3	QL (60 caps every 30 days)
VYVANSE CAP 30MG	Tier 3	QL (60 caps every 30 days)
VYVANSE CAP 40MG	Tier 3	QL (30 caps every 30 days)
VYVANSE CAP 50MG	Tier 3	QL (30 caps every 30 days)
VYVANSE CAP 60MG	Tier 3	QL (30 caps every 30 days)
VYVANSE CAP 70MG	Tier 3	QL (30 caps every 30 days)
VYVANSE CHW 10MG	Tier 3	QL (60 tabs every 30 days)
VYVANSE CHW 20MG	Tier 3	QL (60 tabs every 30 days)
VYVANSE CHW 30MG	Tier 3	QL (60 tabs every 30 days)
VYVANSE CHW 40MG	Tier 3	QL (30 tabs every 30 days)
VYVANSE CHW 50MG	Tier 3	QL (30 tabs every 30 days)
VYVANSE CHW 60MG	Tier 3	QL (30 tabs every 30 days)
<i>zenzedi tab 2.5mg</i>	Tier 2	QL (120 tabs every 30 days)
<i>zenzedi tab 7.5mg</i>	Tier 2	QL (120 tabs every 30 days)
FIBROMYALGIA		
SAVELLA MIS TITR PAK	Tier 4	ST; PA**
SAVELLA TAB 12.5MG	Tier 4	ST; PA**
SAVELLA TAB 25MG	Tier 4	ST; PA**
SAVELLA TAB 50MG	Tier 4	ST; PA**
SAVELLA TAB 100MG	Tier 4	ST; PA**
HYPNOTICS		
BELSOMRA TAB 5MG	Tier 3	ST; PA**
BELSOMRA TAB 10MG	Tier 3	ST; PA**
BELSOMRA TAB 15MG	Tier 3	ST; PA**
BELSOMRA TAB 20MG	Tier 3	ST; PA**
DAYVIGO TAB 5MG	Tier 3	PA, QL (30 tabs every 30 days)
DAYVIGO TAB 10MG	Tier 3	PA, QL (30 tabs every 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	Tier 2	QL (30 tabs every 30 days); QL applies to members age 65 and older
<i>doxylamine succinate tab 25mg</i>	Tier 2	OTC
<i>estazolam tab 1 mg</i>	Tier 4	QL (15 tabs every 30 days)
<i>estazolam tab 2 mg</i>	Tier 4	QL (15 tabs every 30 days)
<i>eszopiclone tab 1 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>eszopiclone tab 2 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>eszopiclone tab 3 mg</i>	Tier 2	QL (15 tabs every 30 days)
EXCEDRIN PM TAB 500-38MG	Tier 1	OTC
<i>ramelteon tab 8 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>tasimelteon capsule 20 mg</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>temazepam cap 7.5 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>temazepam cap 15 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>temazepam cap 22.5 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>temazepam cap 30 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>triazolam tab 0.25 mg</i>	Tier 4	QL (10 tabs every 30 days)
<i>triazolam tab 0.125 mg</i>	Tier 4	QL (10 tabs every 30 days)
<i>zaleplon cap 5 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>zaleplon cap 10 mg</i>	Tier 2	QL (15 caps every 30 days)
<i>zolpidem tartrate tab 5 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>zolpidem tartrate tab 10 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>zolpidem tartrate tab er 6.25 mg</i>	Tier 2	QL (15 tabs every 30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	Tier 2	QL (15 tabs every 30 days)

MIGRAINE

AJOVY INJ 225/1.5	Tier 3	ST, QL (3 injections every 90 days); PA**
<i>almotriptan malate tab 6.25 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>almotriptan malate tab 12.5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	Tier 2	
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	Tier 2	QL (12 tabs every 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	Tier 2	QL (12 tabs every 30 days)
EMGALITY INJ 100MG/ML	Tier 3	ST, QL (3 injections every 30 days); PA**
EMGALITY INJ 120MG/ML	Tier 3	ST, QL (2 injections every 30 days); PA**
<i>ergotamine w/ caffeine tab 1-100 mg</i>	Tier 4	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 73
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	Tier 2	QL (18 tabs every 30 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	Tier 2	QL (12 tabs every 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	Tier 2	QL (12 tabs every 30 days)
QULIPTA TAB 10MG	Tier 3	ST, QL (30 tabs every 30 days); PA**
QULIPTA TAB 30MG	Tier 3	ST, QL (30 tabs every 30 days); PA**
QULIPTA TAB 60MG	Tier 3	ST, QL (30 tabs every 30 days); PA**
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	Tier 2	QL (18 tabs every 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	Tier 2	QL (18 tabs every 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	Tier 2	QL (18 tabs every 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	Tier 2	QL (18 tabs every 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	Tier 2	QL (24 sprays every 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	Tier 2	QL (12 sprays every 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	Tier 2	QL (12 vials every 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	Tier 2	QL (18 syringes every 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	Tier 2	QL (12 units every 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	Tier 2	QL (18 syringes every 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	Tier 2	QL (12 units every 30 days)
<i>sumatriptan succinate tab 25 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>sumatriptan succinate tab 50 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>sumatriptan succinate tab 100 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	Tier 4	ST, QL (9 tabs every 30 days); PA**
UBRELVY TAB 50MG	Tier 3	ST, QL (16 tabs every 30 days); PA**
UBRELVY TAB 100MG	Tier 3	ST, QL (16 tabs every 30 days); PA**
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	Tier 2	QL (12 sprays every 30 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	Tier 2	QL (12 sprays every 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	Tier 2	QL (12 tabs every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 74
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>zolmitriptan orally disintegrating tab 5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>zolmitriptan tab 2.5 mg</i>	Tier 2	QL (12 tabs every 30 days)
<i>zolmitriptan tab 5 mg</i>	Tier 2	QL (12 tabs every 30 days)

MISCELLANEOUS

<i>EVRYSDI SOL</i>	Tier 6	PA, QL (2 bottles every 24 days)
<i>lithium carbonate cap 150 mg</i>	Tier 2	
<i>lithium carbonate cap 300 mg</i>	Tier 2	
<i>lithium carbonate cap 600 mg</i>	Tier 2	
<i>lithium carbonate tab 300 mg</i>	Tier 2	
<i>lithium carbonate tab er 300 mg</i>	Tier 2	
<i>lithium carbonate tab er 450 mg</i>	Tier 2	
<i>LITHIUM SOL 8MEQ/5ML</i>	Tier 4	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	Tier 2	
<i>pyridostigmine bromide tab 60 mg</i>	Tier 2	
<i>pyridostigmine bromide tab er 180 mg</i>	Tier 2	
<i>riluzole tab 50 mg</i>	Tier 2	

MOVEMENT DISORDERS

<i>tetrabenazine tab 12.5 mg</i>	Tier 5	PA, QL (120 tabs every 30 days)
<i>tetrabenazine tab 25 mg</i>	Tier 5	PA, QL (60 tabs every 30 days)

MULTIPLE SCLEROSIS AGENTS

<i>BETASERON INJ 0.3MG</i>	Tier 5	PA, QL (14 injections every 28 days)
<i>COPAXONE INJ 20MG/ML</i>	Tier 5	PA, QL (30 injections every 30 days)
<i>COPAXONE INJ 40MG/ML</i>	Tier 5	PA, QL (12 syringes every 28 days)
<i>dalfampridine tab er 12hr 10 mg</i>	Tier 6	PA, QL (60 tabs every 30 days)
<i>dimethyl fumarate capsule delayed release 120 mg</i>	Tier 5	PA, QL (14 caps every 28 days)
<i>dimethyl fumarate capsule delayed release 240 mg</i>	Tier 5	PA, QL (60 caps every 30 days)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	Tier 5	PA, QL (1 kit every 30 days)
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	Tier 5	PA, QL (30 caps every 30 days)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	Tier 3	PA, QL (12 syringes every 28 days)
<i>glatopa inj 20mg/ml</i>	Tier 3	PA, QL (30 injections every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 75
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>teriflunomide tab 7 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
<i>teriflunomide tab 14 mg</i>	Tier 5	PA, QL (30 tabs every 30 days)
TYSABRI INJ 300/15ML	Tier 5	PA, QL (1 vial every 28 days)

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen tab 5 mg</i>	Tier 2	
<i>baclofen tab 10 mg</i>	Tier 2	
<i>baclofen tab 20 mg</i>	Tier 2	
<i>carisoprodol tab 350 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	Tier 4	PA, QL (168 tabs every 30 days); High Risk Medications require PA for members age 70 and older
<i>chlorzoxazone tab 500 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>cyclobenzaprine hcl tab 5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>cyclobenzaprine hcl tab 10 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>dantrolene sodium cap 25 mg</i>	Tier 2	
<i>dantrolene sodium cap 50 mg</i>	Tier 2	
<i>dantrolene sodium cap 100 mg</i>	Tier 2	
<i>metaxalone tab 800 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol tab 500 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol tab 750 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>orphenadrine citrate inj 30 mg/ml</i>	Tier 2	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	Tier 2	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 76
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
NARCOLEPSY/CATAPLEXY		
<i>armodafinil tab 50 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>armodafinil tab 150 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>armodafinil tab 200 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>armodafinil tab 250 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>modafinil tab 100 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
<i>modafinil tab 200 mg</i>	Tier 2	PA, QL (60 tabs every 30 days)
SOD OXYBATE SOL 500MG/ML	Tier 5	PA, QL (540mL every 30 days)
SUNOSI TAB 75MG	Tier 3	PA, QL (30 tabs every 30 days)
SUNOSI TAB 150MG	Tier 3	PA, QL (30 tabs every 30 days)
OPIOID AGONIST/ANTAGONIST		
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	Tier 2	QL (90 units every 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	Tier 2	QL (90 units every 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	Tier 2	QL (3 units every day)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	Tier 2	QL (2 units every day)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay
ZUBSOLV SUB 0.7-0.18	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 1.4-0.36	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 2.9-0.71	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 5.7-1.4	Tier 3	QL (90 units every 30 days)
ZUBSOLV SUB 8.6-2.1	Tier 3	QL (60 units every 30 days)
ZUBSOLV SUB 11.4-2.9	Tier 3	QL (30 units every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 77
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
OPIOID ANTAGONIST		
<i>naloxone hcl inj 0.4 mg/ml</i>	Tier 2	
<i>naloxone hcl inj 4 mg/10ml</i>	Tier 2	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	Tier 2	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	Tier 2	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	Tier 2	
<i>naltrexone hcl tab 50 mg</i>	Tier 0	\$0 copay
OPIOID PARTIAL AGONISTS		
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay; Must obtain approval after the first 30 day supply
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	Tier 0	QL (90 tabs every 30 days); \$0 copay; Must obtain approval after the first 30 day supply
PSYCHOTHERAPEUTIC-MISC		
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	Tier 4	QL (120 tabs every 30 days); QL applies to members age 65 and older
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	Tier 4	QL (60 tabs every 30 days); QL applies to members age 65 and older
NUDEXTA CAP 20-10MG	Tier 3	PA
<i>perphenazine-amitriptyline tab 2-10 mg</i>	Tier 4	QL (150 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 2-25 mg</i>	Tier 4	QL (60 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 4-10 mg</i>	Tier 4	QL (120 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 4-25 mg</i>	Tier 4	QL (60 units every 30 days); QL applies to members age 65 and older
<i>perphenazine-amitriptyline tab 4-50 mg</i>	Tier 4	QL (30 units every 30 days); QL applies to members age 65 and older
<i>pimozide tab 1 mg</i>	Tier 2	
<i>pimozide tab 2 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	Tier 0	\$0 limited to 2 treatment cycles/year
<i>nicotine gum 4mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 2 mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 4 mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex lozenge 2 mg</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>sm nicotine dis 7mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>sm nicotine dis 14mg/24h</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>sm nicotine dis 21mg/24h</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	Tier 0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 1 mg (base equiv)</i>	Tier 0	\$0 limited to 2 treatment cycles/year
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	Tier 0	\$0 limited to 2 treatment cycles/year

COUGH/COLD/ALLERGY

ANTITUSSIVES

<i>robitussin sus 30mg/5ml</i>	Tier 1	OTC
ROBITUSSIN SYP 7.5/5ML	Tier 1	OTC
<i>wal-tussin syp 15mg/5ml</i>	Tier 1	OTC

COUGH/COLD/ALLERGY COMBINATIONS

<i>allergy/coug tab 5-120mg</i>	Tier 1	OTC
<i>cold/cough liq child</i>	Tier 1	OTC
CORICIDN HBP TAB CGH&COLD	Tier 1	OTC
CORICIDN HBP TAB COLD/FLU	Tier 1	OTC
DIMETAPP CLD ELX /ALLERGY	Tier 1	OTC
<i>dimetapp liq nighttim</i>	Tier 1	OTC
DIMETAPP SYP CGH/COLD	Tier 1	OTC
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	Tier 2	OTC
<i>kidkare liq cgh/cold</i>	Tier 1	OTC
<i>mucus relief tab dm cough</i>	Tier 1	OTC
<i>mucus-d tab 60-600mg</i>	Tier 1	OTC
<i>nasal relief tab night</i>	Tier 1	OTC
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>robit cgh dm cap 10-200mg</i>	Tier 1	OTC
<i>robatussin cap cold+flu</i>	Tier 1	OTC
<i>robatussin liq</i>	Tier 1	OTC
ROBITUSSIN LIQ CGH/CONG	Tier 1	OTC
ROBITUSSIN LIQ TO GO CF	Tier 1	OTC
ROBITUSSN DM SYP	Tier 1	OTC
SCOT-TUSSIN LIQ DM SF	Tier 1	OTC
<i>sinus tab max-st</i>	Tier 1	OTC
<i>sudafed pe sol cold/cgh</i>	Tier 1	OTC
<i>theraflu sev tab cold/cgh</i>	Tier 1	OTC
TRIAMINIC SYP CGH/CNG	Tier 1	OTC
TRIAMINIC SYP CHST/NSL	Tier 1	OTC
TYLENOL CHLD SUS COLD FLU	Tier 1	OTC
TYLENOL COLD TAB SEVERE	Tier 1	OTC
<i>tylenol sinu tab 5-325mg</i>	Tier 1	OTC
<i>wal-itin d tab 24 hour</i>	Tier 1	OTC
<i>wal-phed pe tab 4-10mg</i>	Tier 1	OTC
<i>wal-profen tab cold/sin</i>	Tier 1	OTC
<i>wal-tussin liq cf</i>	Tier 1	OTC
ZYNCOF SYP 20-400/5	Tier 1	OTC
ZYRTEC-D TAB 5-120MG	Tier 1	OTC

EXPECTORANTS

<i>guaifenesin tab 200 mg</i>	Tier 1	OTC
<i>mucus relief tab 400mg</i>	Tier 1	OTC
<i>mucus relief tab 600mg er</i>	Tier 1	OTC
<i>mucus relief tab 1200mg</i>	Tier 1	OTC
<i>mucus+chst liq 100/5ml</i>	Tier 1	OTC
<i>tussin chest liq 100/5ml</i>	Tier 1	OTC

MISC. RESPIRATORY INHALANTS

<i>medicated oin chst rub</i>	Tier 1	OTC
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DERMATOLOGICALS

EMOLLIENTS

<i>a+d prevent oin</i>	Tier 1	OTC
AVEENO BATH PAK TREATMNT	Tier 1	OTC
KERI NRSHING LOT SHEA BTR	Tier 1	OTC

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS

INFANT FOODS

GOOD START LIQ W/IRON	Tier 1	OTC
GOOD START POW NATURAL	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
ENDOCRINE AND METABOLIC		
ACROMEGALY		
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	Tier 5	PA, QL (225 ml every 30 days)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	Tier 5	PA, QL (45 ml every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	Tier 5	PA, QL (90 ml every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	Tier 5	PA, QL (90 ml every 30 days)
SOMATULINE INJ 60/0.2ML	Tier 5	PA, QL (1 injection every 28 days)
SOMATULINE INJ 90/0.3ML	Tier 5	PA, QL (1 injection every 28 days)
SOMATULINE INJ 120/.5ML	Tier 5	PA, QL (1 injection every 28 days)
SOMAVERT INJ 10MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 15MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 20MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 25MG	Tier 5	PA, QL (30 vials every 30 days)
SOMAVERT INJ 30MG	Tier 5	PA, QL (30 vials every 30 days)
ANDROGENS		
<i>oxandrolone tab 2.5 mg</i>	Tier 2	PA
<i>oxandrolone tab 10 mg</i>	Tier 2	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	Tier 2	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	Tier 2	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	Tier 2	PA
<i>testosterone td gel 10mg/act (2%)</i>	Tier 2	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	Tier 2	PA

Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose tab 25 mg</i>	Tier 2	
<i>acarbose tab 50 mg</i>	Tier 2	
<i>acarbose tab 100 mg</i>	Tier 2	
<i>miglitol tab 25 mg</i>	Tier 2	
<i>miglitol tab 50 mg</i>	Tier 2	
<i>miglitol tab 100 mg</i>	Tier 2	
ANTIDIABETICS, AMYLIN ANALOGS		
SYMLINPEN 60 INJ 1000MCG	Tier 4	ST; PA**
SYMLNPEN 120 INJ 1000MCG	Tier 4	ST; PA**
ANTIDIABETICS, BIGUANIDE		
<i>metformin hcl tab 500 mg</i>	Tier 1	
<i>metformin hcl tab 850 mg</i>	Tier 1	\$0 copay for members age 35-70 for prevention of diabetes
<i>metformin hcl tab 1000 mg</i>	Tier 1	
<i>metformin hcl tab er 24hr 500 mg</i>	Tier 1	
<i>metformin hcl tab er 24hr 750 mg</i>	Tier 1	
ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS		
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	Tier 1	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	Tier 1	
<i>glipizide-metformin hcl tab 5-500 mg</i>	Tier 1	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 INHIBITORS		
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	Tier 1	ST; PA**
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	Tier 1	ST; PA**
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	Tier 1	ST; PA**
JANUVIA TAB 25MG	Tier 3	ST; PA**
JANUVIA TAB 50MG	Tier 3	ST; PA**
JANUVIA TAB 100MG	Tier 3	ST; PA**
ANTIDIABETICS, DPP-4 INHIBITOR COMBINATIONS		
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	Tier 1	ST; PA**
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	Tier 1	ST; PA**
JANUMET TAB 50-500MG	Tier 3	ST; PA**
JANUMET TAB 50-1000	Tier 3	ST; PA**
JANUMET XR TAB 50-500MG	Tier 3	ST; PA**
JANUMET XR TAB 50-1000	Tier 3	ST; PA**
JANUMET XR TAB 100-1000	Tier 3	ST; PA**
JENTADUETO TAB XR	Tier 4	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
OZEMPIC INJ 2/1.5ML	Tier 3	ST, QL (1.5 mL every 28 days); PA**

Drug Name	Drug Tier	Requirements/Limits
OZEMPIC INJ 2MG/3ML	Tier 3	ST, QL (3 mL every 28 days); PA**
OZEMPIC INJ 4MG/3ML	Tier 3	ST, QL (3 mL every 28 days); PA**
OZEMPIC INJ 8MG/3ML	Tier 3	ST, QL (3 mL every 28 days); PA**
TRULICITY INJ 0.75/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
TRULICITY INJ 1.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
TRULICITY INJ 3/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
TRULICITY INJ 4.5/0.5	Tier 3	ST, QL (4 pens every 28 days); PA**
VICTOZA INJ 18MG/3ML	Tier 3	ST, QL (3 pens every 30 days); PA**

ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS

SOLIQUA INJ 100/33	Tier 3	ST; PA**
XULTOPHY INJ 100/3.6	Tier 3	ST; PA**

ANTIDIABETICS, INSULIN

BASAGLAR KWIKPEN	Tier 3	
FIASP FLEX INJ TOUCH	Tier 3	
FIASP INJ 100/ML	Tier 3	
FIASP PENFIL INJ U-100	Tier 3	
HUMULIN INJ 70/30	Tier 4	OTC
HUMULIN INJ 70/30KWP	Tier 4	OTC
HUMULIN N INJ U-100	Tier 4	OTC
HUMULIN N INJ U-100KWP	Tier 4	OTC
HUMULIN R INJ U-100	Tier 4	OTC
HUMULIN R INJ U-500	Tier 3	
LEVEMIR INJ	Tier 3	
LEVEMIR INJ FLEXPEN	Tier 3	
NOVOLIN INJ 70/30	Tier 3	OTC; RELION not covered
NOVOLIN INJ 70/30 FP	Tier 3	OTC; RELION not covered
NOVOLIN N INJ 100 UNIT	Tier 3	OTC; RELION not covered
NOVOLIN N INJ U-100	Tier 3	OTC; RELION not covered
NOVOLIN R INJ 100 UNIT	Tier 3	OTC; RELION not covered
NOVOLIN R INJ U-100	Tier 3	OTC; RELION not covered
NOVOLOG INJ 100/ML	Tier 3	
NOVOLOG INJ FLEXPEN	Tier 3	
NOVOLOG INJ PENFILL	Tier 3	
NOVOLOG MIX INJ 70/30	Tier 3	
NOVOLOG MIX INJ FLEXPEN	Tier 3	

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Drug Name	Drug Tier	Requirements/Limits
TRESIBA FLEX INJ 100UNIT	Tier 3	
TRESIBA FLEX INJ 200UNIT	Tier 3	
TRESIBA INJ 100UNIT	Tier 3	
ANTIDIABETICS, INSULIN SENSITIZER		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	Tier 1	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	Tier 1	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	Tier 1	
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION		
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	Tier 1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	Tier 1	
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION		
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	Tier 1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	Tier 1	
ANTIDIABETICS, MEGLITINIDE		
<i>nateglinide tab 60 mg</i>	Tier 1	
<i>nateglinide tab 120 mg</i>	Tier 1	
<i>repaglinide tab 0.5 mg</i>	Tier 1	
<i>repaglinide tab 1 mg</i>	Tier 1	
<i>repaglinide tab 2 mg</i>	Tier 1	
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR COMBINATIONS		
SYNJARDY TAB	Tier 3	ST; PA**
SYNJARDY TAB 5-500MG	Tier 3	ST; PA**
SYNJARDY TAB 5-1000MG	Tier 3	ST; PA**
SYNJARDY TAB 12.5-500	Tier 3	ST; PA**
SYNJARDY XR TAB	Tier 3	ST; PA**
SYNJARDY XR TAB 5-1000MG	Tier 3	ST; PA**
SYNJARDY XR TAB 10-1000	Tier 3	ST; PA**
SYNJARDY XR TAB 25-1000	Tier 3	ST; PA**
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITOR/DPP-4 INHIBITOR COMBINATIONS		
GLYXAMBI TAB 10-5 MG	Tier 3	ST; PA**
GLYXAMBI TAB 25-5 MG	Tier 3	ST; PA**
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITORS		
JARDIANCE TAB 10MG	Tier 3	ST; PA**
JARDIANCE TAB 25MG	Tier 3	ST; PA**
ANTIDIABETICS, SULFONYLUREA		
<i>glimepiride tab 1 mg</i>	Tier 1	
<i>glimepiride tab 2 mg</i>	Tier 1	
<i>glimepiride tab 4 mg</i>	Tier 1	
<i>glipizide tab 5 mg</i>	Tier 1	
<i>glipizide tab 10 mg</i>	Tier 1	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>glipizide tab er 24hr 2.5 mg</i>	Tier 1	
<i>glipizide tab er 24hr 5 mg</i>	Tier 1	
<i>glipizide tab er 24hr 10 mg</i>	Tier 1	
BISPHOSPHONATES		
<i>alendronate sodium oral soln 70 mg/75ml</i>	Tier 2	
<i>alendronate sodium tab 5 mg</i>	Tier 2	
<i>alendronate sodium tab 10 mg</i>	Tier 2	
<i>alendronate sodium tab 35 mg</i>	Tier 2	
<i>alendronate sodium tab 70 mg</i>	Tier 2	
FOSAMAX + D TAB 70-2800	Tier 4	ST; PA**
FOSAMAX + D TAB 70-5600	Tier 4	ST; PA**
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	Tier 2	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	Tier 2	
<i>pamidronate disodium iv soln 3 mg/ml</i>	Tier 2	
<i>risedronate sodium tab 5 mg</i>	Tier 2	
<i>risedronate sodium tab 30 mg</i>	Tier 2	
<i>risedronate sodium tab 35 mg</i>	Tier 2	
<i>risedronate sodium tab 150 mg</i>	Tier 2	
<i>risedronate sodium tab delayed release 35 mg</i>	Tier 2	
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	Tier 5	PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	Tier 5	PA
CALCIUM RECEPTOR AGONISTS		
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	Tier 5	PA, QL (60 tabs every 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	Tier 5	PA, QL (120 tabs every 30 days)
CHELATING AGENTS		
CHEMET CAP 100MG	Tier 4	
<i>deferiprone tab 500 mg</i>	Tier 5	PA
<i>deferiprone tab 1000 mg</i>	Tier 5	PA
FERPRX 2-DAY TAB 1000MG	Tier 5	PA
FERRIPROX SOL 100MG/ML	Tier 5	PA
<i>penicillamine tab 250 mg</i>	Tier 5	PA
<i>sps sus 15gm/60</i>	Tier 2	
VISTOGARD PAK 10GM	Tier 5	QL (20 packets every 5 days)
CONTRACEPTIVES		
<i>altavera tab</i>	Tier 0	C
<i>alyacen tab 1/35</i>	Tier 0	C

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>alyacen tab 7/7/7</i>	Tier 0	C
<i>amethia tab</i>	Tier 0	C
<i>amethyst tab 90-20mcg</i>	Tier 0	C
ANNOVERA MIS	Tier 0	QL (1 every 300 days)
<i>apri tab</i>	Tier 0	C
<i>aranelle tab</i>	Tier 0	C
<i>ashlyna tab</i>	Tier 0	C
<i>aviane tab</i>	Tier 0	C
<i>azurette tab</i>	Tier 0	C
<i>camila tab 0.35mg</i>	Tier 0	C
<i>chateal eq tab 0.15/30</i>	Tier 0	C
CONDOMS MIS	Tier 0	QL (12 condoms every 30 days), OTC
<i>cryselle-28 tab 28 tabs</i>	Tier 0	C
<i>dasetta tab 1/35</i>	Tier 0	C
<i>dasetta tab 7/7/7</i>	Tier 0	C
<i>delyla tab 0.1-0.02</i>	Tier 0	C
DEPO-SQ PROV INJ 104	Tier 0	QL (4 inj every 300 days); C
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	Tier 0	C
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	Tier 0	C
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	Tier 0	C
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	Tier 0	C
DUREX MIS REALFEEL	Tier 0	QL (12 condoms every 30 days), OTC
<i>elinest tab</i>	Tier 0	C
ELLA TAB 30MG	Tier 0	C
<i>enpresse-28 tab</i>	Tier 0	C
<i>enskyce tab</i>	Tier 0	C
<i>errin tab 0.35mg</i>	Tier 0	C
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	Tier 0	C
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	Tier 0	QL (13 every 300 days); C
<i>falmina tab</i>	Tier 0	C
FC2 FEMALE MIS CONDOM	Tier 0	QL (12 condoms every 30 days), OTC
<i>gemmily cap 1/20</i>	Tier 0	C
<i>heather tab 0.35mg</i>	Tier 0	C
<i>introvale tab</i>	Tier 0	C
<i>jolessa tab</i>	Tier 0	C

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>junel 1.5/30 tab</i>	Tier 0	C
<i>junel 1/20 tab</i>	Tier 0	C
<i>junel fe 24 tab 1/20</i>	Tier 0	C
<i>junel fe tab 1.5/30</i>	Tier 0	C
<i>junel fe tab 1/20</i>	Tier 0	C
<i>kariva tab 28 day</i>	Tier 0	C
<i>kelnor tab 1/35</i>	Tier 0	C
<i>kurvelo tab 0.15/30</i>	Tier 0	C
KYLEENA IUD 19.5MG	Tier 0	QL (1 every 300 days); C
<i>larin tab 1.5/30</i>	Tier 0	C
<i>leena tab</i>	Tier 0	C
<i>lessina tab</i>	Tier 0	C
<i>levonest tab</i>	Tier 0	C
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	Tier 0	C
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	Tier 0	C
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	Tier 0	C
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	Tier 0	C
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	Tier 0	C
<i>levora-28 tab 0.15/30</i>	Tier 0	C
LILETTA IUD 52MG	Tier 0	QL (1 every 300 days); C
LO LOESTRIN TAB 1-10-10	Tier 0	C
<i>loryna tab 3-0.02mg</i>	Tier 0	C
<i>low-ogestrel tab</i>	Tier 0	C
<i>lutra tab</i>	Tier 0	C
<i>marlissa tab 0.15/30</i>	Tier 0	C
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	Tier 0	QL (4 inj every 300 days); C
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	Tier 0	QL (4 inj every 300 days); C
<i>microgestin tab 1.5/30</i>	Tier 0	C
MIRENA IUD SYSTEM	Tier 0	QL (1 every 300 days); C
<i>mono-lynyah tab 0.25-35</i>	Tier 0	C
NATAZIA TAB	Tier 0	C
<i>necon tab 0.5/35</i>	Tier 0	C
NEXPLANON IMP 68MG	Tier 0	QL (1 every 300 days); C
NEXTSTELLIS TAB 3-14.2MG	Tier 0	
<i>nikki tab 3-0.02mg</i>	Tier 0	C
<i>nora-be tab 0.35mg</i>	Tier 0	C

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Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	Tier 0	C
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	Tier 0	C
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	Tier 0	C
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	Tier 0	C
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	Tier 0	C
<i>norethindrone tab 0.35 mg</i>	Tier 0	C
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	Tier 0	C
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	Tier 0	C
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	Tier 0	C
<i>nortrel tab 0.5/35</i>	Tier 0	C
<i>nortrel tab 1/35</i>	Tier 0	C
<i>nortrel tab 7/7/7</i>	Tier 0	C
<i>nylia tab 1/35</i>	Tier 0	C
<i>ocella tab 3-0.03mg</i>	Tier 0	C
PARAGARD IUD T380A	Tier 0	QL (1 unit every 300 days); C
<i>portia-28 tab</i>	Tier 0	C
<i>reclipsen tab</i>	Tier 0	C
<i>rivelsa tab</i>	Tier 0	C
SKYLA IUD 13.5MG	Tier 0	QL (1 every 300 days); C
SLYND TAB 4MG	Tier 0	
<i>sprintec 28 tab 28 day</i>	Tier 0	C
<i>sronyx tab</i>	Tier 0	C
<i>syeda tab 3-0.03mg</i>	Tier 0	C
<i>take action tab 1.5mg</i>	Tier 0	OTC; C
<i>tilia fe tab</i>	Tier 0	C
<i>tri-linyah tab</i>	Tier 0	C
<i>tri-sprintec tab</i>	Tier 0	C
<i>trivora-28 tab</i>	Tier 0	C
TRUSTEX/RIA MIS NON-LUB	Tier 0	QL (12 condoms every 30 days), OTC
TRUSTX NON-9 MIS RIB/STUD	Tier 0	QL (12 condoms every 30 days), OTC
TWIRLA DIS 120-30	Tier 0	
TYBLUME CHW 0.1-0.02	Tier 0	

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Drug Name	Drug Tier	Requirements/Limits
<i>velivet pak</i>	Tier 0	C
<i>viorele tab</i>	Tier 0	C
<i>vyfemla tab 0.4-35</i>	Tier 0	C
<i>wera tab 0.5/35</i>	Tier 0	C
<i>xulane dis 150-35</i>	Tier 0	C
<i>zovia 1/35 tab</i>	Tier 0	C

DIABETIC SUPPLIES

ACCU-CHEK BLOOD GLUCOSE TEST KITS	Tier 3	OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (204 Test Strips every 30 days), OTC
ALCOHOL PREP PAD	Tier 3	OTC
AUTOLET PLAT MIS 1.8MM	Tier 3	OTC
CAREFINE MIS 32GX6MM	Tier 3	OTC
DEXCOM G5 MIS RECEIVER	Tier 3	
DEXCOM G5 MIS TRANSMIT	Tier 3	
DEXCOM G6 MIS RECEIVER	Tier 3	
DEXCOM G6 MIS SENSOR	Tier 3	
DEXCOM G6 MIS TRANSMIT	Tier 3	
DEXCOM G7 MIS RECEIVER	Tier 3	
DEXCOM G7 MIS SENSOR	Tier 3	
G4 PLAT PED MIS RVC/SHAR	Tier 3	
G4 PLATINUM MIS PEDIATRC	Tier 3	
G4 PLATINUM MIS RCV/SHAR	Tier 3	
G4 PLATINUM MIS RECEIVER	Tier 3	
G4 PLATINUM MIS TRANSMIT	Tier 3	
G4 SENSOR MIS	Tier 3	
G5/G4 MIS SENSOR	Tier 3	
OMNIPOD 5 G6 KIT INTRO	Tier 3	
OMNIPOD 5 G6 MIS PODS	Tier 3	
OMNIPOD DASH KIT INTRO	Tier 3	
OMNIPOD DASH KIT PDM	Tier 3	
OMNIPOD DASH MIS PODS	Tier 3	
OMNIPOD MIS CLASSIC	Tier 3	
OMNIPOD PDM KIT CLASSIC	Tier 3	
SHARPS CONTAINER	Tier 3	OTC
SOFTCLIX MIS LANCETS	Tier 3	OTC
V-GO 20 KIT	Tier 3	
V-GO 30 KIT	Tier 3	
V-GO 40 KIT	Tier 3	

ENDOMETRIOSIS

<i>danazol cap 50 mg</i>	Tier 2	
<i>danazol cap 100 mg</i>	Tier 2	
<i>danazol cap 200 mg</i>	Tier 2	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ORILISSA TAB 150MG	Tier 3	
ORILISSA TAB 200MG	Tier 3	

ENZYME REPLACEMENTS

<i>betaine powder for oral solution</i>	Tier 5	PA
<i>carglumic acid soluble tab 200 mg</i>	Tier 5	PA
CERDELGA CAP 84MG	Tier 5	PA, QL (56 caps every 28 days)
CYSTAGON CAP 50MG	Tier 5	PA
CYSTAGON CAP 150MG	Tier 5	PA
MYALEPT INJ 11.3MG	Tier 5	PA, QL (30 vials every 30 days)
<i>sapropterin dihydrochloride powder packet 100 mg</i>	Tier 5	PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	Tier 5	PA
<i>sapropterin dihydrochloride tab 100 mg</i>	Tier 5	PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	Tier 5	PA, QL (798g every 30 days)
<i>sodium phenylbutyrate tab 500 mg</i>	Tier 5	PA, QL (1200 tabs every 30 days)

ESTROGENS

CLIMARA PRO DIS WEEKLY	Tier 3	
DEPO-ESTRADI INJ 5MG/ML	Tier 4	
DUAVEE TAB 0.45-20	Tier 3	
ELESTRIN GEL 0.06%	Tier 4	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	Tier 2	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	Tier 2	
<i>estradiol tab 0.5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol tab 1 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol tab 2 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 1 mg/gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.1 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.05 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.06 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.025 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.075 mg/24hr</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol vaginal cream 0.1 mg/gm</i>	Tier 2	
<i>estradiol valerate im in oil 20 mg/ml</i>	Tier 2	
<i>estradiol valerate im in oil 40 mg/ml</i>	Tier 2	
ESTROGEL GEL	Tier 4	PA; High Risk Medications require PA for members age 70 and older
EVAMIST SPR 1.53MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
IMVEXXY MAIN SUP 4MCG	Tier 3	
IMVEXXY MAIN SUP 10MCG	Tier 3	
IMVEXXY STRT SUP 4MCG	Tier 3	
IMVEXXY STRT SUP 10MCG	Tier 3	
<i>jinteli tab 1mg-5mcg</i>	Tier 2	
MENEST TAB 0.3MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 0.625MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 1.25MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 2.5MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
<i>mimvey tab 1-0.5mg</i>	Tier 2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	Tier 2	
PREMARIN TAB 0.3MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.9MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.45MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.625MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
PREMARIN TAB 1.25MG	Tier 4	PA; High Risk Medications require PA for members age 70 and older
PREMARIN VAG CRE 0.625MG	Tier 4	
<i>yuvafem tab 10mcg</i>	Tier 2	

FERTILITY REGULATORS

CHOR GONADOT INJ 10000UNT	Tier 6	PA
<i>clomid tab 50mg</i>	Tier 2	
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	Tier 5	PA
GONAL-F INJ 450UNIT	Tier 5	PA, QL (10 vials every 28 days)
GONAL-F INJ 1050UNIT	Tier 5	PA, QL (6 vials every 28 days)
GONAL-F RFF INJ 75UNIT	Tier 5	PA, QL (60 vials every 28 days)
GONAL-F RFF INJ 300/0.5	Tier 5	PA, QL (15 cartridges every 28 days)
GONAL-F RFF INJ 450/0.75	Tier 5	PA, QL (10 cartridges every 28 days)
GONAL-F RFF INJ 900/1.5	Tier 5	PA, QL (7 cartridges every 28 days)
OVIDREL INJ	Tier 5	PA

GLUCOCORTICOIDS

DEPO-MEDROL INJ 20MG/ML	Tier 4	
DEXAMETHASON CON 1MG/ML	Tier 3	
<i>dexamethasone elixir 0.5 mg/5ml</i>	Tier 2	
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	Tier 2	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	Tier 2	
<i>dexamethasone soln 0.5 mg/5ml</i>	Tier 2	
<i>dexamethasone tab 0.5 mg</i>	Tier 2	
<i>dexamethasone tab 0.75 mg</i>	Tier 2	
<i>dexamethasone tab 1 mg</i>	Tier 2	
<i>dexamethasone tab 1.5 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone tab 2 mg</i>	Tier 2	
<i>dexamethasone tab 4 mg</i>	Tier 2	
<i>dexamethasone tab 6 mg</i>	Tier 2	
EMFLAZA SUS 22.75/ML	Tier 6	PA, QL (52 mL every 30 days)
EMFLAZA TAB 6MG	Tier 6	PA, QL (60 tabs every 30 days)
EMFLAZA TAB 18MG	Tier 6	PA, QL (30 tabs every 30 days)
EMFLAZA TAB 30MG	Tier 6	PA, QL (30 tabs every 30 days)
EMFLAZA TAB 36MG	Tier 6	PA, QL (30 tabs every 30 days)
<i>fludrocortisone acetate tab 0.1 mg</i>	Tier 2	
<i>hydrocortisone tab 5 mg</i>	Tier 2	
<i>hydrocortisone tab 10 mg</i>	Tier 2	
<i>hydrocortisone tab 20 mg</i>	Tier 2	
MEDROL TAB 2MG	Tier 3	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	Tier 2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	Tier 2	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	Tier 2	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	Tier 2	
<i>methylprednisolone tab 4 mg</i>	Tier 2	
<i>methylprednisolone tab 8 mg</i>	Tier 2	
<i>methylprednisolone tab 16 mg</i>	Tier 2	
<i>methylprednisolone tab 32 mg</i>	Tier 2	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	Tier 2	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	Tier 2	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	Tier 2	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	Tier 2	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	Tier 2	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	Tier 2	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	Tier 2	
<i>prednisolone soln 15 mg/5ml</i>	Tier 2	
PREDNISON CON 5MG/ML	Tier 3	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone oral soln 5 mg/5ml</i>	Tier 2	
<i>prednisone tab 1 mg</i>	Tier 2	
<i>prednisone tab 2.5 mg</i>	Tier 2	
<i>prednisone tab 5 mg</i>	Tier 2	
<i>prednisone tab 10 mg</i>	Tier 2	
<i>prednisone tab 20 mg</i>	Tier 2	
<i>prednisone tab 50 mg</i>	Tier 2	
<i>prednisone tab therapy pack 5 mg (21)</i>	Tier 2	
<i>prednisone tab therapy pack 5 mg (48)</i>	Tier 2	
<i>prednisone tab therapy pack 10 mg (21)</i>	Tier 2	
<i>prednisone tab therapy pack 10 mg (48)</i>	Tier 2	
SOLU-CORTEF INJ 100MG	Tier 4	
SOLU-CORTEF INJ 250MG	Tier 4	
SOLU-CORTEF INJ 500MG	Tier 4	
SOLU-CORTEF INJ 1000MG	Tier 4	
SOLU-MEDROL INJ 2GM	Tier 4	
GLUCOSE ELEVATING AGENTS		
<i>glucagon (rdna) for inj kit 1 mg</i>	Tier 2	
GLUCOSE CHW 4GM	Tier 1	OTC
ORAL GLUCOSE REPLACEMENT	Tier 3	OTC
HEREDITARY TYROSINEMIA TYPE 1 AGENTS		
<i>nitisinone cap 2 mg</i>	Tier 5	PA
<i>nitisinone cap 5 mg</i>	Tier 5	PA
<i>nitisinone cap 10 mg</i>	Tier 5	PA
ORFADIN CAP 20MG	Tier 5	PA
ORFADIN SUS 4MG/ML	Tier 5	PA
HUMAN GROWTH HORMONES		
GENOTROPIN INJ 0.2MG	Tier 5	PA
GENOTROPIN INJ 0.4MG	Tier 5	PA
GENOTROPIN INJ 0.6MG	Tier 5	PA
GENOTROPIN INJ 0.8MG	Tier 5	PA
GENOTROPIN INJ 1.2MG	Tier 5	PA
GENOTROPIN INJ 1.4MG	Tier 5	PA
GENOTROPIN INJ 1.6MG	Tier 5	PA
GENOTROPIN INJ 1.8MG	Tier 5	PA
GENOTROPIN INJ 1MG	Tier 5	PA
GENOTROPIN INJ 2MG	Tier 5	PA
GENOTROPIN INJ 5MG	Tier 5	PA
GENOTROPIN INJ 12MG	Tier 5	PA
NORDITROPIN INJ 5/1.5ML	Tier 5	PA
NORDITROPIN INJ 10/1.5ML	Tier 5	PA
NORDITROPIN INJ 15/1.5ML	Tier 5	PA

Drug Name	Drug Tier	Requirements/Limits
NORDITROPIN INJ 30/3ML	Tier 5	PA
LUTEINIZING HORMONE-RELEASING HORMONE (LHRH) AGONISTS		
SYNAREL SOL 2MG/ML	Tier 6	PA
TRIPTODUR SUS 22.5MG	Tier 5	PA
METABOLIC MODIFIERS		
<i>mccarnitine tab 330mg</i>	Tier 1	OTC
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA TAB 10MG	Tier 4	PA
KERENDIA TAB 20MG	Tier 4	PA
MISCELLANEOUS		
<i>cabergoline tab 0.5 mg</i>	Tier 2	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	Tier 2	
INCRELEX INJ 40MG/4ML	Tier 5	PA
INTRAROSA SUP 6.5MG	Tier 4	
OSPHENA TAB 60MG	Tier 4	PA
PROLIA INJ 60MG/ML	Tier 5	PA, QL (60mg every 24 weeks)
<i>raloxifene hcl tab 60 mg</i>	Tier 0	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
SIGNIFOR INJ 0.3MG/ML	Tier 6	PA, QL (60 ampules every 30 days)
SIGNIFOR INJ 0.6MG/ML	Tier 6	PA, QL (60 ampules every 30 days)
SIGNIFOR INJ 0.9MG/ML	Tier 6	PA, QL (60 ampules every 30 days)
SUPPRELIN LA KIT 50MG	Tier 5	PA
<i>tolvaptan tab 15 mg</i>	Tier 5	PA
<i>tolvaptan tab 30 mg</i>	Tier 5	PA
TYMLOS INJ	Tier 5	PA, QL (1 pen every 30 days)
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	Tier 2	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	Tier 2	
FOSRENOL POW 750MG	Tier 4	
FOSRENOL POW 1000MG	Tier 4	
PHOSLYRA SOL	Tier 3	
<i>sevelamer carbonate packet 0.8 gm</i>	Tier 2	
<i>sevelamer carbonate packet 2.4 gm</i>	Tier 2	
<i>sevelamer carbonate tab 800 mg</i>	Tier 2	
VELPHORO CHW 500MG	Tier 4	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
PROGESTINS		
CRINONE GEL 4% VAG	Tier 3	
CRINONE GEL 8% VAG	Tier 3	
<i>medroxyprogesterone acetate tab 2.5 mg</i>	Tier 2	
<i>medroxyprogesterone acetate tab 5 mg</i>	Tier 2	
<i>medroxyprogesterone acetate tab 10 mg</i>	Tier 2	
<i>megestrol acetate susp 625 mg/5ml</i>	Tier 2	
<i>norethindrone acetate tab 5 mg</i>	Tier 2	
<i>progesterone cap 100 mg</i>	Tier 2	
<i>progesterone cap 200 mg</i>	Tier 2	
THYROID AGENTS		
<i>levothyroxine sodium tab 25 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 50 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 75 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 88 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 100 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 112 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 125 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 137 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 150 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 175 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 200 mcg</i>	Tier 2	
<i>levothyroxine sodium tab 300 mcg</i>	Tier 2	
<i>levoxyl tab 25mcg</i>	Tier 2	
<i>levoxyl tab 50mcg</i>	Tier 2	
<i>levoxyl tab 75mcg</i>	Tier 2	
<i>levoxyl tab 88mcg</i>	Tier 2	
<i>levoxyl tab 100mcg</i>	Tier 2	
<i>levoxyl tab 112mcg</i>	Tier 2	
<i>levoxyl tab 125mcg</i>	Tier 2	
<i>levoxyl tab 137mcg</i>	Tier 2	
<i>levoxyl tab 150mcg</i>	Tier 2	
<i>levoxyl tab 175mcg</i>	Tier 2	
<i>levoxyl tab 200mcg</i>	Tier 2	
<i>liothyronine sodium tab 5 mcg</i>	Tier 2	
<i>liothyronine sodium tab 25 mcg</i>	Tier 2	
<i>liothyronine sodium tab 50 mcg</i>	Tier 2	
<i>methimazole tab 5 mg</i>	Tier 2	
<i>methimazole tab 10 mg</i>	Tier 2	
<i>propylthiouracil tab 50 mg</i>	Tier 2	
SYNTHROID TAB 25MCG	Tier 3	
SYNTHROID TAB 50MCG	Tier 3	
SYNTHROID TAB 75MCG	Tier 3	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
SYNTHROID TAB 88MCG	Tier 3	
SYNTHROID TAB 100MCG	Tier 3	
SYNTHROID TAB 112MCG	Tier 3	
SYNTHROID TAB 125MCG	Tier 3	
SYNTHROID TAB 137MCG	Tier 3	
SYNTHROID TAB 150MCG	Tier 3	
SYNTHROID TAB 175MCG	Tier 3	
SYNTHROID TAB 200MCG	Tier 3	
SYNTHROID TAB 300MCG	Tier 3	
<i>unithroid tab 25mcg</i>	Tier 2	
<i>unithroid tab 50mcg</i>	Tier 2	
<i>unithroid tab 75mcg</i>	Tier 2	
<i>unithroid tab 88mcg</i>	Tier 2	
<i>unithroid tab 100mcg</i>	Tier 2	
<i>unithroid tab 112mcg</i>	Tier 2	
<i>unithroid tab 125mcg</i>	Tier 2	
<i>unithroid tab 200mcg</i>	Tier 2	
<i>unithroid tab 300mcg</i>	Tier 2	

VASOPRESSINS

<i>desmopressin acetate inj 4 mcg/ml</i>	Tier 2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	Tier 2	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	Tier 2	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	Tier 2	
<i>desmopressin acetate tab 0.1 mg</i>	Tier 2	
<i>desmopressin acetate tab 0.2 mg</i>	Tier 2	

ENDOCRINE AND METABOLIC AGENTS - MISC.

GNRH/LHRH ANTAGONISTS

<i>fyremadel sol 250/0.5</i>	Tier 5	
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GASTROINTESTINAL

ANTICHOLINERGICS

<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	Tier 2	
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	Tier 2	
<i>dicyclomine hcl cap 10 mg</i>	Tier 2	
<i>dicyclomine hcl inj 10 mg/ml</i>	Tier 2	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	Tier 2	
<i>dicyclomine hcl tab 20 mg</i>	Tier 2	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	Tier 2	
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>glycopyrrolate oral soln 1 mg/5ml</i>	Tier 2	
<i>glycopyrrolate tab 1 mg</i>	Tier 2	
<i>glycopyrrolate tab 2 mg</i>	Tier 2	
<i>methscopolamine bromide tab 2.5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>methscopolamine bromide tab 5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

ANTIEMETICS

<i>AKYNZEO CAP 300-0.5</i>	Tier 4	QL (2 caps every 28 days)
<i>aprepitant capsule 40 mg</i>	Tier 2	QL (3 caps every 180 days)
<i>aprepitant capsule 80 mg</i>	Tier 2	QL (4 caps every 28 days)
<i>aprepitant capsule 125 mg</i>	Tier 2	QL (2 caps every 28 days)
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	Tier 2	QL (2 packs every 28 days)
<i>compro sup 25mg</i>	Tier 2	
DRAMAMINE CHW 50MG	Tier 1	OTC
<i>dramamine tab 25mg</i>	Tier 1	OTC
DRAMAMINE TAB 50MG	Tier 1	OTC
<i>dronabinol cap 2.5 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dronabinol cap 5 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>dronabinol cap 10 mg</i>	Tier 2	QL (60 caps every 30 days)
<i>granisetron hcl inj 1 mg/ml</i>	Tier 2	QL (2 mL every 28 days)
<i>granisetron hcl tab 1 mg</i>	Tier 2	QL (12 tabs every 28 days)
<i>meclizine hcl tab 12.5 mg</i>	Tier 1	OTC
<i>meclizine hcl tab 12.5 mg</i>	Tier 2	
<i>meclizine hcl tab 25 mg</i>	Tier 2	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	Tier 2	
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	Tier 2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	Tier 2	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	Tier 2	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	Tier 2	
<i>motion sick chw 25mg</i>	Tier 1	OTC
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	Tier 2	QL (20 mL every 28 days)
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	Tier 2	QL (20 mL every 28 days)
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>	Tier 2	QL (20 mL every 28 days)

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl oral soln 4 mg/5ml</i>	Tier 2	QL (200 mL every 28 days)
<i>ondansetron hcl tab 4 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>ondansetron hcl tab 8 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>ondansetron hcl tab 24 mg</i>	Tier 2	QL (2 tabs every 28 days)
<i>ondansetron orally disintegrating tab 4 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>ondansetron orally disintegrating tab 8 mg</i>	Tier 2	QL (18 tabs every 28 days)
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	Tier 2	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	Tier 2	
<i>prochlorperazine suppos 25 mg</i>	Tier 2	
<i>promethazine hcl inj 25 mg/ml</i>	Tier 2	
<i>promethazine hcl inj 50 mg/ml</i>	Tier 2	
<i>promethazine hcl suppos 12.5 mg</i>	Tier 2	
<i>promethazine hcl suppos 25 mg</i>	Tier 2	
<i>promethazine hcl syrup 6.25 mg/5ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 12.5 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>promethegan sup 50mg</i>	Tier 2	
SANCUSO DIS 3.1MG	Tier 3	QL (2 patches every 28 days)
<i>scopolamine td patch 72hr 1 mg/3days</i>	Tier 2	
<i>trimethobenzamide hcl cap 300 mg</i>	Tier 2	
VARUBI TAB 90MG	Tier 3	
ANTIFLATULENTS		
GAS-X CHW 80MG	Tier 1	OTC
PHAZYME CAP 180MG	Tier 1	OTC
<i>phazyme chw 125mg</i>	Tier 1	OTC
<i>simethicone dro 20/0.3ml</i>	Tier 1	OTC
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	Tier 2	
<i>cimetidine tab 200 mg</i>	Tier 2	
<i>cimetidine tab 300 mg</i>	Tier 2	
<i>cimetidine tab 400 mg</i>	Tier 2	

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>cimetidine tab 800 mg</i>	Tier 2	
<i>famotidine for susp 40 mg/5ml</i>	Tier 2	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	Tier 2	
<i>famotidine preservative free inj 20 mg/2ml</i>	Tier 2	
<i>famotidine tab 10 mg</i>	Tier 1	OTC
<i>famotidine tab 20 mg</i>	Tier 2	
<i>famotidine tab 40 mg</i>	Tier 2	
<i>nizatidine cap 150 mg</i>	Tier 2	
<i>nizatidine cap 300 mg</i>	Tier 2	

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium cap 750 mg</i>	Tier 2	
<i>budesonide delayed release particles cap 3 mg</i>	Tier 2	
<i>budesonide tab er 24hr 9 mg</i>	Tier 2	
DIPENTUM CAP 250MG	Tier 4	PA
<i>hydrocortisone enema 100 mg/60ml</i>	Tier 2	
<i>mesalamine cap dr 400 mg</i>	Tier 2	
<i>mesalamine cap er 24hr 0.375 gm</i>	Tier 2	
<i>mesalamine enema 4 gm</i>	Tier 2	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	Tier 2	
<i>mesalamine suppos 1000 mg</i>	Tier 2	
<i>mesalamine tab delayed release 1.2 gm</i>	Tier 2	
<i>mesalamine tab delayed release 800 mg</i>	Tier 2	
<i>sulfasalazine tab 500 mg</i>	Tier 2	
<i>sulfasalazine tab delayed release 500 mg</i>	Tier 2	

IRRITABLE BOWEL SYNDROME WITH CONSTIPATION

LINZESS CAP 72MCG	Tier 3	
LINZESS CAP 145MCG	Tier 3	
LINZESS CAP 290MCG	Tier 3	
<i>lubiprostone cap 8 mcg</i>	Tier 2	
<i>lubiprostone cap 24 mcg</i>	Tier 2	

IRRITABLE BOWEL SYNDROME WITH DIARRHEA

<i>alosetron hcl tab 0.5 mg (base equiv)</i>	Tier 2	PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	Tier 2	PA

LAXATIVES

CLENPIQ SOL	Tier 0	\$0 copay for members age 45 through 75, Tier 3 for all others
<i>enulose sol 10gm/15</i>	Tier 2	
<i>generlac sol 10gm/15</i>	Tier 2	
<i>lactulose solution 10 gm/15ml</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	Tier 2	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
PEG-PREP KIT	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
<i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>	Tier 2	OTC
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
SUFLAVE SOL	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered
SUTAB TAB	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered

MISCELLANEOUS

<i>cromolyn sodium oral conc 100 mg/5ml</i>	Tier 2	
<i>misoprostol tab 100 mcg</i>	Tier 2	
<i>misoprostol tab 200 mcg</i>	Tier 2	
MOVANTIK TAB 12.5MG	Tier 3	
MOVANTIK TAB 25MG	Tier 3	
SUCRAID SOL 8500/ML	Tier 4	PA, QL (354 mL every 30 days)
<i>sucralfate tab 1 gm</i>	Tier 2	
<i>ursodiol cap 300 mg</i>	Tier 2	
<i>ursodiol tab 250 mg</i>	Tier 2	
<i>ursodiol tab 500 mg</i>	Tier 2	

PANCREATIC ENZYMES

CREON CAP 3000UNIT	Tier 3	PA
CREON CAP 6000UNIT	Tier 3	PA
CREON CAP 12000UNT	Tier 3	PA
CREON CAP 24000UNT	Tier 3	PA
CREON CAP 36000UNT	Tier 3	PA
VIOKACE TAB 10440	Tier 3	PA
VIOKACE TAB 20880	Tier 3	PA
ZENPEP CAP 3000UNIT	Tier 3	PA
ZENPEP CAP 5000UNIT	Tier 3	PA
ZENPEP CAP 10000UNT	Tier 3	PA
ZENPEP CAP 15000UNT	Tier 3	PA

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 20000UNT	Tier 3	PA
ZENPEP CAP 25000UNT	Tier 3	PA
ZENPEP CAP 40000UNT	Tier 3	PA

PROTON PUMP INHIBITORS

<i>dexlansoprazole cap delayed release 30 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>dexlansoprazole cap delayed release 60 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	Tier 2	QL (90 caps every 365 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	Tier 2	QL (90 caps every 365 days)
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	Tier 2	QL (90 packets every 365 days); Covered for age less than 1 year only
<i>lansoprazole cap delayed release 15 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>lansoprazole cap delayed release 30 mg</i>	Tier 2	QL (90 caps every 365 days)
NEXIUM GRA 2.5MG DR	Tier 4	QL (90 packets every 365 days); Covered for age less than 1 year only
NEXIUM GRA 5MG DR	Tier 4	QL (90 packets every 365 days); Covered for age less than 1 year only
<i>omeprazole cap delayed release 10 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>omeprazole cap delayed release 20 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>omeprazole cap delayed release 40 mg</i>	Tier 2	QL (90 caps every 365 days)
<i>omeprazole delayed release tab 20 mg</i>	Tier 1	OTC
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	Tier 4	QL (90 packets every 365 days)
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	Tier 4	QL (90 packets every 365 days)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	Tier 2	QL (90 tabs every 365 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	Tier 2	QL (90 tabs every 365 days)
PRILOSEC OTC TAB 20MG	Tier 1	OTC
<i>rabeprazole sodium ec tab 20 mg</i>	Tier 2	QL (90 tabs every 365 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 103
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
RECTAL, CORTICOSTEROIDS		
<i>hydrocortisone perianal cream 1%</i>	Tier 2	
<i>hydrocortisone perianal cream 2.5%</i>	Tier 2	
<i>proctozone cre -hc 2.5%</i>	Tier 2	
ULCER THERAPY COMBINATIONS		
<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	Tier 2	
<i>dual action chw complete</i>	Tier 1	OTC
GENITOURINARY		
BENIGN PROSTATIC HYPERPLASIA		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	Tier 2	
CARDURA XL TAB 4MG	Tier 4	ST; PA**
CARDURA XL TAB 8MG	Tier 4	ST; PA**
<i>doxazosin mesylate tab 1 mg</i>	Tier 2	
<i>doxazosin mesylate tab 2 mg</i>	Tier 2	
<i>doxazosin mesylate tab 4 mg</i>	Tier 2	
<i>doxazosin mesylate tab 8 mg</i>	Tier 2	
<i>dutasteride cap 0.5 mg</i>	Tier 2	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	Tier 2	
<i>finasteride tab 5 mg</i>	Tier 2	
<i>silodosin cap 4 mg</i>	Tier 2	
<i>silodosin cap 8 mg</i>	Tier 2	
<i>tadalafil tab 2.5 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>tadalafil tab 5 mg</i>	Tier 2	PA, QL (30 tabs every 30 days)
<i>tamsulosin hcl cap 0.4 mg</i>	Tier 2	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	Tier 2	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	Tier 2	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	Tier 2	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	Tier 2	
CONTRACEPTIVES		
ENCARE SUP 100MG	Tier 0	OTC
GYNOL II GEL 3%	Tier 0	OTC
PHEXXI GEL	Tier 0	
TODAY SPONGE MIS	Tier 0	OTC
VCF VAGINAL AER CONTRACP	Tier 0	OTC
VCF VAGINAL GEL CONTRACE	Tier 0	OTC
VCF VAGINAL MIS CONTRACP	Tier 0	OTC
MISCELLANEOUS		
<i>bethanechol chloride tab 5 mg</i>	Tier 2	
<i>bethanechol chloride tab 10 mg</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 104
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>bethanechol chloride tab 25 mg</i>	Tier 2	
<i>bethanechol chloride tab 50 mg</i>	Tier 2	
ELMIRON CAP 100MG	Tier 4	
<i>phenazopyridine tab 95mg</i>	Tier 2	OTC
<i>potassium citrate tab er 5 meq (540 mg)</i>	Tier 2	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	Tier 2	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	Tier 2	

URINARY ANTISPASMODICS

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	Tier 2	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	Tier 2	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	Tier 2	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	Tier 2	
GEMTESA TAB 75MG	Tier 4	
MYRBETRIQ SUS 8MG/ML	Tier 3	
MYRBETRIQ TAB 25MG	Tier 3	
MYRBETRIQ TAB 50MG	Tier 3	
<i>oxybutynin chloride solution 5 mg/5ml</i>	Tier 2	
<i>oxybutynin chloride tab 5 mg</i>	Tier 2	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	Tier 2	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	Tier 2	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	Tier 2	
<i>solifenacin succinate tab 5 mg</i>	Tier 2	
<i>solifenacin succinate tab 10 mg</i>	Tier 2	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	Tier 2	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	Tier 2	
<i>tolterodine tartrate tab 1 mg</i>	Tier 2	
<i>tolterodine tartrate tab 2 mg</i>	Tier 2	
<i>trospium chloride cap er 24hr 60 mg</i>	Tier 2	
<i>trospium chloride tab 20 mg</i>	Tier 2	

VAGINAL ANTI-INFECTIVES

CLEOCIN SUP 100MG	Tier 3	
<i>clindamycin phosphate vaginal cream 2%</i>	Tier 2	
<i>3 day vaginal cre 4%</i>	Tier 1	OTC
GYNAZOLE-1 CRE 2%	Tier 4	
GYNE-LOTRIM CRE 1% VAG	Tier 1	OTC
GYNE-LOTRIMI CRE 3	Tier 1	OTC
<i>metronidazole vaginal gel 0.75%</i>	Tier 2	
<i>miconazole 1 kit 1200-2%</i>	Tier 1	OTC
<i>miconazole 3 sup 200mg</i>	Tier 2	
<i>miconazole 7 cre tube/kit</i>	Tier 1	OTC
<i>miconazole 7 sup 100mg</i>	Tier 1	OTC

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 105
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>terconazole vaginal cream 0.4%</i>	Tier 2	
<i>terconazole vaginal cream 0.8%</i>	Tier 2	
<i>terconazole vaginal suppos 80 mg</i>	Tier 2	
VAGISTAT-1 OIN 6.5% VAG	Tier 1	OTC
<i>vagistat-3 kit combo pk</i>	Tier 1	OTC

HEMATOLOGIC

ANTICOAGULANTS

<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	Tier 2	
ELIQUIS ST P TAB 5MG	Tier 3	
ELIQUIS TAB 2.5MG	Tier 3	
ELIQUIS TAB 5MG	Tier 3	
<i>enoxaparin sodium inj 300 mg/3ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	Tier 2	
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	Tier 2	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	Tier 2	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	Tier 2	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	Tier 2	
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	Tier 2	
FRAGMIN INJ 2500/0.2	Tier 4	
FRAGMIN INJ 2500/ML	Tier 4	
FRAGMIN INJ 5000/0.2	Tier 4	
FRAGMIN INJ 7500/0.3	Tier 4	
FRAGMIN INJ 10000/ML	Tier 4	
FRAGMIN INJ 12500UNT	Tier 4	
FRAGMIN INJ 15000UNT	Tier 4	
FRAGMIN INJ 18000UNT	Tier 4	
FRAGMIN INJ 95000UNT	Tier 4	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 106
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	Tier 2	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	Tier 2	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	Tier 2	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	Tier 2	
<i>jantoven tab 1mg</i>	Tier 2	
<i>jantoven tab 2.5mg</i>	Tier 2	
<i>jantoven tab 2mg</i>	Tier 2	
<i>jantoven tab 3mg</i>	Tier 2	
<i>jantoven tab 4mg</i>	Tier 2	
<i>jantoven tab 5mg</i>	Tier 2	
<i>jantoven tab 6mg</i>	Tier 2	
<i>jantoven tab 7.5mg</i>	Tier 2	
<i>jantoven tab 10mg</i>	Tier 2	
PRADAXA CAP 75MG	Tier 4	
PRADAXA CAP 110MG	Tier 4	
<i>warfarin sodium tab 1 mg</i>	Tier 2	
<i>warfarin sodium tab 2 mg</i>	Tier 2	
<i>warfarin sodium tab 2.5 mg</i>	Tier 2	
<i>warfarin sodium tab 3 mg</i>	Tier 2	
<i>warfarin sodium tab 4 mg</i>	Tier 2	
<i>warfarin sodium tab 5 mg</i>	Tier 2	
<i>warfarin sodium tab 6 mg</i>	Tier 2	
<i>warfarin sodium tab 7.5 mg</i>	Tier 2	
<i>warfarin sodium tab 10 mg</i>	Tier 2	
XARELTO STAR TAB 15/20MG	Tier 3	
XARELTO SUS 1MG/ML	Tier 3	
XARELTO TAB 2.5MG	Tier 3	
XARELTO TAB 10MG	Tier 3	
XARELTO TAB 15MG	Tier 3	
XARELTO TAB 20MG	Tier 3	

HEMATOPOIETIC GROWTH FACTORS

ARANESP INJ 10MCG	Tier 5	PA
ARANESP INJ 25MCG	Tier 5	PA
ARANESP INJ 40MCG	Tier 5	PA
ARANESP INJ 60MCG	Tier 5	PA
ARANESP INJ 100MCG	Tier 5	PA
ARANESP INJ 150MCG	Tier 5	PA
ARANESP INJ 200MCG	Tier 5	PA
ARANESP INJ 300MCG	Tier 5	PA
ARANESP INJ 500MCG	Tier 5	PA
DOPTELET TAB 20MG	Tier 5	PA, QL (1 carton every 5 days)

Drug Name	Drug Tier	Requirements/Limits
DOPTELET TAB 20MG	Tier 5	PA, QL (2 cartons every 30 days)
FYLNETRA INJ 6MG/0.6	Tier 5	PA, QL (2 syringes every 28 days)
MIRCERA INJ 30MCG	Tier 5	PA
MIRCERA INJ 50MCG	Tier 5	PA
MIRCERA INJ 75MCG	Tier 5	PA
MIRCERA INJ 100MCG	Tier 5	PA
MIRCERA INJ 120MCG	Tier 5	PA
MIRCERA INJ 150MCG	Tier 5	PA
MIRCERA INJ 200MCG	Tier 5	PA
NIVESTYM INJ 300/0.5	Tier 5	PA
NIVESTYM INJ 300MCG	Tier 5	PA
NIVESTYM INJ 480/0.8	Tier 5	PA
NIVESTYM INJ 480MCG	Tier 5	PA
NYVEPRIA INJ 6/0.6ML	Tier 5	PA, QL (2 syringes every 28 days)
RETACRIT INJ 2000UNIT	Tier 5	PA
RETACRIT INJ 3000UNIT	Tier 5	PA
RETACRIT INJ 4000UNIT	Tier 5	PA
RETACRIT INJ 10000UNT	Tier 5	PA
RETACRIT INJ 20000UNI	Tier 5	PA
RETACRIT INJ 40000UNT	Tier 5	PA
ZIEXTENZO INJ 6/0.6ML	Tier 5	PA, QL (2 injections every 28 days)

HEMOPHILIA A AGENTS

HEMLIBRA INJ 30MG/ML	Tier 6	PA
HEMLIBRA INJ 60/0.4	Tier 6	PA
HEMLIBRA INJ 105/0.7	Tier 6	PA
HEMLIBRA INJ 150/ML	Tier 6	PA

MISCELLANEOUS

<i>anagrelide hcl cap 0.5 mg</i>	Tier 2	
<i>anagrelide hcl cap 1 mg</i>	Tier 2	
<i>cilostazol tab 50 mg</i>	Tier 2	
<i>cilostazol tab 100 mg</i>	Tier 2	
DROXIA CAP 200MG	Tier 3	
DROXIA CAP 300MG	Tier 3	
DROXIA CAP 400MG	Tier 3	
<i>pentoxifylline tab er 400 mg</i>	Tier 2	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	Tier 2	
<i>tranexamic acid tab 650 mg</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	Tier 2	
BRILINTA TAB 60MG	Tier 3	
BRILINTA TAB 90MG	Tier 3	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	Tier 2	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	Tier 2	
<i>dipyridamole tab 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>dipyridamole tab 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>dipyridamole tab 75 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>prasugrel hcl tab 5 mg (base equiv)</i>	Tier 2	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	Tier 2	
YOSPRALA TAB 81-40MG	Tier 4	
YOSPRALA TAB 325-40MG	Tier 4	
ZONTIVITY TAB 2.08MG	Tier 3	

HEMATOPOIETIC AGENTS

COBALAMINS

<i>cyanocobalamin sl tab 500 mcg</i>	Tier 1	OTC
<i>cyanocobalamin sl tab 1000 mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 100mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 250mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 500mcg</i>	Tier 1	OTC
<i>vitamin b-12 tab 1000mcg</i>	Tier 1	OTC

IRON

FER-IN-SOL DRO 15MG/ML	Tier 0	OTC
<i>ferate tab 27mg</i>	Tier 1	OTC
FERRETTIS TAB 325MG	Tier 1	OTC
<i>ferrocite tab 324mg</i>	Tier 1	OTC
FERROUS GLUC TAB 324MG	Tier 1	OTC
FERROUS SUL LIQ 220/5ML	Tier 0	OTC
FERROUS SULF TAB 140MG	Tier 1	OTC
FERROUS SULF TAB 324MG EC	Tier 1	OTC
<i>ferrous sulf tab 325mg</i>	Tier 1	OTC
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	Tier 0	OTC
<i>ferrous sulfate soln 300 mg/5ml (60 mg/5ml elemental fe)</i>	Tier 0	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	Tier 1	OTC
IRON CHW PEDIATRI	Tier 1	OTC
<i>nu-iron 150 cap 150mg</i>	Tier 1	OTC

IMMUNOLOGIC AGENTS

AUTOIMMUNE AGENTS (PHYSICIAN-ADMINISTERED)

ACTEMRA INJ 80MG/4ML	Tier 6	ST, PA, QL (10 vials every 14 days)
ACTEMRA INJ 200/10ML	Tier 6	ST, PA, QL (4 vials every 14 days)
ACTEMRA INJ 400/20ML	Tier 6	ST, PA, QL (2 vials every 14 days)
INFLIXIMAB INJ 100MG	Tier 5	PA, QL (5 vials every 42 days)
SIMPONI ARIA SOL 50MG/4ML	Tier 6	PA, QL (200 mg every 8 weeks)
SKYRIZI SOL 60MG/ML	Tier 5	PA, QL (3 vials every 56 days); Preferred Agent for Crohn's Disease

AUTOIMMUNE AGENTS (SELF-ADMINISTERED)

ACTEMRA INJ 162/0.9	Tier 6	ST, PA, QL (4 syringes every 28 days)
ADALIMU-ADAZ INJ 40/0.4ML	Tier 5	PA, QL (4 auto-injectors every 28 days)
ADALIMU-ADAZ INJ 40/0.4ML	Tier 5	PA, QL (4 syringes every 28 days)
COSENTYX INJ 75MG/0.5	Tier 5	PA, QL (1 syringe every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX INJ 150MG/ML	Tier 5	PA, QL (1 syringe every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX INJ 300DOSE	Tier 5	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	Tier 5	PA, QL (1 pen every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
COSENTYX PEN INJ 300DOSE	Tier 5	PA, QL (300 mg every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX UNO INJ 300/2ML	Tier 5	PA, QL (1 pen every 28 days); Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
ENBREL INJ 25/0.5ML	Tier 5	PA, QL (8 syringes every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 25MG	Tier 5	PA, QL (8 vials every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 50MG/ML	Tier 5	PA, QL (4 syringes every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL MINI INJ 50MG/ML	Tier 5	PA, QL (4 cartridges every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL SRCLK INJ 50MG/ML	Tier 5	PA, QL (4 syringes every 28 days); Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
HUMIRA INJ 10/0.1ML	Tier 5	PA, QL (2 injections every 28 days)
HUMIRA INJ 20/0.2ML	Tier 5	PA, QL (4 injections every 28 days)
HUMIRA INJ 40/0.4ML	Tier 5	PA, QL (4 injections every 28 days)
HUMIRA KIT 40MG/0.8	Tier 5	PA, QL (4 injections every 28 days)

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEDIA INJ CROHNS	Tier 5	PA, QL (Starter pack - initial dose only); (80mg and 40mg dual strength kit)
HUMIRA PEDIA INJ CROHNS	Tier 5	PA, QL (Starter pack - initial dose only); (80mg single strength kit)
HUMIRA PEN INJ 40/0.4ML	Tier 5	PA, QL (4 injections every 28 days)
HUMIRA PEN INJ 40MG/0.8	Tier 5	PA, QL (4 pens every 28 days)
HUMIRA PEN INJ 80/0.8ML	Tier 5	PA, QL (2 pens every 28 days)
HUMIRA PEN KIT PS/UV	Tier 5	PA, QL (Starter pack - initial dose only)
HYRIMOZ INJ 10/0.1ML	Tier 5	PA, QL (2 syringes every 28 days)
HYRIMOZ INJ 20/0.2ML	Tier 5	PA, QL (4 syringes every 28 days)
HYRIMOZ INJ 40/0.4ML	Tier 5	PA, QL (4 auto-injectors every 28 days)
HYRIMOZ INJ 40/0.4ML	Tier 5	PA, QL (4 syringes every 28 days)
HYRIMOZ INJ 80/0.8ML	Tier 5	PA, QL (2 auto-injectors every 28 days)
HYRIMOZ-CROH INJ UC SP	Tier 5	PA, QL (Starter pack - initial dose only)
HYRIMOZ-PED INJ CROHNS	Tier 5	PA, QL (Starter pack - initial dose only)
HYRIMOZ-PLAQ INJ PSORIASI	Tier 5	PA, QL (Starter pack - initial dose only)
KEVZARA INJ 150/1.14	Tier 5	PA, QL (2 pens every 28 days); Preferred agent for Rheumatoid Arthritis (after failure of 2 other preferred agents)
KEVZARA INJ 150/1.14	Tier 5	PA, QL (2 syringes every 4 weeks); Preferred agent for Rheumatoid Arthritis (after failure of 2 other preferred agents)

Drug Name	Drug Tier	Requirements/Limits
KEVZARA INJ 200/1.14	Tier 5	PA, QL (2 pens every 28 days); Preferred agent for Rheumatoid Arthritis (after failure of 2 other preferred agents)
KEVZARA INJ 200/1.14	Tier 5	PA, QL (2 syringes every 4 weeks); Preferred agent for Rheumatoid Arthritis (after failure of 2 other preferred agents)
OTEZLA TAB 10/20/30	Tier 5	PA, QL (55 tabs every 28 days); Preferred agent for Psoriasis and Psoriatic Arthritis
OTEZLA TAB 30MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Psoriasis and Psoriatic Arthritis
RINVOQ TAB 15MG ER	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Ankylosing Spondylitis, Atopic Dermatitis, Crohn's Disease, Psoriatic Arthritis, Rheumatoid Arthritis, and Ulcerative Colitis.
RINVOQ TAB 30MG ER	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Atopic Dermatitis, Crohn's Disease and Ulcerative Colitis.
RINVOQ TAB 45MG ER	Tier 5	PA, QL (One time induction dose for CD/UC diagnosis only); Preferred agent for Crohn's Disease and Ulcerative Colitis.
SIMPONI INJ 50/0.5ML	Tier 6	ST, PA, QL (1 injection every 28 days)
SIMPONI INJ 100MG/ML	Tier 6	ST, PA, QL (1 injection every 28 days)
SKYRIZI INJ 150DOSE	Tier 5	PA, QL (2 syringes every 12 weeks); Preferred agent for Psoriasis and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI INJ 150MG/ML	Tier 5	PA, QL (1 syringe every 12 weeks); Preferred agent for Psoriasis and Psoriatic Arthritis
SKYRIZI INJ 180/1.2	Tier 5	PA, QL (1 cartridge every 56 days); Preferred Agent for Crohn's Disease
SKYRIZI INJ 360/2.4	Tier 5	PA, QL (1 cartridge every 56 days); Preferred Agent for Crohn's Disease
SKYRIZI PEN INJ 150MG/ML	Tier 5	PA, QL (1 syringe every 12 weeks); Preferred agent for Psoriasis and Psoriatic Arthritis
STELARA INJ 45MG/0.5	Tier 5	PA, QL (1 syringe every 84 days); Preferred agent for Crohn's Disease, Psoriasis, and Ulcerative Colitis
STELARA INJ 45MG/0.5	Tier 5	PA, QL (1 vial every 84 days); Preferred agent for Crohn's Disease, Psoriasis, and Ulcerative Colitis
STELARA INJ 90MG/ML	Tier 5	PA, QL (1 syringe every 56 days); Preferred agent for Crohn's Disease, Psoriasis, and Ulcerative Colitis
TALTZ INJ 80MG/ML	Tier 5	PA, QL (1 injection every 28 days); Preferred agent for Psoriasis
TREMFYA INJ 100MG/ML	Tier 5	PA, QL (1 injection every 56 days); Preferred agent for Psoriasis
XELJANZ SOL 1MG/ML	Tier 5	PA, QL (240 mL every 24 days)
XELJANZ TAB 5MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Rheumatoid Arthritis and Ulcerative Colitis.
XELJANZ TAB 10MG	Tier 5	PA, QL (60 tabs every 30 days); Preferred agent for Ulcerative Colitis.

Drug Name	Drug Tier	Requirements/Limits
XELJANZ XR TAB 11MG	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Rheumatoid Arthritis and Ulcerative Colitis.
XELJANZ XR TAB 22MG	Tier 5	PA, QL (30 tabs every 30 days); Preferred agent for Ulcerative Colitis.

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate tab 200 mg</i>	Tier 2	
<i>leflunomide tab 10 mg</i>	Tier 2	
<i>leflunomide tab 20 mg</i>	Tier 2	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	Tier 2	

HEREDITARY ANGIOEDEMA

HAEGARDA INJ 2000UNIT	Tier 6	PA, QL (20 vials every 30 days)
HAEGARDA INJ 3000UNIT	Tier 6	PA, QL (20 vials every 30 days)
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	Tier 5	PA, QL (45 syringes every 90 days)

IMMUNOGLOBULIN

HYQVIA INJ 2.5-200	Tier 5	PA
HYQVIA INJ 5-400	Tier 5	PA
HYQVIA INJ 10-800	Tier 5	PA
HYQVIA INJ 20-1600	Tier 5	PA
HYQVIA INJ 30-2400	Tier 5	PA

IMMUNOMODULATORS

ACTIMMUNE INJ 2MU/0.5	Tier 6	PA
ARCALYST INJ 220MG	Tier 5	PA, QL (8 vials every 28 days)
INTRON A INJ 10MU	Tier 5	PA
INTRON A INJ 18MU	Tier 5	PA
INTRON A INJ 50MU	Tier 5	PA

IMMUNOSUPPRESSANTS

ASTAGRAF XL CAP 0.5MG	Tier 4	
ASTAGRAF XL CAP 1MG	Tier 4	
ASTAGRAF XL CAP 5MG	Tier 4	
<i>azathioprine tab 50 mg</i>	Tier 2	
<i>azathioprine tab 75 mg</i>	Tier 2	
<i>azathioprine tab 100 mg</i>	Tier 2	
CELLCEPT CAP 250MG	Tier 4	
CELLCEPT IV INJ 500MG	Tier 4	
CELLCEPT SUS 200MG/ML	Tier 4	
CELLCEPT TAB 500MG	Tier 4	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 115
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine cap 25 mg</i>	Tier 2	
<i>cyclosporine cap 100 mg</i>	Tier 2	
<i>cyclosporine iv soln 50 mg/ml</i>	Tier 2	
<i>cyclosporine modified cap 25 mg</i>	Tier 2	
<i>cyclosporine modified cap 50 mg</i>	Tier 2	
<i>cyclosporine modified cap 100 mg</i>	Tier 2	
<i>cyclosporine modified oral soln 100 mg/ml</i>	Tier 2	
ENVARUSUS XR TAB 0.75MG	Tier 4	
ENVARUSUS XR TAB 1MG	Tier 4	
ENVARUSUS XR TAB 4MG	Tier 4	
<i>everolimus tab 0.5 mg</i>	Tier 2	
<i>everolimus tab 0.25 mg</i>	Tier 2	
<i>everolimus tab 0.75 mg</i>	Tier 2	
<i>everolimus tab 1 mg</i>	Tier 2	
<i>engraf cap 25mg</i>	Tier 2	
<i>engraf cap 100mg</i>	Tier 2	
<i>engraf sol 100mg/ml</i>	Tier 2	
<i>mycophenolate mofetil cap 250 mg</i>	Tier 2	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	Tier 2	
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	Tier 2	
<i>mycophenolate mofetil tab 500 mg</i>	Tier 2	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	Tier 2	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	Tier 2	
MYFORTIC TAB 180MG	Tier 4	
MYFORTIC TAB 360MG	Tier 4	
NEORAL CAP 25MG	Tier 4	
NEORAL CAP 100MG	Tier 4	
NEORAL SOL 100MG/ML	Tier 4	
NULOJIX INJ 250MG	Tier 4	
PROGRAF CAP 0.5MG	Tier 4	
PROGRAF CAP 1MG	Tier 4	
PROGRAF CAP 5MG	Tier 4	
PROGRAF GRA 0.2MG	Tier 4	
PROGRAF GRA 1MG	Tier 4	
PROGRAF INJ 5MG/ML	Tier 4	
RAPAMUNE SOL 1MG/ML	Tier 4	
RAPAMUNE TAB 0.5MG	Tier 4	
RAPAMUNE TAB 1MG	Tier 4	
RAPAMUNE TAB 2MG	Tier 4	
SANDIMMUNE CAP 25MG	Tier 4	

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Drug Name	Drug Tier	Requirements/Limits
SANDIMMUNE CAP 100MG	Tier 4	
SANDIMMUNE INJ 50MG/ML	Tier 4	
SANDIMMUNE SOL 100MG/ML	Tier 4	
<i>sirolimus oral soln 1 mg/ml</i>	Tier 2	
<i>sirolimus tab 0.5 mg</i>	Tier 2	
<i>sirolimus tab 1 mg</i>	Tier 2	
<i>sirolimus tab 2 mg</i>	Tier 2	
<i>tacrolimus cap 0.5 mg</i>	Tier 2	
<i>tacrolimus cap 1 mg</i>	Tier 2	
<i>tacrolimus cap 5 mg</i>	Tier 2	
ZORTRESS TAB 0.5MG	Tier 4	
ZORTRESS TAB 0.25MG	Tier 4	
ZORTRESS TAB 0.75MG	Tier 4	
ZORTRESS TAB 1MG	Tier 4	
MISCELLANEOUS		
BEYFORTUS INJ 50/0.5ML	Tier 3	
BEYFORTUS INJ 100MG/ML	Tier 3	
VACCINES		
ABRYSCO INJ	Tier 3	
AREXVY INJ 120MCG	Tier 3	
BEXSERO INJ	Tier 0	
BOOSTRIX INJ	Tier 0	
COMIRNATY INJ 30/0.3ML	Tier 0	
DENGVAXIA SUS	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
ENGERIX-B INJ 10/0.5ML	Tier 0	
ENGERIX-B INJ 20MCG/ML	Tier 0	
FLUMIST QUAD SUS 2023-24	Tier 0	
FLUZONE QUAD INJ 2023-24	Tier 0	
GARDASIL 9 INJ	Tier 0	
HAVRIX INJ 720UNIT	Tier 0	
HAVRIX INJ 1440UNIT	Tier 0	
INFANRIX INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
IPOL INJ INACTIVE	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
KINRIX INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
MENQUADFI INJ	Tier 0	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
MENVEO INJ	Tier 0	
MENVEO SOL	Tier 0	
MODERNA INJ 6MO-11Y	Tier 0	
NOVAVAX VAC INJ COVID-19	Tier 0	
PENTACEL INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
PFIZER 5-11Y INJ 2023-24	Tier 0	
PFIZER 6M-4Y INJ 2023-24	Tier 0	
PREHEVBRIO SUS 10MCG/ML	Tier 0	
PREVNAR 20 INJ	Tier 0	
PRIORIX INJ	Tier 0	
PROQUAD INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
QUADRACEL INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
QUADRACEL INJ 0.5ML	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
RECOMBIVA HB INJ 5MCG/0.5	Tier 0	
RECOMBIVA HB INJ 10MCG/ML	Tier 0	
ROTARIX SUS	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
ROTATEQ SOL	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
SHINGRIX INJ 50/0.5ML	Tier 0	\$0 copay for members age 19 and older, otherwise not covered
SPIKEVAX INJ 50/0.5ML	Tier 0	
TWINRIX INJ	Tier 0	\$0 copay for members age 18 and older, otherwise not covered
VAXELIS INJ	Tier 0	\$0 copay for members age 18 and younger, otherwise not covered
VAXNEUVANCE INJ	Tier 0	

LAXATIVES

BULK LAXATIVES

CITRUCEL POW ORANGE	Tier 1	OTC
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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
CITRUCEL TAB 500MG	Tier 1	OTC
<i>corn dextrin oral powder</i>	Tier 1	OTC
<i>fiber oral powder</i>	Tier 1	OTC
FIBERCON TAB 625MG	Tier 1	OTC
<i>konsyl daily pow 28.3%</i>	Tier 1	OTC
<i>naturl fiber pow 58.6%</i>	Tier 1	OTC
<i>wal-mucil pow 48.57%</i>	Tier 1	OTC

LAXATIVE COMBINATIONS

CLENPIQ SOL	Tier 0	\$0 copay for members age 45 through 75, Tier 3 for all others
<i>easy-lax pls tab 8.6-50mg</i>	Tier 1	OTC
<i>gavilyte-c sol</i>	Tier 2	
<i>gavilyte-g sol</i>	Tier 2	
PLENVU SOL	Tier 0	\$0 copay for members age 45 through 75, otherwise not covered

LAXATIVES - MISCELLANEOUS

<i>clearlax pow</i>	Tier 1	OTC
GLYCERIN SUP 2GM	Tier 1	OTC

LUBRICANT LAXATIVES

<i>mineral oil</i>	Tier 1	OTC
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SALINE LAXATIVES

FLEET ENE ENEMA	Tier 1	OTC
<i>magnesium citrate soln</i>	Tier 1	OTC
<i>milk of magn sus frsh mnt</i>	Tier 1	OTC
OSMOPREP TAB 1.5GM	Tier 4	

STIMULANT LAXATIVES

<i>ex-lax ultra tab 5mg ec</i>	Tier 1	OTC
<i>gentle laxat sup 10mg</i>	Tier 1	OTC
<i>senexon liq 8.8mg/5</i>	Tier 1	OTC
<i>senna tab 8.6mg</i>	Tier 1	OTC

SURFACTANT LAXATIVES

<i>diocto syp 60/15ml</i>	Tier 1	OTC
<i>docusate calcium cap 240 mg</i>	Tier 1	OTC
<i>docusate sodium cap 250 mg</i>	Tier 1	OTC
<i>docusate sodium liquid 150 mg/15ml</i>	Tier 1	OTC
<i>stool softnr cap 100mg</i>	Tier 1	OTC

MEDICAL DEVICES AND SUPPLIES

CONTRACEPTIVES

CAYA DPR	Tier 0	QL (1 every 300 days)
FEMCAP MIS 22MM	Tier 0	QL (1 every 300 days)

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
FEMCAP MIS 26MM	Tier 0	QL (1 every 300 days)
FEMCAP MIS 30MM	Tier 0	QL (1 every 300 days)
OMNIFLEX DPR	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 60	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 65	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 70	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 75	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 80	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 85	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 90	Tier 0	QL (1 every 300 days)
WIDE-SEAL DPR KIT 95	Tier 0	QL (1 every 300 days)
DIABETIC SUPPLIES		
ACCU-CHEK BLOOD GLUCOSE TEST KITS	Tier 3	OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (204 Test Strips every 25 days), OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	Tier 3	QL (204 Test Strips every 30 days), OTC
AUTOLET LITE KIT STARTER	Tier 1	OTC
BAYER MICRLT MIS LANC DVC	Tier 1	OTC
BLOOD GLUCOSE CALIBRATION SOLUTION	Tier 3	OTC
FINGERSTIX MIS LANCETS	Tier 1	OTC
GLUCOSE URINE TEST STRIPS	Tier 3	OTC
INSULIN PEN NEEDLES	Tier 3	OTC
INSULIN PEN NEEDLES/SYRINGES	Tier 3	OTC
KETONE URINE TEST STRIPS	Tier 3	OTC
LANCING DEVICE	Tier 3	OTC
MULTISTIX 10 TES SG	Tier 1	OTC
URIN-TEK KIT	Tier 1	OTC
URINE GLUCOSE MONITORING SUPPLIES	Tier 3	OTC
URINE TEST STRIPS	Tier 3	OTC
DIAGNOSTIC TESTS		
ALBUSTIX TES	Tier 1	OTC
RELION KETON TES	Tier 1	OTC
URINE TEST STRIPS	Tier 1	OTC
MISC. DEVICES		
ALCOHOL SWAB PAD 70%	Tier 1	OTC
MISCELLANEOUS		
ADULT RESPIRATORY MASK	Tier 3	
NORDIPEN 5 MIS DEVICE	Tier 3	
NORDIPEN DEL MIS SYSTEM	Tier 3	OTC
PEDIATRIC RESPIRATORY MASK	Tier 3	OTC

Drug Name	Drug Tier	Requirements/Limits
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PARENTERAL THERAPY SUPPLIES

BULB IRR SYR MIS 60ML	Tier 1	OTC
HYPO NEEDLE MIS 23GX1"	Tier 1	OTC
HYPO NEEDLE MIS 25GX5/8"	Tier 1	OTC
INSULIN PEN NEEDLES/SYRINGES	Tier 1	OTC
3ML LUER LOC MIS 22GX1"	Tier 1	OTC
3ML LUER LOC MIS 25GX1"	Tier 1	OTC
3ML LUER LOC MIS 25GX5/8"	Tier 1	OTC
MONOJECT S/P MIS 35ML/REG	Tier 1	OTC
1ML SYRINGE MIS 25GX5/8"	Tier 1	OTC
3ML SYRINGE MIS LUER LOK	Tier 1	OTC
12ML SYRINGE MIS REG LUER	Tier 1	OTC

MINERALS & ELECTROLYTES

CALCIUM

CA CITRATE TAB 250MG	Tier 1	OTC
CA GLUCONATE TAB 50MG	Tier 1	OTC
CA LACTATE TAB 100MG	Tier 1	OTC
CALCI-CHEW CHW 1250MG	Tier 1	OTC
<i>calcitrate tab 950mg</i>	Tier 1	OTC
<i>calcium 600 tab</i>	Tier 1	OTC
<i>calcium 600+d</i>	Tier 1	OTC
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	Tier 1	OTC
<i>calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)</i>	Tier 1	OTC
CALCIUM CIT TAB 1040MG	Tier 1	OTC
<i>calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)</i>	Tier 1	OTC
<i>calcium cit-vitamin d tab 315 mg-5 mcg(200 unit) (elem ca)</i>	Tier 1	OTC
<i>calcium citrate tab 950 mg (200 mg elemental ca)</i>	Tier 1	OTC
<i>calcium citrate-vitamin d tab 315 mg-250 unit</i>	Tier 1	OTC
CALCIUM GLUC TAB 500MG	Tier 1	OTC
CALCIUM LACT TAB 648MG	Tier 1	OTC
CALCIUM LACT TAB 750MG	Tier 1	OTC
CALCIUM SOFT CHW CHOCOLAT	Tier 1	OTC
<i>calcium soft chw mlk choc</i>	Tier 1	OTC
CALCIUM TAB 333MG	Tier 1	OTC
CALCIUM/D3 WAF	Tier 1	OTC
<i>calcium/d chw 500-400</i>	Tier 1	OTC
CALTRATE +D3 TAB 600-800	Tier 1	OTC
<i>os-cal + d3 tab 500-200</i>	Tier 1	OTC

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Drug Name	Drug Tier	Requirements/Limits
<i>oyst shell/d tab 500mg</i>	Tier 1	OTC
MAGNESIUM		
<i>magnesium oxide tab 250 mg (mg supplement)</i>	Tier 1	OTC
MULTIVITAMINS		
B-COMPLEX VITAMINS		
<i>b-complex vitamin tab</i>	Tier 1	OTC
B-COMPLEX W/ C		
<i>bee zee tab</i>	Tier 1	OTC
B-COMPLEX W/ FOLIC ACID		
<i>b-100 complx tab</i>	Tier 1	OTC
B-COMPLEX TAB C/FA/BIO	Tier 1	OTC
<i>kobee tab</i>	Tier 1	OTC
<i>reno cap</i>	Tier 1	OTC
MULTIPLE VITAMINS W/ IRON		
<i>daily-vite/ tab iron</i>	Tier 1	OTC
MULTIPLE VITAMINS W/ MINERALS		
CENTRUM CHW VITAMINT	Tier 1	OTC
CENTRUM LIQ	Tier 1	OTC
CENTRUM TAB SILVER	Tier 1	OTC
MULTIVITAMINS		
<i>therapeutic tab</i>	Tier 1	OTC
PED MULTIPLE VITAMINS W/ MINERALS		
CENTRUM KIDS CHW	Tier 1	OTC
<i>gummy vit/ chw minerals</i>	Tier 1	OTC
HEALTHY KIDS CHW GUMMIES	Tier 1	OTC
<i>multivitamin dro pediatrc</i>	Tier 1	OTC
NANOVM T/F POW	Tier 1	OTC
PED MV W/ IRON		
POLY-VI-SOL SOL IRON	Tier 1	OTC
<i>vite/iron chw children</i>	Tier 1	OTC
PEDIATRIC MULTIPLE VITAMINS		
<i>chewabl vite chw childrns</i>	Tier 1	OTC
POLY-VI-SOL SOL 50MG/ML	Tier 1	OTC
PEDIATRIC VITAMINS		
TRI-VI-SOL SOL A/C/D	Tier 1	OTC
<i>tri-vitamin dro</i>	Tier 1	OTC
TRI-VITAMIN DRO	Tier 1	OTC
PRENATAL VITAMINS		
ALIVE PRENAT CHW DAILY SU	Tier 3	OTC
ATABEX CHW PRENATAL	Tier 3	OTC
BE WELL PAK ROUNDED	Tier 3	OTC

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
BRAINSTRONG MIS PRENATAL	Tier 3	OTC
CADEAU DHA CAP	Tier 3	OTC
CALNA TAB	Tier 3	OTC
CENTRUM SPEC PAK PRENATAL	Tier 3	OTC
CITRANATAL MIS B-CALM	Tier 3	
CITRANATAL TAB BLOOM	Tier 3	
COMP PRNATAL MIS DHA	Tier 3	OTC
CVS PRENATAL CHW GUMMY	Tier 3	OTC
<i>elite-ob tab</i>	Tier 2	
ENFAMIL MIS EXPECTA	Tier 3	OTC
EZFE FORTE CAP	Tier 3	OTC
KPN PRENATAL TAB	Tier 3	OTC
MTERYTI TAB	Tier 3	OTC
MTERYTI TAB FOLIC 5	Tier 3	OTC
NUTRICION TAB PORVIDA	Tier 3	OTC
NUTRIENTS TAB PRENATAL	Tier 3	OTC
OBTREX DHA PAK	Tier 3	OTC
OBTREX TAB	Tier 3	OTC
ONE A DAY CAP PRENATAL	Tier 3	OTC
ONE A DAY MIS PRENATAL	Tier 3	OTC
PERRY PRENAT CAP	Tier 3	OTC
PRENATAL 1 CAP	Tier 3	OTC
PRENATAL CAP FORMULA	Tier 3	OTC
PRENATAL CAP OMEGA-3	Tier 3	OTC
PRENATAL DHA PAK MULTI	Tier 3	OTC
PRENATAL FRM TAB A-FREE	Tier 3	OTC
PRENATAL GUM CHW 0.4-32.5	Tier 3	OTC
PRENATAL MUL CAP +DHA	Tier 3	OTC
PRENATAL MUL CAP DHA	Tier 3	OTC
PRENATAL MULTIVITAMINS	Tier 1	OTC
PRENATAL TAB	Tier 3	OTC
PRENATAL TAB 27-0.8MG	Tier 1	OTC
PRENATAL TAB COMPLETE	Tier 3	OTC
PRENATAL TAB FORMULA	Tier 3	OTC
PRENATAL+DHA MIS	Tier 3	OTC
PRENATL MULT CAP + DHA	Tier 3	OTC
SM ONE DAILY MIS PRENATAL	Tier 1	OTC
STUART ONE CAP	Tier 3	OTC
THERANATAL CAP ONE	Tier 3	OTC
THERANATAL MIS COMPLETE	Tier 3	OTC
THERANATAL PAK OVAVITE	Tier 3	OTC
THERANATAL TAB 27-1	Tier 3	OTC
VINATE CARE CHW 40-1MG	Tier 3	OTC

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
VITAMIN MIXTURES		
<i>cod liver oil cap</i>	Tier 1	OTC
NUTRITIONAL/SUPPLEMENTS		
ELECTROLYTE MIXTURES		
<i>rehydralyte sol</i>	Tier 1	OTC
ELECTROLYTES		
<i>effer-k tab 25meq ef</i>	Tier 2	
<i>fluoritab dro 0.125mg</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>klor-con 8 tab 8meq er</i>	Tier 2	
<i>klor-con 10 tab 10meq er</i>	Tier 2	
<i>klor-con m15 tab 15meq er</i>	Tier 2	
MAGNESIUM GL TAB 500MG	Tier 1	OTC
<i>magnesium gluconate tab 27.5 mg (elemental mg)</i>	Tier 1	OTC
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	Tier 1	OTC
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	Tier 2	
<i>magnesium sulfate inj 50%</i>	Tier 2	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	Tier 2	
<i>magnesium tab 250mg</i>	Tier 1	OTC
<i>nafrinse dro 0.125mg</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
PHOS-NAK POW CONCENTR	Tier 1	OTC
<i>potassium chloride cap er 8 meq</i>	Tier 2	
<i>potassium chloride cap er 10 meq</i>	Tier 2	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	Tier 2	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	Tier 2	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	Tier 2	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	Tier 2	
<i>potassium chloride tab er 8 meq (600 mg)</i>	Tier 2	
<i>potassium chloride tab er 10 meq</i>	Tier 2	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	Tier 2	
SLOW-MAG TAB	Tier 1	OTC
<i>sod chloride inj 0.9%</i>	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	Tier 2	
<i>sodium chloride tab 1 gm</i>	Tier 1	OTC
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	Tier 2	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	Tier 0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	Tier 2	
IV REPLACEMENT SOLUTIONS		
<i>potassium chloride inj 2 meq/ml</i>	Tier 2	
<i>sodium chloride iv soln 0.9%</i>	Tier 2	
<i>sodium chloride iv soln 0.45%</i>	Tier 2	
<i>sodium chloride iv soln 3%</i>	Tier 2	
<i>sodium chloride iv soln 5%</i>	Tier 2	
<i>sodium chloride preservative free (pf) inj 0.9%</i>	Tier 2	
LIPIDS		
MCT OIL	Tier 1	OTC
MINERAL COMBINATIONS		
CALC CHEWABL CHW 600 PLUS	Tier 1	OTC
MISC. NUTRITIONAL SUBSTANCES		
<i>omega-3 fish cap 1200mg</i>	Tier 1	OTC
<i>sea-omega 50 cap 1000mg</i>	Tier 1	OTC
PRENATAL VITAMINS		
CITRANATAL CAP HARMONY	Tier 3	
CITRANATAL CAP MEDLEY	Tier 3	
CITRANATAL MIS 90 DHA	Tier 3	
CITRANATAL PAK ASSURE	Tier 3	
CITRANATAL PAK DHA	Tier 3	
<i>inatal gt tab</i>	Tier 2	
<i>pnv-dha cap</i>	Tier 2	
<i>pnv-select tab</i>	Tier 2	
<i>prenatal 19 chw tab</i>	Tier 2	
<i>trinate tab</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
PROTEINS		
L-CARNITINE TAB 500MG	Tier 1	OTC
levocarnitine cap 250 mg	Tier 1	OTC
TRACE MINERALS		
orazinc cap 220mg	Tier 1	OTC
selenium tab 200 mcg	Tier 1	OTC
zinc gluconate tab 50 mg (elemental zn)	Tier 1	OTC
VITAMINS		
calcitriol cap 0.5 mcg	Tier 2	
calcitriol cap 0.25 mcg	Tier 2	
calcitriol oral soln 1 mcg/ml	Tier 2	
doxercalciferol cap 0.5 mcg	Tier 2	
doxercalciferol cap 1 mcg	Tier 2	
doxercalciferol cap 2.5 mcg	Tier 2	
ergocalciferol cap 1.25 mg (50000 unit)	Tier 2	
folic acid cap 0.8 mg	Tier 0	QL (100 caps every 30 days), OTC; \$0 copay for members 55 and younger capable of pregnancy, otherwise not covered
folic acid tab 1 mg	Tier 2	
folic acid tab 400 mcg	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members 55 and younger capable of pregnancy, otherwise not covered
folic acid tab 800 mcg	Tier 0	QL (100 tabs every 30 days), OTC; \$0 copay for members 55 and younger capable of pregnancy, otherwise not covered
multi-vit/fl dro 0.5mg/ml	Tier 2	
multi-vit/fl dro /fe 0.25	Tier 2	
multivit/fl chw 0.5mg	Tier 2	
multivit/fl chw 0.25mg	Tier 2	
multivit/fl chw 1mg	Tier 2	
multivit/fl dro 0.25mg	Tier 2	
paricalcitol cap 1 mcg	Tier 2	
paricalcitol cap 2 mcg	Tier 2	
paricalcitol cap 4 mcg	Tier 2	
phytonadione tab 5 mg	Tier 2	
tri-vit/fluo dro 0.5mg	Tier 2	
tri-vit/fluo dro 0.25mg	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>vit a/c/d/fl dro 0.25mg</i>	Tier 2	
<i>vitamin b-12 injection</i>	Tier 2	
<i>westab max tab 2.5-25-2</i>	Tier 2	

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	Tier 2	
BLEPHAMIDE OIN S.O.P.	Tier 3	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	Tier 2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	Tier 2	
<i>neomycin-polymyxin-hc ophth susp</i>	Tier 2	
PRED-G SUS OP	Tier 4	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	Tier 2	
TOBRADEX OIN 0.3-0.1%	Tier 3	
TOBRADEX ST SUS 0.3-0.05	Tier 3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	Tier 2	
ZYLET SUS 0.5-0.3%	Tier 4	

ANTI-INFECTIVES

AZASITE SOL 1%	Tier 3	
<i>bacitracin ophth oint 500 unit/gm</i>	Tier 2	
<i>bacitracin-polymyxin b ophth oint</i>	Tier 2	
BESIVANCE SUS 0.6%	Tier 4	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	Tier 2	
<i>erythromycin ophth oint 5 mg/gm</i>	Tier 2	
<i>gatifloxacin ophth soln 0.5%</i>	Tier 2	
<i>gentak oin 0.3% op</i>	Tier 2	
<i>gentamicin sulfate ophth soln 0.3%</i>	Tier 2	QL (20 mL every 30 days)
<i>levofloxacin ophth soln 0.5%</i>	Tier 2	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	Tier 2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	Tier 2	
NATACYN SUS 5% OP	Tier 3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	Tier 2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	Tier 2	
<i>ofloxacin ophth soln 0.3%</i>	Tier 2	
<i>polycin oin op</i>	Tier 2	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	Tier 2	
<i>sulfacetamide sodium ophth oint 10%</i>	Tier 2	
<i>sulfacetamide sodium ophth soln 10%</i>	Tier 2	
<i>tobramycin ophth soln 0.3%</i>	Tier 2	
<i>trifluridine ophth soln 1%</i>	Tier 2	
ZIRGAN GEL 0.15%	Tier 4	

ANTI-INFLAMMATORIES

ACUVAIL SOL 0.45%	Tier 3	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	Tier 2	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	Tier 2	
<i>diclofenac sodium ophth soln 0.1%</i>	Tier 2	
<i>difluprednate ophth emulsion 0.05%</i>	Tier 2	
<i>flurbiprofen sodium ophth soln 0.03%</i>	Tier 2	
FML OIN 0.1% OP	Tier 3	
ILEVRO DRO 0.3% OP	Tier 3	
<i>ketorolac tromethamine ophth soln 0.4%</i>	Tier 2	
<i>ketorolac tromethamine ophth soln 0.5%</i>	Tier 2	
<i>loteprednol etabonate ophth susp 0.5%</i>	Tier 2	
NEVANAC SUS 0.1% OP	Tier 3	
PRED SOD PHO SOL 1% OP	Tier 3	
<i>prednisolone acetate ophth susp 1%</i>	Tier 2	

ANTIALLERGICS

ALOCRI SOL 2%	Tier 4	
ALOMIDE SOL 0.1% OP	Tier 4	
<i>azelastine hcl ophth soln 0.05%</i>	Tier 2	
<i>bepotastine besilate ophth soln 1.5%</i>	Tier 2	
<i>cromolyn sodium ophth soln 4%</i>	Tier 2	
<i>epinastine hcl ophth soln 0.05%</i>	Tier 2	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	Tier 2	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	Tier 2	
ZADITOR DRO 0.035%OP	Tier 1	OTC
ZERVIATE DRO 0.24%	Tier 4	

ANTIGLAUCOMA

ALPHAGAN P SOL 0.1%	Tier 4	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	Tier 2	
<i>betaxolol hcl ophth soln 0.5%</i>	Tier 2	
BETIMOL SOL 0.5%	Tier 4	

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
BETIMOL SOL 0.25%	Tier 4	
BETOPTIC-S SUS 0.25% OP	Tier 3	
<i>brimonidine tartrate ophth soln 0.1%</i>	Tier 2	
<i>brimonidine tartrate ophth soln 0.2%</i>	Tier 2	
<i>brimonidine tartrate ophth soln 0.15%</i>	Tier 2	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	Tier 2	
<i>brinzolamide ophth susp 1%</i>	Tier 2	
<i>carteolol hcl ophth soln 1%</i>	Tier 2	
<i>dorzolamide hcl ophth soln 2%</i>	Tier 2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	Tier 2	
IOPIDINE SOL 1% OP	Tier 4	
<i>latanoprost ophth soln 0.005%</i>	Tier 2	
<i>levobunolol hcl ophth soln 0.5%</i>	Tier 2	
LUMIGAN SOL 0.01%	Tier 3	ST; PA**
PHOSPHOLINE SOL 0.125%OP	Tier 4	
<i>pilocarpine hcl ophth soln 1%</i>	Tier 2	
SIMBRINZA SUS 1-0.2%	Tier 3	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	Tier 2	
<i>timolol maleate ophth gel forming soln 0.5%</i>	Tier 2	
<i>timolol maleate ophth gel forming soln 0.25%</i>	Tier 2	
<i>timolol maleate ophth soln 0.5%</i>	Tier 2	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	Tier 2	
<i>timolol maleate ophth soln 0.25%</i>	Tier 2	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	Tier 2	
ARTIFICIAL TEARS AND LUBRICANTS		
<i>artifi tears sol 1.4% op</i>	Tier 1	OTC
LACRISERT MIS 5MG OP	Tier 4	
MOISTURE EYE DRO	Tier 1	OTC
REFRESH LIQU DRO 1% OP	Tier 1	OTC
REFRESH OPTI DRO 0.5-0.9%	Tier 1	OTC
<i>refresh p.m. oin op</i>	Tier 1	OTC
REFRESH TEAR DRO 0.5% OP	Tier 1	OTC
<i>systane dro contacts</i>	Tier 1	OTC
SYSTANE SOL	Tier 1	OTC
TEARS NATURA OIN PM	Tier 1	OTC
<i>tears natura sol free op</i>	Tier 1	OTC
DRY EYE DISEASE		
RESTASIS EMU 0.05% OP	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
RESTASIS MUL EMU 0.05% OP	Tier 3	Multi-dose vial remains on preferred brand tier

MISCELLANEOUS

<i>atropine sulfate ophth soln 1%</i>	Tier 2	
CYSTARAN SOL 0.44%	Tier 6	PA, QL (4 bottles every 28 days)
<i>phenylephrine hcl ophth soln 2.5%</i>	Tier 2	
<i>phenylephrine hcl ophth soln 10%</i>	Tier 2	
<i>proparacaine hcl ophth soln 0.5%</i>	Tier 2	
<i>sodium chloride hypertonic ophth oint 5%</i>	Tier 1	OTC
<i>sodium chloride hypertonic ophth soln 5%</i>	Tier 1	OTC
<i>tropicamide ophth soln 0.5%</i>	Tier 2	
<i>tropicamide ophth soln 1%</i>	Tier 2	

OPHTHALMIC DECONGESTANTS

<i>eye drops sol 0.05% op</i>	Tier 1	OTC
NAPHCN-A SOL OP	Tier 1	OTC
OPCON-A SOL OP	Tier 1	OTC
<i>relief eye sol drops</i>	Tier 1	OTC
<i>sm eye dro</i>	Tier 1	OTC

OTHER

IRRIGATION SOLUTIONS

<i>physiolyte sol</i>	Tier 2	
<i>physiosol sol irrigat</i>	Tier 2	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

SMOKING DETERRENTS

<i>nicotine dis 7mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine pol loz 4mg mint</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 7 mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 14 mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 21 mg/24hr</i>	Tier 0	OTC; \$0 limited to 2 treatment cycles/year
NICOTROL INH	Tier 0	QL (max 168 days every year); \$0 limited to 2 treatment cycles/year
NICOTROL NS SPR 10MG/ML	Tier 0	QL (max 168 days every year); \$0 limited to 2 treatment cycles/year

Drug Name	Drug Tier	Requirements/Limits
RESPIRATORY		
ALPHA-1 ANTITRYPSIN DEFICIENCY AGENTS		
PROLASTIN-C INJ 1000MG	Tier 5	PA
ANAPHYLAXIS TREATMENT AGENTS		
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	Tier 2	QL (4 auto-injectors every 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	Tier 2	QL (4 auto-injectors every 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	Tier 2	QL (4 auto-injectors every 30 days); (generic of Adrenaclick)
EPIPEN 2-PAK INJ 0.3MG	Tier 3	QL (4 auto-injectors every 30 days)
EPIPEN-JR INJ 0.15MG	Tier 3	QL (4 auto-injectors every 30 days)
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPT AER 62.5-25	Tier 3	QL (1 package every 30 days)
BEVESPI AER 9-4.8MCG	Tier 3	QL (1 package every 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	Tier 2	QL (6 boxes every 30 days)
ANTICHOLINERGIC/BETA AGONIST/STEROID COMBINATIONS		
BREZTRI AERO AER SPHERE	Tier 3	QL (1 package every 30 days)
TRELEGY AER 100MCG	Tier 3	QL (1 package every 30 days)
TRELEGY AER 200MCG	Tier 3	QL (1 package every 30 days)
ANTICHOLINERGICS		
<i>ipratropium bromide inhal soln 0.02%</i>	Tier 2	QL (5 boxes every 30 days)
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	Tier 2	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	Tier 2	
SPIRIVA AER 1.25MCG	Tier 3	QL (1 package every 30 days)
SPIRIVA CAP HANDIHLR	Tier 3	QL (1 package every 30 days)
SPIRIVA SPR 2.5MCG	Tier 3	QL (1 package every 30 days)
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	Tier 2	QL (1 package every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
ANTI-HISTAMINE COMBINATIONS		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	Tier 2	QL (1 package every 30 days)
ANTI-HISTAMINES		
<i>aller-ease tab 180mg</i>	Tier 1	OTC
<i>allergy rel liq 12.5/5ml</i>	Tier 1	OTC
<i>allergy relf cap 25mg</i>	Tier 1	OTC
ALLERGY ULTR TAB 25MG	Tier 1	OTC
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	Tier 2	QL (2 bottles every 30 days)
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	Tier 2	QL (2 bottles every 30 days)
BENADRYL ALL LIQ 12.5/5ML	Tier 1	OTC
<i>carbinoxamine maleate soln 4 mg/5ml</i>	Tier 2	
<i>carbinoxamine maleate tab 4 mg</i>	Tier 2	
<i>cetirizine tab 5mg</i>	Tier 1	OTC
CHLOR-TRIMET SYP 2MG/5ML	Tier 1	OTC
CHLOR-TRIMET TAB 4MG	Tier 1	OTC
CHLOR-TRIMET TAB 12MG CR	Tier 1	OTC
CLARITIN RDT TAB 5MG	Tier 1	OTC
<i>clemastine fumarate tab 2.68 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	Tier 2	
<i>cyproheptadine hcl tab 4 mg</i>	Tier 2	
<i>desloratadine tab 5 mg</i>	Tier 2	
<i>desloratadine tab orally disintegrating 2.5 mg</i>	Tier 2	
<i>desloratadine tab orally disintegrating 5 mg</i>	Tier 2	
<i>diphenhydram cap 50mg</i>	Tier 1	OTC
<i>diphenhydramine hcl inj 50 mg/ml</i>	Tier 2	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 10 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine hcl tab 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine pamoate cap 25 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine pamoate cap 50 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine pamoate cap 100 mg</i>	Tier 2	PA; High Risk Medications require PA for members age 70 and older
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	Tier 2	
<i>levocetirizine dihydrochloride tab 5 mg</i>	Tier 1	OTC
<i>loratadine tab 10 mg</i>	Tier 1	OTC
<i>olopatadine hcl nasal soln 0.6%</i>	Tier 2	QL (1 container every 30 days)
<i>quenalin syp 12.5/5ml</i>	Tier 1	OTC
<i>ryclora sol 2mg/5ml</i>	Tier 4	PA; High Risk Medications require PA for members age 70 and older
TAVIST TAB 1.34MG	Tier 1	OTC
<i>triaminic tab 10mg</i>	Tier 1	OTC
<i>wal-fex chld sus 30mg/5ml</i>	Tier 1	OTC
<i>wal-itin sol 5mg/5ml</i>	Tier 1	OTC
<i>wal-zyr chw 5mg</i>	Tier 1	OTC
<i>wal-zyr chw 10mg</i>	Tier 1	OTC
ZYRTEC ALLGY TAB 10MG	Tier 1	OTC
ZYRTEC CHILD SOL 5MG/5ML	Tier 1	OTC

BETA AGONISTS

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	Tier 2	QL (2 inhalers every 30 days)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	Tier 2	QL (120 vials every 30 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 2	QL (5 boxes every 30 days)
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	Tier 2	QL (5 boxes every 30 days)
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 2	QL (5 boxes every 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate syrup 2 mg/5ml</i>	Tier 2	
<i>albuterol sulfate tab 2 mg</i>	Tier 2	
<i>albuterol sulfate tab 4 mg</i>	Tier 2	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	Tier 2	QL (60 vials every 30 days)
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	Tier 2	QL (60 vials every 30 days)
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	Tier 2	QL (300 mL every 30 days)
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 2	QL (300 mL every 30 days)
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 2	QL (300 mL every 30 days)
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	Tier 2	QL (45 mL every 30 days)
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	Tier 2	QL (2 inhalers every 30 days)
SEREVENT DIS AER 50MCG	Tier 3	QL (1 package every 30 days)
STRIVERDI AER 2.5MCG	Tier 3	QL (1 package every 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	Tier 2	
<i>terbutaline sulfate tab 5 mg</i>	Tier 2	
COLD/COUGH		
<i>benzonatate cap 100 mg</i>	Tier 2	
<i>benzonatate cap 200 mg</i>	Tier 2	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	Tier 2	QL (60 mL every day), OTC; Subject to initial 7-day limit
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	Tier 2	QL (10 mL every day); Subject to initial 7-day limit
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	Tier 2	QL (6 tabs every day); Subject to initial 7-day limit
<i>hydromet syp 5-1.5/5</i>	Tier 2	QL (30 mL every day); Subject to initial 7-day limit
<i>prometh vc syp 6.25-5/5</i>	Tier 2	
<i>prometh vc/ syp codeine</i>	Tier 2	QL (30 mL every day); Subject to initial 7-day limit
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	Tier 2	QL (30 mL every day); Subject to initial 7-day limit
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	Tier 2	
TUZISTRA XR SUS	Tier 4	QL (20 mL every day); Subject to initial 7-day limit

Drug Name	Drug Tier	Requirements/Limits
CYSTIC FIBROSIS		
CAYSTON INH 75MG	Tier 5	PA, QL (84 vials every 28 days)
KALYDECO GRA 13.4MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO PAK 25MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO PAK 50MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO PAK 75MG	Tier 5	PA, QL (56 packets every 28 days)
KALYDECO TAB 150MG	Tier 5	PA, QL (56 tabs every 28 days); carton consists of 56 tablets
ORKAMBI GRA 75-94MG	Tier 5	PA, QL (56 packets every 28 days)
ORKAMBI GRA 100-125	Tier 5	PA, QL (56 packets every 28 days)
ORKAMBI GRA 150-188	Tier 5	PA, QL (56 packets every 28 days)
ORKAMBI TAB 100-125	Tier 5	PA, QL (112 tabs every 28 days)
ORKAMBI TAB 200-125	Tier 5	PA, QL (112 tabs every 28 days)
SYMDEKO TAB 50-75MG	Tier 5	PA, QL (56 tabs every 28 days)
SYMDEKO TAB 100-150	Tier 5	PA, QL (56 tabs every 28 days)
<i>tobramycin nebu soln 300 mg/4ml</i>	Tier 5	PA, QL (224 mL every 28 days)
<i>tobramycin nebu soln 300 mg/5ml</i>	Tier 5	PA, QL (280 mL every 28 days)
TRIKAFTA PAK 59.5MG	Tier 5	PA, QL (56 packets every 28 days)
TRIKAFTA PAK 75MG	Tier 5	PA, QL (56 packets every 28 days)
TRIKAFTA TAB	Tier 5	PA, QL (84 tabs every 28 days)
LEUKOTRIENE MODIFIERS		
<i>zileuton tab er 12hr 600 mg</i>	Tier 4	PA
LEUKOTRIENE RECEPTOR ANTAGONISTS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	Tier 2	

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 135
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
montelukast sodium chew tab 5 mg (base equiv)	Tier 2	
montelukast sodium oral granules packet 4 mg (base equiv)	Tier 2	
montelukast sodium tab 10 mg (base equiv)	Tier 2	
zafirlukast tab 10 mg	Tier 2	
zafirlukast tab 20 mg	Tier 2	
MAST CELL STABILIZERS		
cromolyn sodium soln nebu 20 mg/2ml	Tier 2	QL (2 boxes every 30 days)
MISCELLANEOUS		
acetylcysteine inhal soln 10%	Tier 2	
acetylcysteine inhal soln 20%	Tier 2	
roflumilast tab 250 mcg	Tier 2	PA
roflumilast tab 500 mcg	Tier 2	PA
sodium chloride soln nebu 0.9%	Tier 2	
sodium chloride soln nebu 3%	Tier 2	
sodium chloride soln nebu 7%	Tier 2	
sodium chloride soln nebu 10%	Tier 2	
NASAL AGENTS - MISC.		
afrin saline spr 0.65%	Tier 1	OTC
AYR SALINE KIT RINSE	Tier 1	OTC
NASAL ANTIALLERGY		
NASALCROM SPR 5.2/ACT	Tier 1	OTC
NASAL STEROIDS		
flunisolide nasal soln 25 mcg/act (0.025%)	Tier 2	QL (3 containers every 30 days)
mometasone furoate nasal susp 50 mcg/act	Tier 2	QL (2 packages every 30 days)
nasoflow spr 50mcg	Tier 1	OTC
OMNARIS SPR	Tier 4	ST, QL (1 package every 30 days); PA**
rhinocort sus allergy	Tier 1	OTC
triamcinolone acetonide nasal aerosol suspension 55 mcg/act	Tier 2	QL (1 package every 30 days), OTC
PULMONARY FIBROSIS AGENTS		
OFEV CAP 100MG	Tier 5	PA, QL (60 caps every 30 days)
OFEV CAP 150MG	Tier 5	PA, QL (60 caps every 30 days)
pirfenidone cap 267 mg	Tier 5	PA, QL (270 caps every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 136
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>pirfenidone tab 267 mg</i>	Tier 5	PA, QL (270 tabs every 30 days)
<i>pirfenidone tab 801 mg</i>	Tier 5	PA, QL (90 tabs every 30 days)

RESPIRATORY THERAPY SUPPLIES

HOLD CHAMBER MIS MEDIUM	Tier 3	OTC
PEDIATRIC RESPIRATORY MASK	Tier 3	

SEVERE ASTHMA AGENTS

FASENRA INJ 30MG/ML	Tier 5	PA, QL (1 syringe every 56 days)
FASENRA PEN INJ 30MG/ML	Tier 5	PA, QL (1 syringe every 56 days)
XOLAIR INJ 75/0.5	Tier 5	PA, QL (2 syringes every 28 days)
XOLAIR INJ 150MG/ML	Tier 5	PA, QL (8 syringes every 28 days)
XOLAIR SOL 150MG	Tier 5	PA, QL (8 vials every 28 days)

STEROID INHALANTS

ALVESCO AER 80MCG	Tier 4	QL (3 packages every 30 days)
ALVESCO AER 160MCG	Tier 4	QL (2 packages every 30 days)
ARNUITY ELPT INH 50MCG	Tier 4	QL (1 package every 30 days)
ARNUITY ELPT INH 100MCG	Tier 4	QL (1 package every 30 days)
ARNUITY ELPT INH 200MCG	Tier 4	QL (1 package every 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	Tier 2	QL (2 boxes every 30 days)
<i>budesonide inhalation susp 0.25 mg/2ml</i>	Tier 2	QL (3 boxes every 30 days)
<i>budesonide inhalation susp 1 mg/2ml</i>	Tier 2	QL (1 box every 30 days)
PULMICORT INH 90MCG	Tier 3	QL (3 packages every 30 days)
PULMICORT INH 180MCG	Tier 3	QL (2 packages every 30 days)
QVAR REDIIHA AER 80MCG	Tier 3	QL (2 packages every 30 days)
QVAR REDIIHAL AER 40MCG	Tier 3	QL (2 packages every 30 days)

STEROID/BETA-AGONIST COMBINATIONS

ADVAIR DISKU AER 100/50	Tier 2	QL (1 package every 30 days)
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C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 137
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
ADVAIR DISKU AER 250/50	Tier 2	QL (1 package every 30 days)
ADVAIR DISKU AER 500/50	Tier 2	QL (1 package every 30 days)
ADVAIR HFA AER 45/21	Tier 3	QL (1 package every 30 days)
ADVAIR HFA AER 115/21	Tier 3	QL (1 package every 30 days)
ADVAIR HFA AER 230/21	Tier 3	QL (1 package every 30 days)
BREO ELLIPTA INH 50-25MCG	Tier 3	QL (1 package every 30 days)
BREO ELLIPTA INH 100-25	Tier 3	QL (1 package every 30 days)
BREO ELLIPTA INH 200-25	Tier 3	QL (1 package every 30 days)
SYMBICORT AER 80-4.5	Tier 3	QL (1 package every 30 days)
SYMBICORT AER 160-4.5	Tier 3	QL (1 package every 30 days)

SYMPATHOMIMETIC DECONGESTANTS

AFRIN CHILD SPR 0.25%	Tier 1	OTC
<i>gpn suphedrn liq 15mg/5ml</i>	Tier 1	OTC
LITTLE REMED DRO 0.125%	Tier 1	OTC
NEO-SYNEPHRI SPR 0.5%	Tier 1	OTC
NEO-SYNEPHRI SPR 0.05%	Tier 1	OTC
<i>pseudoephedrine hcl tab 60 mg</i>	Tier 1	OTC
<i>sudafed 12hr tab 120mg cr</i>	Tier 1	OTC
SUDAFED CONG TAB 30MG	Tier 1	OTC
SUDAFED PE TAB SIN CONG	Tier 1	OTC
<i>4-way fast spr 1%</i>	Tier 1	OTC

XANTHINES

<i>aminophylline inj 25 mg/ml</i>	Tier 2	
<i>theophylline elixir 80 mg/15ml</i>	Tier 2	
<i>theophylline soln 80 mg/15ml</i>	Tier 2	
<i>theophylline tab er 12hr 300 mg</i>	Tier 2	
<i>theophylline tab er 12hr 450 mg</i>	Tier 2	
<i>theophylline tab er 24hr 400 mg</i>	Tier 2	
<i>theophylline tab er 24hr 600 mg</i>	Tier 2	

TOPICAL

ANALGESICS - TOPICAL

EUCERIN CALM LOT 0.1%	Tier 1	OTC
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Drug Name	Drug Tier	Requirements/Limits
ANTI-HISTAMINES-TOPICAL		
<i>anti-itch gel 2% ex st</i>	Tier 1	OTC
<i>sb itch relf spr 2%</i>	Tier 1	OTC
ANTISEBORRHEIC PRODUCTS		
SEBULEX SHA	Tier 1	OTC
ANTISEPTICS & DISINFECTANTS		
HIBICLENS LIQ 4%	Tier 1	OTC
NUPREP 5% SOL POV-IODI	Tier 1	OTC
POVIDONE-IOD SOL 0.75%	Tier 1	OTC
POVIDONE-IOD SOL 1%	Tier 1	OTC
<i>povidone-iod sol 7.5%</i>	Tier 1	OTC
<i>povidone-iodine oint 10%</i>	Tier 1	OTC
<i>povidone-iodine soln 10%</i>	Tier 1	OTC
DERMATOLOGY, ACNE		
<i>acne cleansi bar 10%</i>	Tier 1	OTC
ACNE MEDICAT LOT 5%	Tier 1	OTC
ACNE MEDICAT LOT 10%	Tier 1	OTC
<i>adapalene cream 0.1%</i>	Tier 2	PA, QL (45g every 28 days); PA applies for members age 35 and older
<i>adapalene gel 0.1%</i>	Tier 2	PA, QL (45g every 28 days); PA applies for members age 35 and older
<i>adapalene gel 0.3%</i>	Tier 2	PA, QL (45g every 28 days); PA applies for members age 35 and older
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	Tier 2	
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	Tier 2	
<i>avita cre 0.025%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>benzoyl peroxide gel 2.5%</i>	Tier 1	OTC
<i>benzoyl peroxide gel 5%</i>	Tier 1	OTC
<i>benzoyl peroxide gel 10%</i>	Tier 1	OTC
<i>benzoyl peroxide liq 5%</i>	Tier 1	OTC
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	Tier 2	QL (47g every 30 days)
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	Tier 2	QL (45g every 30 days)
<i>clindamycin phosphate foam 1%</i>	Tier 2	
<i>clindamycin phosphate gel 1%</i>	Tier 2	QL (75g every 30 days)
<i>clindamycin phosphate lotion 1%</i>	Tier 2	QL (60mL every 30 days)
<i>clindamycin phosphate soln 1%</i>	Tier 2	QL (60mL every 30 days)
<i>clindamycin phosphate swab 1%</i>	Tier 2	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	Tier 2	QL (50g every 30 days)
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	Tier 2	QL (50g every 30 days)
<i>ery pad 2%</i>	Tier 2	
<i>erythromycin gel 2%</i>	Tier 2	QL (60g every 30 days)
<i>erythromycin soln 2%</i>	Tier 2	QL (60mL every 30 days)
<i>isotretinoin cap 10 mg</i>	Tier 2	PA
<i>isotretinoin cap 20 mg</i>	Tier 2	PA
<i>isotretinoin cap 30 mg</i>	Tier 2	PA
<i>isotretinoin cap 40 mg</i>	Tier 2	PA
<i>panoxyl wash liq 10%</i>	Tier 1	OTC
PANOXYL-4 LIQ CREM WSH	Tier 1	OTC
<i>spot acne cre 2.5%</i>	Tier 1	OTC
<i>sulfacetamide sodium lotion 10% (acne)</i>	Tier 2	
<i>tretinoin cream 0.1%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin cream 0.05%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin cream 0.025%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.01%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.05%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.025%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin microsphere gel 0.1%</i>	Tier 2	PA; PA applies for members age 35 and older
<i>tretinoin microsphere gel 0.04%</i>	Tier 2	PA; PA applies for members age 35 and older

DERMATOLOGY, ACTINIC KERATOSIS

<i>fluorouracil cream 5%</i>	Tier 2	
<i>fluorouracil soln 2%</i>	Tier 2	
<i>fluorouracil soln 5%</i>	Tier 2	
<i>imiquimod cream 5%</i>	Tier 2	

DERMATOLOGY, ANTIBIOTICS

<i>bacitracin oint 500 unit/gm</i>	Tier 1	OTC
<i>bacitracin zinc oint 500 unit/gm</i>	Tier 1	OTC
<i>gentamicin sulfate cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>gentamicin sulfate oint 0.1%</i>	Tier 2	QL (120g every 30 days)
IV PREP WIPE PAD	Tier 3	OTC
<i>mupirocin oint 2%</i>	Tier 2	QL (30g every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
NEOSPORIN CRE PLUS	Tier 1	OTC
NEOSPORIN OIN ORIGINAL	Tier 1	OTC
<i>neosporin+pn oin relf max</i>	Tier 1	OTC
POLYSPORIN OIN	Tier 1	OTC
<i>silver sulfadiazine cream 1%</i>	Tier 2	
<i>ssd cre 1%</i>	Tier 2	
SULFAMYLON CRE 85MG/GM	Tier 4	
XEPI CRE 1%	Tier 4	PA, QL (30g every 30 days)

DERMATOLOGY, ANTIFUNGALS

<i>anti-fungal pow 1%</i>	Tier 1	OTC
<i>ciclopirox gel 0.77%</i>	Tier 2	QL (120g every 30 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	Tier 2	QL (120g every 30 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	Tier 2	QL (120 mL every 30 days)
<i>ciclopirox shampoo 1%</i>	Tier 2	QL (120 mL every 30 days)
<i>ciclopirox solution 8%</i>	Tier 2	
<i>clotrimazole cream 1%</i>	Tier 2	QL (120g every 30 days)
<i>clotrimazole soln 1%</i>	Tier 2	QL (120 mL every 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	Tier 2	QL (60g every 30 days)
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	Tier 2	QL (60 mL every 30 days)
<i>desenex cre 1%</i>	Tier 1	OTC
<i>econazole nitrate cream 1%</i>	Tier 2	QL (60g every 30 days)
ERTACZO CRE 2%	Tier 4	QL (60g every 30 days)
JUBLIA SOL 10%	Tier 4	PA, QL (4mL every 30 days)
<i>ketoconazole cream 2%</i>	Tier 2	QL (120g every 30 days)
<i>lamisil af aer 1%</i>	Tier 1	OTC
LAMISIL AT CRE 1%	Tier 1	OTC
LOTRIMIN ULT CRE 1%	Tier 1	OTC
<i>luliconazole cream 1%</i>	Tier 4	QL (60g every 30 days)
<i>miconazole cre 2%</i>	Tier 1	OTC
<i>naftifine hcl cream 1%</i>	Tier 2	QL (60g every 30 days)
<i>naftifine hcl cream 2%</i>	Tier 2	QL (60g every 30 days)
NIZORAL A-D SHA 1%	Tier 1	OTC
<i>nyamyc pow 100000</i>	Tier 2	QL (120g every 30 days)
<i>nystatin cream 100000 unit/gm</i>	Tier 2	QL (120g every 30 days)
<i>nystatin oint 100000 unit/gm</i>	Tier 2	QL (120g every 30 days)
<i>nystatin topical powder 100000 unit/gm</i>	Tier 2	QL (120g every 30 days)
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	Tier 2	QL (60g every 30 days)
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	Tier 2	QL (60g every 30 days)
<i>nystop pow 100000</i>	Tier 2	QL (120g every 30 days)
<i>oxiconazole nitrate cream 1%</i>	Tier 2	QL (60g every 30 days)

C - As of 4/1/19 contraceptives are covered for 365 days **OTC** - Over the counter **PA** 141
- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>sulconazole nitrate cream 1%</i>	Tier 2	QL (60g every 30 days)
<i>sulconazole nitrate solution 1%</i>	Tier 2	QL (60 mL every 30 days)
TINACTIN CRE 1%	Tier 1	OTC
<i>tolnaftate soln 1%</i>	Tier 1	OTC
<i>triple paste oin af 2%</i>	Tier 1	OTC

DERMATOLOGY, ANTIPRURITIC

<i>doxepin hcl cream 5%</i>	Tier 4	QL (45g every 30 days)
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DERMATOLOGY, ANTIPSORIATICS

<i>acitretin cap 10 mg</i>	Tier 2	
<i>acitretin cap 17.5 mg</i>	Tier 2	
<i>acitretin cap 25 mg</i>	Tier 2	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	Tier 2	ST, QL (60 mL every 30 days); PA**
<i>calcitriol oint 3 mcg/gm</i>	Tier 4	ST, QL (100g every 30 days); PA**
<i>methoxsalen rapid cap 10 mg</i>	Tier 2	
<i>tazarotene cream 0.1%</i>	Tier 2	PA
<i>tazarotene gel 0.1%</i>	Tier 2	PA
<i>tazarotene gel 0.05%</i>	Tier 2	PA
TAZORAC CRE 0.05%	Tier 3	PA

DERMATOLOGY, ANTISEBORRHEICS

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

DERMATOLOGY, ANTIVIRALS

ABREVA CRE 10%	Tier 1	OTC
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DERMATOLOGY, ATOPIC DERMATITIS

EUCRISA OIN 2%	Tier 3	ST, QL (60 grams every 30 days); PA**
<i>pimecrolimus cream 1%</i>	Tier 4	ST; PA**
<i>tacrolimus oint 0.1%</i>	Tier 4	ST; PA**
<i>tacrolimus oint 0.03%</i>	Tier 4	ST; PA**

DERMATOLOGY, CORTICOSTEROIDS

<i>ala-cort cre 1%</i>	Tier 2	QL (120g every 30 days)
<i>alclometasone dipropionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>alclometasone dipropionate oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>amcinonide cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>amcinonide lotion 0.1%</i>	Tier 2	QL (120mL every 30 days)
<i>amcinonide oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>anti-itch cre 1%</i>	Tier 1	OTC
<i>aquanil hc lot 1%</i>	Tier 1	OTC
<i>betamethasone dipropionate augmented cream 0.05%</i>	Tier 2	QL (120g every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate augmented gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>betamethasone dipropionate augmented oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone dipropionate lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>betamethasone valerate aerosol foam 0.12%</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	Tier 2	QL (120g every 30 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	Tier 2	QL (120mL every 30 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	Tier 2	QL (120g every 30 days)
BRYHALI LOT 0.01%	Tier 3	QL (120 mL every 30 days)
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	Tier 4	ST, QL (60g every 30 days); PA**
<i>clobetasol propionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate emollient base cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate foam 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>clobetasol propionate oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>clobetasol propionate shampoo 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>clobetasol propionate soln 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>clobetasol propionate spray 0.05%</i>	Tier 2	QL (120 mL every 30 days)
<i>clocortolone pivalate cream 0.1%</i>	Tier 4	QL (120g every 30 days)
<i>desonide cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desonide lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>desonide oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone cream 0.25%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone oint 0.25%</i>	Tier 2	QL (120g every 30 days)
<i>desoximetasone spray 0.25%</i>	Tier 4	QL (120 mL every 30 days)
<i>diflorasone diacetate cream 0.05%</i>	Tier 4	QL (120g every 30 days)
<i>diflorasone diacetate oint 0.05%</i>	Tier 4	QL (120g every 30 days)
<i>fluocinolone acetonide cream 0.01%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinolone acetonide cream 0.025%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	Tier 2	QL (120mL every 30 days)
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	Tier 2	QL (120mL every 30 days)

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- Prior Authorization **PA**** - PA Applies if Step is Not Met **QL** - Quantity Limits **ST** -
Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide oint 0.025%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinolone acetonide soln 0.01%</i>	Tier 2	QL (120mL every 30 days)
<i>fluocinonide cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinonide gel 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinonide oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluocinonide soln 0.05%</i>	Tier 2	QL (120 mL every 30 days)
<i>fluticasone propionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>fluticasone propionate lotion 0.05%</i>	Tier 2	QL (120mL every 30 days)
<i>fluticasone propionate oint 0.005%</i>	Tier 2	QL (120g every 30 days)
<i>halobetasol propionate cream 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>halobetasol propionate oint 0.05%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone butyrate oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone butyrate soln 0.1%</i>	Tier 2	QL (120mL every 30 days)
<i>hydrocortisone cream 0.5%</i>	Tier 1	OTC
<i>hydrocortisone cream 1%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone cream 2.5%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone lotion 2.5%</i>	Tier 2	QL (120mL every 30 days)
<i>hydrocortisone oint 0.5%</i>	Tier 1	OTC
<i>hydrocortisone oint 1%</i>	Tier 1	OTC
<i>hydrocortisone oint 2.5%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone valerate cream 0.2%</i>	Tier 2	QL (120g every 30 days)
<i>hydrocortisone valerate oint 0.2%</i>	Tier 2	QL (120g every 30 days)
<i>mometasone furoate cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>mometasone furoate oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>mometasone furoate solution 0.1% (lotion)</i>	Tier 2	QL (120mL every 30 days)
<i>prednicarbate oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide cream 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide cream 0.025%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide lotion 0.1%</i>	Tier 2	QL (120mL every 30 days)
<i>triamcinolone acetonide lotion 0.025%</i>	Tier 2	QL (120mL every 30 days)
<i>triamcinolone acetonide oint 0.1%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide oint 0.5%</i>	Tier 2	QL (120g every 30 days)
<i>triamcinolone acetonide oint 0.025%</i>	Tier 2	QL (120g every 30 days)
DERMATOLOGY, LOCAL ANESTHETICS		
<i>aloe vera/lidocaine</i>	Tier 1	OTC
<i>arth pain cre 0.075%</i>	Tier 1	OTC
<i>caladryl clr lot 1-0.1%</i>	Tier 1	OTC
CALADRYL LOT 1-8%	Tier 1	OTC
<i>capsaicin cream 0.025%</i>	Tier 1	OTC
<i>capsaicin hp cre 0.1%</i>	Tier 1	OTC
CAPZASIN-P CRE 0.035%	Tier 1	OTC

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Step Therapy

Drug Name	Drug Tier	Requirements/Limits
<i>dibucaine oint 1%</i>	Tier 1	OTC
<i>lidocaine hcl soln 4%</i>	Tier 2	QL (50 mL every 30 days)
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	Tier 2	QL (60 mL every 30 days)
<i>lidocaine oint 5%</i>	Tier 2	QL (50g every 30 days)
<i>lidocaine pa pad 4%</i>	Tier 2	QL (30 patches every 30 days), OTC
<i>lidocaine patch 5%</i>	Tier 2	PA, QL (90 patches every 30 days)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	Tier 2	QL (30g every 30 days)
LMX 4 CRE 4%	Tier 1	OTC
<i>mandelay gel max str</i>	Tier 1	OTC
<i>muscle rub cre ultra st</i>	Tier 1	OTC
MYOFLEX CRE 10%	Tier 1	OTC
<i>regenecare gel ha 2%</i>	Tier 1	OTC
SYNERA DIS 70-70MG	Tier 4	QL (2 patches every 30 days)
<i>thera-gesic cre</i>	Tier 1	OTC
ZOSTRIX NAT CRE 0.033%	Tier 1	OTC

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

<i>acyclovir cream 5%</i>	Tier 4	
<i>amlactin lot 12%</i>	Tier 1	OTC
<i>bexarotene gel 1%</i>	Tier 5	PA
<i>callus remov pad 40%</i>	Tier 1	OTC
<i>clean&clear liq 2%</i>	Tier 1	OTC
CONDYLOX GEL 0.5%	Tier 4	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	Tier 4	
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	Tier 2	QL (300g every 30 days)
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	Tier 2	QL (300g every 30 days), OTC
<i>gordon-vit e cre 1500unit</i>	Tier 1	OTC
LAC-HYDRIN LOT FIVE	Tier 1	OTC
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 1	OTC
<i>penciclovir cream 1%</i>	Tier 2	
<i>podofilox soln 0.5%</i>	Tier 2	
RECTIV OIN 0.4%	Tier 4	
<i>salactic fil sol 17%</i>	Tier 1	OTC
SARNA LOT	Tier 1	OTC
SELSUN BLUE SHA DEEP CLN	Tier 1	OTC
<i>urea 20 intrn cre 20%</i>	Tier 1	OTC
<i>vitamins a & d oint</i>	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
VOLTAREN GEL 1% ARTHR	Tier 2	QL (300g every 30 days), OTC
DERMATOLOGY, ROSACEA		
<i>azelaic acid gel 15%</i>	Tier 2	
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	Tier 2	PA
FINACEA AER 15%	Tier 3	
<i>ivermectin cream 1%</i>	Tier 2	PA
<i>metronidazole cream 0.75%</i>	Tier 2	QL (60g every 30 days)
<i>metronidazole gel 0.75%</i>	Tier 2	QL (60g every 30 days)
<i>metronidazole gel 1%</i>	Tier 2	QL (60g every 30 days)
<i>metronidazole lotion 0.75%</i>	Tier 2	QL (60 mL every 30 days)
DERMATOLOGY, SCABICIDES AND PEDICULICIDES		
<i>crotan lot 10%</i>	Tier 2	
<i>cvs ivermect lot 0.5%</i>	Tier 2	OTC
<i>ivermectin lotion 0.5%</i>	Tier 2	
<i>lice treatmt lot 1%</i>	Tier 2	OTC
<i>lice trtmnt liq 1%</i>	Tier 2	OTC
<i>malathion lotion 0.5%</i>	Tier 2	ST; PA**
<i>permethrin cream 5%</i>	Tier 2	
<i>spinosad susp 0.9%</i>	Tier 2	ST; PA**
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>lice killing sha 0.33-4%</i>	Tier 1	OTC
<i>lice trtmnt liq 1%</i>	Tier 1	OTC
<i>sm lice lot treatmnt</i>	Tier 1	OTC
<i>stop lice kit complete</i>	Tier 1	OTC
DERMATOLOGY, WOUND CARE AGENTS		
REGRANEX GEL 0.01%	Tier 4	PA, QL (30g every 30 days)
<i>sodium chloride irrigation soln 0.9%</i>	Tier 2	
MISCELLANEOUS		
ALUMINUM SOL ACETATE	Tier 1	OTC
BALMEX CRE 11.3%	Tier 1	OTC
BOUDREAUXS OIN 16%	Tier 1	OTC
CALAMINE LOT 8-8%	Tier 1	OTC
CERAVE OIN 46.5%	Tier 1	OTC
<i>diaper rash cre 13%</i>	Tier 1	OTC
<i>diaper rash pst 40%</i>	Tier 1	OTC
DR SMITHS OIN DIAPER	Tier 1	OTC
IONIL LIQ	Tier 1	OTC
<i>maxilube gel</i>	Tier 1	OTC
<i>medi pad</i>	Tier 1	OTC
<i>minerin cre</i>	Tier 1	OTC

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Drug Name	Drug Tier	Requirements/Limits
<i>pedi-boro pow soak pak</i>	Tier 1	OTC
<i>preparation pad h</i>	Tier 1	OTC
SM CALAMINE LOT	Tier 1	OTC
TRIPLE PASTE OIN 12.8%	Tier 1	OTC
<i>zinc oxide oint 20%</i>	Tier 1	OTC
<i>zinc oxide oint 40%</i>	Tier 1	OTC

MOUTH/THROAT/DENTAL AGENTS

ANBESOL GEL 10%	Tier 1	OTC
BABY ANBESOL GEL 7.5%	Tier 1	OTC
<i>cevimeline hcl cap 30 mg</i>	Tier 2	
<i>chlorhexidine gluconate soln 0.12%</i>	Tier 2	
<i>clotrimazole troche 10 mg</i>	Tier 2	QL (90 lozenges every 30 days)
DRY MOUTH SPR	Tier 1	OTC
HURRICAIN SOL 20%	Tier 1	OTC
<i>lidocaine hcl laryngotracheal soln 4%</i>	Tier 2	
<i>lidocaine hcl viscous soln 2%</i>	Tier 2	
<i>nystatin susp 100000 unit/ml</i>	Tier 2	
<i>oralone dent pst 0.1%</i>	Tier 2	
ORAVIG TAB 50MG	Tier 4	QL (14 tabs every 30 days)
<i>periogard sol 0.12%</i>	Tier 2	
PEROXYL SOL	Tier 1	OTC
PHOS FLUR SOL 0.044%	Tier 1	OTC
<i>pilocarpine hcl tab 5 mg</i>	Tier 2	
<i>pilocarpine hcl tab 7.5 mg</i>	Tier 2	
<i>sm fluoride sol mint</i>	Tier 1	OTC
SMART RINSE SOL BBL BLAS	Tier 1	OTC
<i>sore throat loz cherry</i>	Tier 1	OTC
<i>sore throat spr 1.4%</i>	Tier 1	OTC
<i>tooth sol shield</i>	Tier 1	OTC
<i>triamcinolone acetone dental paste 0.1%</i>	Tier 2	

OTIC

<i>acetic acid otic soln 2%</i>	Tier 2	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	Tier 2	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	Tier 2	
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	Tier 4	
CORTISPORIN SUS -TC OTIC	Tier 4	
<i>e-r-o ear dro 6.5% ot</i>	Tier 1	OTC
<i>fluocinolone acetone (otic) oil 0.01%</i>	Tier 2	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	Tier 2	

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Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-hc otic soln 1%</i>	Tier 2	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	Tier 2	
<i>ofloxacin otic soln 0.3%</i>	Tier 2	

TAR PRODUCTS

DHS TAR SHA	Tier 1	OTC
IONIL-T SHA 1%	Tier 1	OTC

VITAMINS

OIL SOLUBLE VITAMINS

<i>a-25 cap 25000unt</i>	Tier 1	OTC
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	Tier 2	OTC
<i>cholecalciferol cap 10 mcg (400 unit)</i>	Tier 0	OTC
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	Tier 1	OTC
<i>cholecalciferol tab 10 mcg (400 unit)</i>	Tier 0	OTC
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	Tier 1	OTC
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	Tier 1	OTC
D-VI-SOL LIQ 400UNIT	Tier 0	OTC
E600 CAP 600UNIT	Tier 1	OTC
VIT A FISH CAP 7500UNIT	Tier 1	OTC
<i>vita-plus e cap 400unit</i>	Tier 1	OTC
<i>vitamin a cap 3 mg (10000 unit)</i>	Tier 1	OTC
<i>vitamin a cap 2400 mcg (8000 unit)</i>	Tier 1	OTC
<i>vitamin d3 cap 1000unit</i>	Tier 1	OTC
<i>vitamin d3 cap 2000unit</i>	Tier 1	OTC
<i>vitamin d chw 1000unit</i>	Tier 1	OTC
<i>vitamin e cap 100unit</i>	Tier 1	OTC
<i>vitamin e cap 200 unit</i>	Tier 1	OTC
<i>vitamin e cap 450 mg (1000 unit)</i>	Tier 1	OTC
<i>vitamin e soln 15 unit/0.3ml (50 unit/ml)</i>	Tier 1	OTC

WATER SOLUBLE VITAMINS

<i>ascorbic acid cap er 500 mg</i>	Tier 1	OTC
<i>ascorbic acid tab 500 mg</i>	Tier 1	OTC
<i>biotin tab 5 mg</i>	Tier 1	OTC
<i>c-500 chw 500mg</i>	Tier 1	OTC
LIQUID C 500 LIQ 500/15ML	Tier 1	OTC
<i>meribin cap 5mg</i>	Tier 1	OTC
<i>niacin cap er 250 mg</i>	Tier 1	OTC
<i>niacin tab 100 mg</i>	Tier 1	OTC
<i>niacin tab 250 mg</i>	Tier 1	OTC
<i>niacin tab 500mg</i>	Tier 1	OTC
NIACIN TR TAB 1000MG	Tier 1	OTC
SLO-NIACIN TAB 500MG CR	Tier 1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>sm vit b1 tab 100mg</i>	Tier 1	OTC
<i>vitamin b-1 tab 50mg</i>	Tier 1	OTC
<i>vitamin b-2 tab 25mg</i>	Tier 1	OTC
<i>vitamin b-2 tab 100mg</i>	Tier 1	OTC
<i>vitamin b-6 tab 25mg</i>	Tier 1	OTC
<i>vitamin b-6 tab 50mg</i>	Tier 1	OTC
<i>vitamin b-6 tab 100mg</i>	Tier 1	OTC
<i>vitamin c liq 500/5ml</i>	Tier 1	OTC
<i>vitamin c tab 250mg</i>	Tier 1	OTC
<i>vitamin c tab 1000mg</i>	Tier 1	OTC

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<i>amitriptyline hcl tab 10 mg</i>	54	<i>amlodipine besylate-olmesartan</i>	
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<i>amitriptyline hcl tab 50 mg</i>	54	<i>medoxomil tab 5-40 mg</i>	38
<i>amitriptyline hcl tab 75 mg</i>	55	<i>amlodipine besylate tab 10 mg (base</i>	
<i>amlactin lot 12%</i>	145	<i>equivalent)</i>	46
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine besylate tab 2.5 mg (base</i>	
<i>tab 10-10 mg</i>	46	<i>equivalent)</i>	46
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine besylate tab 5 mg (base</i>	
<i>tab 10-20 mg</i>	46	<i>equivalent)</i>	46
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine besylate-valsartan tab 10-160</i>	
<i>tab 10-40 mg</i>	46	<i>mg</i>	38
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine besylate-valsartan tab 10-320</i>	
<i>tab 10-80 mg</i>	46	<i>mg</i>	38

amlodipine besylate-valsartan tab 5-160 mg	38	amoxicillin & k clavulanate for susp 600-42.9 mg/5ml.....	23
amlodipine besylate-valsartan tab 5-320 mg	38	amoxicillin & k clavulanate tab 250-125 mg	23
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	38	amoxicillin & k clavulanate tab 500-125 mg	23
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	38	amoxicillin & k clavulanate tab 875-125 mg	23
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	38	amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	23
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	38	amphetamine-dextroamphetamine cap er 24hr 10 mg.....	69
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	38	amphetamine-dextroamphetamine cap er 24hr 15 mg.....	69
amoxapine tab 100 mg	55	amphetamine-dextroamphetamine cap er 24hr 20 mg	69
amoxapine tab 150 mg	55	amphetamine-dextroamphetamine cap er 24hr 25 mg	69
amoxapine tab 25 mg	55	amphetamine-dextroamphetamine cap er 24hr 30 mg.....	69
amoxapine tab 50 mg.....	55	amphetamine-dextroamphetamine cap er 24hr 5 mg	69
amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg.....	104	amphetamine-dextroamphetamine tab 10 mg	69
amoxicillin (trihydrate) cap 250 mg.....	23	amphetamine-dextroamphetamine tab 12.5 mg	69
amoxicillin (trihydrate) cap 500 mg.....	23	amphetamine-dextroamphetamine tab 15 mg	69
amoxicillin (trihydrate) chew tab 125 mg ..	24	amphetamine-dextroamphetamine tab 20 mg	69
amoxicillin (trihydrate) chew tab 250 mg ..	24	amphetamine-dextroamphetamine tab 30 mg	69
amoxicillin (trihydrate) for susp 125 mg/5ml	24	amphetamine-dextroamphetamine tab 5 mg	69
amoxicillin (trihydrate) for susp 200 mg/5ml	24	amphetamine-dextroamphetamine tab 7.5 mg	69
amoxicillin (trihydrate) for susp 250 mg/5ml	24	amphotericin b for iv soln 50 mg	13
amoxicillin (trihydrate) for susp 400 mg/5ml	24	ampicillin cap 500 mg	24
amoxicillin (trihydrate) tab 500 mg	24	ampicillin sodium for inj 1 gm	24
amoxicillin (trihydrate) tab 875 mg.....	24	ampicillin sodium for inj 2 gm.....	24
amoxicillin & k clavulanate chew tab 200-28.5 mg	23	anagrelide hcl cap 0.5 mg	108
amoxicillin & k clavulanate chew tab 400-57 mg	23	anagrelide hcl cap 1 mg	108
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml.....	23	anastrozole tab 1 mg	29
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml.....	23	ANBESOL GEL 10%	147
amoxicillin & k clavulanate for susp 400-57 mg/5ml	23		

ANNOVERA MIS.....	86	ARISTADA INJ 441MG/1.....	62
ANORO ELLIPT AER 62.5-25.....	131	ARISTADA INJ 662MG/2.....	62
<i>antacid plus sus gas rel.....</i>	11	ARISTADA INJ 882MG/3.....	62
ANTI-DIARRHE LIQ 1MG/5ML.....	25	ARISTADA INJ INITIO.....	62
<i>anti-fungal pow 1%.....</i>	141	<i>armodafinil tab 150 mg.....</i>	77
<i>anti-itch cre 1%.....</i>	142	<i>armodafinil tab 200 mg.....</i>	77
<i>anti-itch gel 2% ex st.....</i>	139	<i>armodafinil tab 250 mg.....</i>	77
APOKYN INJ 10MG/ML.....	60	<i>armodafinil tab 50 mg.....</i>	77
<i>apraclonidine hcl ophth soln 0.5% (base equivalent).....</i>	128	ARNUITY ELPT INH 100MCG.....	137
<i>aprepitant capsule 125 mg.....</i>	99	ARNUITY ELPT INH 200MCG.....	137
<i>aprepitant capsule 40 mg.....</i>	99	ARNUITY ELPT INH 50MCG.....	137
<i>aprepitant capsule 80 mg.....</i>	99	<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml).....</i>	34
<i>aprepitant capsule therapy pack 80 & 125 mg.....</i>	99	<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	34
<i>apri tab.....</i>	86	<i>arth pain cre 0.075%.....</i>	144
APTIVUS CAP 250MG.....	14	<i>artifi tears sol 1.4% op.....</i>	129
<i>aquanil hc lot 1%.....</i>	142	<i>ascorbic acid cap er 500 mg.....</i>	148
<i>aranelle tab.....</i>	86	<i>ascorbic acid tab 500 mg.....</i>	148
ARANESP INJ 100MCG.....	107	<i>asenapine maleate sl tab 10 mg (base equiv).....</i>	62
ARANESP INJ 10MCG.....	107	<i>asenapine maleate sl tab 2.5 mg (base equiv).....</i>	62
ARANESP INJ 150MCG.....	107	<i>asenapine maleate sl tab 5 mg (base equiv)</i>	62
ARANESP INJ 200MCG.....	107	<i>ashlyna tab.....</i>	86
ARANESP INJ 25MCG.....	107	<i>aspirin chw 81mg.....</i>	11
ARANESP INJ 300MCG.....	107	<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	109
ARANESP INJ 40MCG.....	107	<i>aspirin low tab 81mg ec.....</i>	11
ARANESP INJ 500MCG.....	107	<i>aspirin tab 325mg.....</i>	11
ARANESP INJ 60MCG.....	107	<i>aspirin tab 500 mg.....</i>	11
ARCALYST INJ 220MG.....	115	ASTAGRAF XL CAP 0.5MG.....	115
AREXVY INJ 120MCG.....	117	ASTAGRAF XL CAP 1MG.....	115
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv).....</i>	134	ASTAGRAF XL CAP 5MG.....	115
<i>aripiprazole orally disintegrating tab 10 mg</i>	62	ATABEX CHW PRENATAL.....	122
<i>aripiprazole orally disintegrating tab 15 mg</i>	62	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	14
<i>aripiprazole oral solution 1 mg/ml.....</i>	62	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	14
<i>aripiprazole tab 10 mg.....</i>	62	<i>atazanavir sulfate cap 300 mg (base equiv)</i>	14
<i>aripiprazole tab 15 mg.....</i>	62	<i>atenolol & chlorthalidone tab 100-25 mg.....</i>	44
<i>aripiprazole tab 20 mg.....</i>	62	<i>atenolol & chlorthalidone tab 50-25 mg.....</i>	44
<i>aripiprazole tab 2 mg.....</i>	62		
<i>aripiprazole tab 30 mg.....</i>	62		
<i>aripiprazole tab 5 mg.....</i>	62		
ARISTADA INJ 1064MG.....	62		

<i>atenolol tab 100 mg</i>	44	<i>azelastine hcl nasal spray 0.15% (205.5</i>	
<i>atenolol tab 25 mg</i>	44	<i>mcg/spray)</i>	132
<i>atenolol tab 50 mg</i>	44	<i>azelastine hcl ophth soln 0.05%</i>	128
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	69	<i>azithromycin for susp 100 mg/5ml</i>	20
<i>atomoxetine hcl cap 10 mg (base equiv)</i> ..	69	<i>azithromycin for susp 200 mg/5ml</i>	20
<i>atomoxetine hcl cap 18 mg (base equiv)</i> ..	69	<i>azithromycin powd pack for susp 1 gm</i>	20
<i>atomoxetine hcl cap 25 mg (base equiv)</i> ..	69	<i>azithromycin tab 250 mg</i>	20
<i>atomoxetine hcl cap 40 mg (base equiv)</i> .	69	<i>azithromycin tab 500 mg</i>	20
<i>atomoxetine hcl cap 60 mg (base equiv)</i> .	69	<i>azithromycin tab 600 mg</i>	20
<i>atomoxetine hcl cap 80 mg (base equiv)</i> .	69	AZSTARYS CAP 26.1-5.2	69
<i>atorvastatin calcium tab 10 mg (base</i>		AZSTARYS CAP 39.2-7.8	70
<i>equivalent)</i>	41	AZSTARYS CAP 52.3-10	70
<i>atorvastatin calcium tab 20 mg (base</i>		<i>aztreonam for inj 1 gm</i>	21
<i>equivalent)</i>	41	<i>aztreonam for inj 2 gm</i>	21
<i>atorvastatin calcium tab 40 mg (base</i>		<i>azurette tab</i>	86
<i>equivalent)</i>	42	B	
<i>atorvastatin calcium tab 80 mg (base</i>		<i>b-100 complx tab</i>	122
<i>equivalent)</i>	42	BABY ANBESOL GEL 7.5%	147
<i>atovaquone-proguanil hcl tab 250-100 mg</i>		<i>bacitracin oint 500 unit/gm</i>	140
.....	13	<i>bacitracin ophth oint 500 unit/gm</i>	127
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	13	<i>bacitracin-polymyxin b ophth oint</i>	127
<i>atovaquone susp 750 mg/5ml</i>	21	<i>bacitracin-polymyxin-neomycin-hc ophth</i>	
<i>atropine sulfate ophth soln 1%</i>	130	<i>oint 1%</i>	127
<i>atropine sulfate soln prefill syr 0.25 mg/5ml</i>		<i>bacitracin zinc oint 500 unit/gm</i>	140
<i>(0.05 mg/ml)</i>	98	<i>baclofen tab 10 mg</i>	76
<i>atropine sulfate soln prefill syr 1 mg/10ml</i>		<i>baclofen tab 20 mg</i>	76
<i>(0.1 mg/ml)</i>	98	<i>baclofen tab 5 mg</i>	76
AUTOLET LITE KIT STARTER	120	BALMEX CRE 11.3%	146
AUTOLET PLAT MIS 1.8MM	89	<i>balsalazide disodium cap 750 mg</i>	101
AVEENO BATH PAK TREATMNT	80	BARACLUDGE SOL	17
<i>aviane tab</i>	86	BASAGLAR KWIKPEN	83
<i>avidoxy tab 100mg</i>	24	BAXDELA TAB 450MG	20
<i>avita cre 0.025%</i>	139	<i>bayer asa tab 325mg</i>	11
AYR SALINE KIT RINSE	136	BAYER MICRLT MIS LANC DVC	120
<i>azacitidine for inj 100 mg</i>	26	BAYER PLUS TAB 500MG	11
AZASITE SOL 1%	127	B-COMPLEX TAB C/FA/BIO	122
<i>azathioprine tab 100 mg</i>	115	<i>b-complex vitamin tab</i>	122
<i>azathioprine tab 50 mg</i>	115	<i>bee zee tab</i>	122
<i>azathioprine tab 75 mg</i>	115	BELBUCA MIS 150MCG	9
<i>azelaic acid gel 15%</i>	146	BELBUCA MIS 300MCG	9
<i>azelastine hcl-fluticasone prop nasal spray</i>		BELBUCA MIS 450MCG	10
<i>137-50 mcg/act</i>	132	BELBUCA MIS 600MCG	10
<i>azelastine hcl nasal spray 0.1% (137</i>		BELBUCA MIS 750MCG	10
<i>mcg/spray)</i>	132	BELBUCA MIS 75MCG	9

BELBUCA MIS 900MCG	10	<i>betamethasone dipropionate lotion 0.05%</i>	143
BELSOMRA TAB 10MG	72	<i>betamethasone valerate aerosol foam</i>	
BELSOMRA TAB 15MG	72	0.12%	143
BELSOMRA TAB 20MG	72	<i>betamethasone valerate cream 0.1% (base</i>	
BELSOMRA TAB 5MG	72	<i>equivalent)</i>	143
BENADRYL ALL LIQ 12.5/5ML	132	<i>betamethasone valerate lotion 0.1% (base</i>	
<i>benazepril & hydrochlorothiazide tab 10-</i>		<i>equivalent)</i>	143
<i>12.5 mg</i>	36	<i>betamethasone valerate oint 0.1% (base</i>	
<i>benazepril & hydrochlorothiazide tab 20-</i>		<i>equivalent)</i>	143
<i>12.5 mg</i>	36	BETASERON INJ 0.3MG	75
<i>benazepril & hydrochlorothiazide tab 20-25</i>		<i>betaxolol hcl ophth soln 0.5%</i>	128
<i>mg</i>	36	<i>betaxolol hcl tab 10 mg</i>	44
<i>benazepril & hydrochlorothiazide tab 5-</i>		<i>betaxolol hcl tab 20 mg</i>	44
<i>6.25 mg</i>	36	<i>bethanechol chloride tab 10 mg</i>	104
<i>benazepril hcl tab 10 mg</i>	37	<i>bethanechol chloride tab 25 mg</i>	105
<i>benazepril hcl tab 20 mg</i>	37	<i>bethanechol chloride tab 50 mg</i>	105
<i>benazepril hcl tab 40 mg</i>	37	<i>bethanechol chloride tab 5 mg</i>	104
<i>benazepril hcl tab 5 mg</i>	37	BETIMOL SOL 0.25%	129
<i>benzonatate cap 100 mg</i>	134	BETIMOL SOL 0.5%	128
<i>benzonatate cap 200 mg</i>	134	BETOPTIC-S SUS 0.25% OP	129
<i>benzoyl peroxide-erythromycin gel 5-3%</i>		BEVESPI AER 9-4.8MCG	131
.....	139	BE WELL PAK ROUNDED	122
<i>benzoyl peroxide gel 10%</i>	139	<i>bexarotene cap 75 mg</i>	34
<i>benzoyl peroxide gel 2.5%</i>	139	<i>bexarotene gel 1%</i>	145
<i>benzoyl peroxide gel 5%</i>	139	BEXSERO INJ	117
<i>benzoyl peroxide liq 5%</i>	139	BEYFORTUS INJ 100MG/ML	117
<i>benztropine mesylate inj 1 mg/ml</i>	60	BEYFORTUS INJ 50/0.5ML	117
<i>benztropine mesylate tab 0.5 mg</i>	60	<i>bicalutamide tab 50 mg</i>	29
<i>benztropine mesylate tab 1 mg</i>	60	BIKTARVY TAB	16
<i>benztropine mesylate tab 2 mg</i>	60	<i>biotin tab 5 mg</i>	148
<i>bepotastine besilate ophth soln 1.5%</i>	128	<i>bisoprolol & hydrochlorothiazide tab 10-</i>	
BESIVANCE SUS 0.6%	127	<i>6.25 mg</i>	44
<i>betaine powder for oral solution</i>	90	<i>bisoprolol & hydrochlorothiazide tab 2.5-</i>	
<i>betamethasone dipropionate augmented</i>		<i>6.25 mg</i>	44
<i>cream 0.05%</i>	142	<i>bisoprolol & hydrochlorothiazide tab 5-6.25</i>	
<i>betamethasone dipropionate augmented</i>		<i>mg</i>	44
<i>gel 0.05%</i>	143	<i>bisoprolol fumarate tab 10 mg</i>	44
<i>betamethasone dipropionate augmented</i>		<i>bisoprolol fumarate tab 5 mg</i>	44
<i>lotion 0.05%</i>	143	<i>bleomycin sulfate for inj 15 unit</i>	26
<i>betamethasone dipropionate augmented</i>		<i>bleomycin sulfate for inj 30 unit</i>	26
<i>ointment 0.05%</i>	143	BLEPHAMIDE OIN S.O.P.	127
<i>betamethasone dipropionate cream 0.05%</i>		BLOOD GLUCOSE CALIBRATION	
.....	143	SOLUTION	120

BOOSTRIX INJ	117	<i>buprenorphine hcl-naloxone hcl sl film 4-1</i>	
<i>bosentan tab 125 mg</i>	51	<i>mg (base equiv)</i>	77
<i>bosentan tab 62.5 mg</i>	51	<i>buprenorphine hcl-naloxone hcl sl film 8-2</i>	
BOUDREAUXS OIN 16%.....	146	<i>mg (base equiv)</i>	77
BRAINSTRONG MIS PRENATAL.....	123	<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5</i>	
BREO ELLIPTA INH 100-25	138	<i>mg (base equiv)</i>	77
BREO ELLIPTA INH 200-25.....	138	<i>buprenorphine hcl-naloxone hcl sl tab 8-2</i>	
BREO ELLIPTA INH 50-25MCG	138	<i>mg (base equiv)</i>	77
BREZTRI AERO AER SPHERE.....	131	<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	
BRILINTA TAB 60MG.....	109	.....	78
BRILINTA TAB 90MG.....	109	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	
<i>brimonidine tartrate gel 0.33% (base</i>		.....	78
<i>equivalent)</i>	146	<i>buprenorphine td patch weekly 10 mcg/hr</i>	
<i>brimonidine tartrate ophth soln 0.1%</i>	129	.....	10
<i>brimonidine tartrate ophth soln 0.15%</i>	129	<i>buprenorphine td patch weekly 15 mcg/hr</i>	
<i>brimonidine tartrate ophth soln 0.2%</i>	129	.....	10
<i>brimonidine tartrate-timolol maleate ophth</i>		<i>buprenorphine td patch weekly 20 mcg/hr</i>	
<i>soln 0.2-0.5%</i>	129	.....	10
<i>brinzolamide ophth susp 1%</i>	129	<i>buprenorphine td patch weekly 5 mcg/hr</i>	10
<i>bromfenac sodium ophth soln 0.09% (base</i>		<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	
<i>equiv) (once-daily)</i>	128	.....	10
<i>bromocriptine mesylate cap 5 mg (base</i>		<i>bupropion hcl (smoking deterrent) tab er</i>	
<i>equivalent)</i>	60	<i>12hr 150 mg</i>	79
<i>bromocriptine mesylate tab 2.5 mg (base</i>		<i>bupropion hcl tab 100 mg</i>	55
<i>equivalent)</i>	60	<i>bupropion hcl tab 75 mg</i>	55
BRYHALI LOT 0.01%.....	143	<i>bupropion hcl tab er 12hr 100 mg</i>	55
<i>budesonide delayed release particles cap 3</i>		<i>bupropion hcl tab er 12hr 150 mg</i>	55
<i>mg</i>	101	<i>bupropion hcl tab er 12hr 200 mg</i>	55
<i>budesonide inhalation susp 0.25 mg/2ml</i>		<i>bupropion hcl tab er 24hr 150 mg</i>	55
.....	137	<i>bupropion hcl tab er 24hr 300 mg</i>	55
<i>budesonide inhalation susp 0.5 mg/2ml</i> .	137	<i>bupirone hcl tab 10 mg</i>	53
<i>budesonide inhalation susp 1 mg/2ml</i>	137	<i>bupirone hcl tab 15 mg</i>	53
<i>budesonide tab er 24hr 9 mg</i>	101	<i>bupirone hcl tab 30 mg</i>	53
BUFFERIN TAB 325MG	11	<i>bupirone hcl tab 5 mg</i>	52
BULB IRR SYR MIS 60ML	121	<i>bupirone hcl tab 7.5 mg</i>	53
<i>bumetanide tab 0.5 mg</i>	48	<i>busulfan inj 6 mg/ml</i>	25
<i>bumetanide tab 1 mg</i>	48	<i>butorphanol tartrate inj 1 mg/ml</i>	3
<i>bumetanide tab 2 mg</i>	48	<i>butorphanol tartrate inj 2 mg/ml</i>	3
<i>buprenorphine hcl inj 0.3 mg/ml (base</i>		<i>butorphanol tartrate nasal soln 10 mg/ml</i> ...3	
<i>equiv)</i>	10	C	
<i>buprenorphine hcl-naloxone hcl sl film 12-3</i>		<i>c-500 chw 500mg</i>	148
<i>mg (base equiv)</i>	77	<i>cabergoline tab 0.5 mg</i>	96
<i>buprenorphine hcl-naloxone hcl sl film 2-</i>		CABOMETYX TAB 20MG.....	30
<i>0.5 mg (base equiv)</i>	77	CABOMETYX TAB 40MG.....	30

CABOMETYX TAB 60MG.....	30	<i>calcium cit-vitamin d tab 315 mg-5</i>	
CA CITRATE TAB 250MG.....	121	<i>mcg(200 unit) (elem ca)</i>	121
CADEAU DHA CAP	123	<i>calcium cit-vit d tab 200 mg-6.25 mcg(250</i>	
CA GLUCONATE TAB 50MG	121	<i>unit) (elem ca)</i>	121
CA LACTATE TAB 100MG	121	CALCIUM GLUC TAB 500MG.....	121
<i>caladryl clr lot 1-0.1%</i>	144	CALCIUM LACT TAB 648MG.....	121
CALADRYL LOT 1-8%	144	CALCIUM LACT TAB 750MG.....	121
CALAMINE LOT 8-8%.....	146	CALCIUM SOFT CHW CHOCOLAT	121
<i>cal antacid chw 1000mg</i>	12	<i>calcium soft chw mlk choc.....</i>	121
<i>calc antacid chw 500mg.....</i>	12	CALCIUM TAB 333MG.....	121
<i>calc antacid chw 750mg.....</i>	12	<i>callus remov pad 40%</i>	145
CALC CHEWABL CHW 600 PLUS	125	CALNA TAB	123
CALCI-CHEW CHW 1250MG.....	121	CALQUENCE CAP 100MG	30
<i>calcipotriene-betamethasone dipropionate</i>		CALQUENCE TAB 100MG.....	30
<i>oint 0.005-0.064%.....</i>	143	CALTRATE +D3 TAB 600-800	121
<i>calcipotriene soln 0.005% (50 mcg/ml) .</i>	142	<i>camila tab 0.35mg</i>	86
<i>calcitonin (salmon) nasal soln 200 unit/act</i>		<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>.....</i>	96	<i>tab 16-12.5 mg.....</i>	38
<i>calcitrate tab 950mg.....</i>	121	<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>calcitriol cap 0.25 mcg.....</i>	126	<i>tab 32-12.5 mg</i>	38
<i>calcitriol cap 0.5 mcg.....</i>	126	<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>calcitriol oint 3 mcg/gm.....</i>	142	<i>tab 32-25 mg.....</i>	38
<i>calcitriol oral soln 1 mcg/ml.....</i>	126	<i>candesartan cilexetil tab 16 mg.....</i>	39
CALCIUM/D3 WAF.....	121	<i>candesartan cilexetil tab 32 mg</i>	39
<i>calcium/d chw 500-400.....</i>	121	<i>candesartan cilexetil tab 4 mg</i>	39
<i>calcium 600+d.....</i>	121	<i>candesartan cilexetil tab 8 mg</i>	39
<i>calcium 600 tab.....</i>	121	<i>capecitabine tab 150 mg</i>	26
<i>calcium acetate (phosphate binder) cap</i>		<i>capecitabine tab 500 mg</i>	26
<i>667 mg (169 mg ca)</i>	96	CAPRELSA TAB 100MG	30
<i>calcium acetate (phosphate binder) tab 667</i>		CAPRELSA TAB 300MG	30
<i>mg</i>	96	<i>capsaicin cream 0.025%</i>	144
<i>calcium carbonate (antacid) susp 1250</i>		<i>capsaicin hp cre 0.1%</i>	144
<i>mg/5ml.....</i>	12	<i>captopril tab 100 mg</i>	37
<i>calcium carbonate-cholecalciferol tab 600</i>		<i>captopril tab 12.5 mg</i>	37
<i>mg-5 mcg(200 unit)</i>	121	<i>captopril tab 25 mg</i>	37
<i>calcium carbonate tab 1250 mg (500 mg</i>		<i>captopril tab 50 mg.....</i>	37
<i>elemental ca).....</i>	121	CAPZASIN-P CRE 0.035%	144
CALCIUM CARB TAB 648MG.....	12	<i>carbamazepine cap er 12hr 100 mg.....</i>	65
<i>calcium citrate tab 950 mg (200 mg</i>		<i>carbamazepine cap er 12hr 200 mg</i>	65
<i>elemental ca).....</i>	121	<i>carbamazepine cap er 12hr 300 mg</i>	65
<i>calcium citrate-vitamin d tab 315 mg-250</i>		<i>carbamazepine chew tab 100 mg.....</i>	65
<i>unit</i>	121	<i>carbamazepine susp 100 mg/5ml</i>	65
CALCIUM CIT TAB 1040MG.....	121	<i>carbamazepine tab 200 mg</i>	65
		<i>carbamazepine tab er 12hr 100 mg</i>	65

<i>carbamazepine tab er 12hr 200 mg</i>	65	<i>cartia xt cap 300/24hr</i>	46
<i>carbamazepine tab er 12hr 400 mg</i>	65	<i>carvedilol phosphate cap er 24hr 10 mg</i> ...	44
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	60	<i>carvedilol phosphate cap er 24hr 20 mg</i> ..	44
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	60	<i>carvedilol phosphate cap er 24hr 40 mg</i> ..	44
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	60	<i>carvedilol phosphate cap er 24hr 80 mg</i> ..	44
<i>carbidopa & levodopa tab 10-100 mg</i>	60	<i>carvedilol tab 12.5 mg</i>	44
<i>carbidopa & levodopa tab 25-100 mg</i>	60	<i>carvedilol tab 25 mg</i>	44
<i>carbidopa & levodopa tab 25-250 mg</i>	61	<i>carvedilol tab 3.125 mg</i>	44
<i>carbidopa & levodopa tab er 25-100 mg</i> ...	61	<i>carvedilol tab 6.25 mg</i>	44
<i>carbidopa & levodopa tab er 50-200 mg</i> ..	61	CAYA DPR.....	119
<i>carbidopa-levodopa-entacapone tabs 12.5- 50-200 mg</i>	61	CAYSTON INH 75MG.....	135
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	61	<i>cefaclor cap 250 mg</i>	18
<i>carbidopa-levodopa-entacapone tabs 25- 100-200 mg</i>	61	<i>cefaclor cap 500 mg</i>	18
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	61	<i>cefaclor for susp 125 mg/5ml</i>	18
<i>carbidopa-levodopa-entacapone tabs 37.5- 150-200 mg</i>	61	<i>cefaclor for susp 250 mg/5ml</i>	18
<i>carbidopa-levodopa-entacapone tabs 50- 200-200 mg</i>	61	<i>cefaclor for susp 375 mg/5ml</i>	18
<i>carbidopa tab 25 mg</i>	61	<i>cefadroxil cap 500 mg</i>	18
<i>carbinoxamine maleate soln 4 mg/5ml</i> ...132		<i>cefadroxil for susp 250 mg/5ml</i>	18
<i>carbinoxamine maleate tab 4 mg</i>	132	<i>cefadroxil for susp 500 mg/5ml</i>	18
<i>carboplatin iv soln 150 mg/15ml</i>	35	<i>cefadroxil tab 1 gm</i>	18
<i>carboplatin iv soln 450 mg/45ml</i>	35	<i>cefazolin sodium for inj 1 gm</i>	18
<i>carboplatin iv soln 50 mg/5ml</i>	35	<i>cefdinir cap 300 mg</i>	18
<i>carboplatin iv soln 600 mg/60ml</i>	35	<i>cefdinir for susp 125 mg/5ml</i>	18
CARDURA XL TAB 4MG.....	104	<i>cefdinir for susp 250 mg/5ml</i>	18
CARDURA XL TAB 8MG.....	104	<i>cefepime hcl for inj 1 gm</i>	18
CAREFINE MIS 32GX6MM.....	89	<i>cefepime hcl for iv soln 2 gm</i>	18
<i>carglumic acid soluble tab 200 mg</i>	90	<i>cefepime cap 400 mg</i>	19
<i>carisoprodol tab 350 mg</i>	76	<i>cefepime for susp 100 mg/5ml</i>	19
<i>carisoprodol w/ aspirin & codeine tab 200- 325-16 mg</i>	76	<i>cefepime for susp 200 mg/5ml</i>	19
<i>carmustine for inj 100 mg</i>	25	<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	19
<i>carteolol hcl ophth soln 1%</i>	129	<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	19
<i>cartia xt cap 120/24hr</i>	46	<i>cefpodoxime proxetil tab 100 mg</i>	19
<i>cartia xt cap 180/24hr</i>	46	<i>cefpodoxime proxetil tab 200 mg</i>	19
<i>cartia xt cap 240/24hr</i>	46	<i>cefprozil for susp 125 mg/5ml</i>	19
		<i>cefprozil for susp 250 mg/5ml</i>	19
		<i>cefprozil tab 250 mg</i>	19
		<i>cefprozil tab 500 mg</i>	19
		<i>ceftazidime for iv soln 2 gm</i>	19
		<i>ceftriaxone sodium for inj 10 gm</i>	19
		<i>ceftriaxone sodium for inj 1 gm</i>	19
		<i>ceftriaxone sodium for inj 250 mg</i>	19
		<i>ceftriaxone sodium for inj 2 gm</i>	19
		<i>ceftriaxone sodium for inj 500 mg</i>	19

<i>ceftriaxone sodium for iv soln 1 gm</i>	19	<i>chlorpromazine hcl tab 200 mg</i>	62
<i>ceftriaxone sodium for iv soln 2 gm</i>	19	<i>chlorpromazine hcl tab 25 mg</i>	62
<i>cefuroxime axetil tab 250 mg</i>	19	<i>chlorpromazine hcl tab 50 mg</i>	62
<i>cefuroxime axetil tab 500 mg</i>	19	<i>chlorthalidone tab 25 mg</i>	48
<i>celecoxib cap 100 mg</i>	1	<i>chlorthalidone tab 50 mg</i>	48
<i>celecoxib cap 200 mg</i>	1	CHLOR-TRIMET SYP 2MG/5ML.....	132
<i>celecoxib cap 50 mg</i>	1	CHLOR-TRIMET TAB 12MG CR	132
CELLCEPT CAP 250MG	115	CHLOR-TRIMET TAB 4MG	132
CELLCEPT IV INJ 500MG	115	<i>chlorzoxazone tab 500 mg</i>	76
CELLCEPT SUS 200MG/ML	115	<i>cholecalciferol cap 1.25 mg (50000 unit)</i> 148	
CELLCEPT TAB 500MG	115	<i>cholecalciferol cap 10 mcg (400 unit)</i> 148	
CENTRUM CHW VITAMINT	122	<i>cholecalciferol cap 125 mcg (5000 unit) .</i> 148	
CENTRUM KIDS CHW	122	<i>cholecalciferol tab 10 mcg (400 unit)</i> 148	
CENTRUM LIQ	122	<i>cholecalciferol tab 25 mcg (1000 unit) ...</i> 148	
CENTRUM SPEC PAK PRENATAL.....	123	<i>cholecalciferol tab 50 mcg (2000 unit) ...</i> 148	
CENTRUM TAB SILVER.....	122	<i>cholestyramine light powder 4 gm/dose ..</i> 41	
<i>cephalexin cap 250 mg</i>	19	<i>cholestyramine light powder packets 4 gm</i>	41
<i>cephalexin cap 500 mg</i>	19	<i>cholestyramine powder 4 gm/dose</i>	41
<i>cephalexin cap 750 mg</i>	19	<i>cholestyramine powder packets 4 gm</i>	41
<i>cephalexin for susp 125 mg/5ml</i>	19	<i>choline fenofibrate cap dr 135 mg</i> (<i>fenofibric acid equiv</i>).....	41
<i>cephalexin for susp 250 mg/5ml</i>	19	<i>choline fenofibrate cap dr 45 mg (fenofibric</i> <i>acid equiv)</i>	41
<i>cephalexin tab 250 mg</i>	19	CHOR GONADOT INJ 10000UNT	93
<i>cephalexin tab 500 mg</i>	19	<i>ciclopirox gel 0.77%</i>	141
CERAVE OIN 46.5%	146	<i>ciclopirox olamine cream 0.77% (base</i> <i>equiv)</i>	141
CERDELGA CAP 84MG	90	<i>ciclopirox olamine susp 0.77% (base equiv)</i>	141
<i>cetirizine tab 5mg</i>	132	<i>ciclopirox shampoo 1%</i>	141
<i>cevimeline hcl cap 30 mg</i>	147	<i>ciclopirox solution 8%</i>	141
<i>chateal eq tab 0.15/30</i>	86	<i>cidofovir iv inj 75 mg/ml</i>	17
CHEMET CAP 100MG.....	85	<i>cilostazol tab 100 mg</i>	108
<i>chewabl vite chw childrns</i>	122	<i>cilostazol tab 50 mg</i>	108
<i>chlordiazepoxide-amitriptyline tab 10-25</i> <i>mg</i>	78	CIMDUO TAB 300-300	16
<i>chlordiazepoxide-amitriptyline tab 5-12.5</i> <i>mg</i>	78	<i>cimetidine hcl soln 300 mg/5ml</i>	100
<i>chlordiazepoxide hcl cap 10 mg</i>	53	<i>cimetidine tab 200 mg</i>	100
<i>chlordiazepoxide hcl cap 25 mg</i>	53	<i>cimetidine tab 300 mg</i>	100
<i>chlordiazepoxide hcl cap 5 mg</i>	53	<i>cimetidine tab 400 mg</i>	100
<i>chlorhexidine gluconate soln 0.12%</i>	147	<i>cimetidine tab 800 mg</i>	101
<i>chloroquine phosphate tab 250 mg</i>	13	<i>cinacalcet hcl tab 30 mg (base equiv)</i> 85	
<i>chloroquine phosphate tab 500 mg</i>	13	<i>cinacalcet hcl tab 60 mg (base equiv)</i> 85	
<i>chlorpromazine hcl inj 25 mg/ml</i>	62	<i>cinacalcet hcl tab 90 mg (base equiv)</i> 85	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	62		
<i>chlorpromazine hcl tab 100 mg</i>	62		
<i>chlorpromazine hcl tab 10 mg</i>	62		

CIPRO (10%) SUS 500MG/5.....	20	CLENPIQ SOL	101, 119
<i>ciprofloxacin-dexamethasone otic susp</i>		CLEOCIN SUP 100MG.....	105
0.3-0.1%	147	CLIMARA PRO DIS WEEKLY	90
<i>ciprofloxacin-fluocinolone acetone (pf) otic</i>		<i>clindamycin hcl cap 150 mg</i>	22
<i>soln 0.3-0.025%</i>	147	<i>clindamycin hcl cap 300 mg</i>	22
<i>ciprofloxacin hcl ophth soln 0.3% (base</i>		<i>clindamycin hcl cap 75 mg</i>	21
<i>equivalent)</i>	127	<i>clindamycin palmitate hcl for soln 75</i>	
<i>ciprofloxacin hcl otic soln 0.2% (base</i>		<i>mg/5ml (base equiv)</i>	22
<i>equivalent)</i>	147	<i>clindamycin phosphate-benzoyl peroxide</i>	
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	20	<i>gel 1.2-2.5%</i>	140
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	20	<i>clindamycin phosphate-benzoyl peroxide</i>	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	20	<i>gel 1-5%</i>	140
.....	20	<i>clindamycin phosphate foam 1%</i>	139
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	20	<i>clindamycin phosphate gel 1%</i>	139
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	35	<i>clindamycin phosphate inj 300 mg/2ml</i> ...	22
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	35	<i>clindamycin phosphate inj 600 mg/4ml</i> ...	22
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	35	<i>clindamycin phosphate inj 9 gm/60ml</i>	22
<i>citalopram hydrobromide oral soln 10</i>		<i>clindamycin phosphate lotion 1%</i>	139
<i>mg/5ml</i>	55	<i>clindamycin phosphate soln 1%</i>	139
<i>citalopram hydrobromide tab 10 mg (base</i>		<i>clindamycin phosphate swab 1%</i>	139
<i>equiv)</i>	55	<i>clindamycin phosphate vaginal cream 2%</i>	
<i>citalopram hydrobromide tab 20 mg (base</i>		.....	105
<i>equiv)</i>	55	<i>clindamycin phosph-benzoyl peroxide</i>	
<i>citalopram hydrobromide tab 40 mg (base</i>		<i>(refrig) gel 1.2 (1)-5%</i>	139
<i>equiv)</i>	55	<i>clobazam suspension 2.5 mg/ml</i>	65
CITRANATAL CAP HARMONY	125	<i>clobazam tab 10 mg</i>	65
CITRANATAL CAP MEDLEY.....	125	<i>clobazam tab 20 mg</i>	65
CITRANATAL MIS 90 DHA	125	<i>clobetasol propionate cream 0.05%</i>	143
CITRANATAL MIS B-CALM.....	123	<i>clobetasol propionate emollient base cream</i>	
CITRANATAL PAK ASSURE	125	0.05%	143
CITRANATAL PAK DHA	125	<i>clobetasol propionate foam 0.05%</i>	143
CITRANATAL TAB BLOOM	123	<i>clobetasol propionate gel 0.05%</i>	143
CITRUCEL POW ORANGE.....	118	<i>clobetasol propionate lotion 0.05%</i>	143
CITRUCEL TAB 500MG	119	<i>clobetasol propionate oint 0.05%</i>	143
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i> ...	26	<i>clobetasol propionate shampoo 0.05%</i> ..	143
<i>clarithromycin for susp 125 mg/5ml</i>	20	<i>clobetasol propionate soln 0.05%</i>	143
<i>clarithromycin for susp 250 mg/5ml</i>	20	<i>clobetasol propionate spray 0.05%</i>	143
<i>clarithromycin tab 250 mg</i>	20	<i>clocortolone pivalate cream 0.1%</i>	143
<i>clarithromycin tab 500 mg</i>	20	<i>clofarabine iv soln 1 mg/ml</i>	26
<i>clarithromycin tab er 24hr 500 mg</i>	20	<i>clomid tab 50mg</i>	93
CLARITIN RDT TAB 5MG	132	<i>clomipramine hcl cap 25 mg</i>	55
<i>clean&clear liq 2%</i>	145	<i>clomipramine hcl cap 50 mg</i>	55
<i>clearlax pow</i>	119	<i>clomipramine hcl cap 75 mg</i>	55
<i>clemastine fumarate tab 2.68 mg</i>	132	<i>clonazepam tab 0.5 mg</i>	65

<i>clonazepam tab 1 mg</i>	65	<i>colestipol hcl tab 1 gm</i>	41
<i>clonazepam tab 2 mg</i>	65	COMETRIQ KIT 100MG.....	30
<i>clonidine hcl tab 0.1 mg</i>	49	COMETRIQ KIT 140MG.....	30
<i>clonidine hcl tab 0.2 mg</i>	49	COMETRIQ KIT 60MG.....	30
<i>clonidine hcl tab 0.3 mg</i>	49	COMIRNATY INJ 30/0.3ML.....	117
<i>clonidine td patch weekly 0.1 mg/24hr</i>	49	COMP PRNATAL MIS DHA.....	123
<i>clonidine td patch weekly 0.2 mg/24hr</i>	49	<i>compro sup 25mg</i>	99
<i>clonidine td patch weekly 0.3 mg/24hr</i>	49	CONDOMS MIS.....	86
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	109	CONDYLOX GEL 0.5%.....	145
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	109	COPAXONE INJ 20MG/ML.....	75
<i>clorazepate dipotassium tab 15 mg</i>	65	COPAXONE INJ 40MG/ML.....	75
<i>clorazepate dipotassium tab 3.75 mg</i>	65	CORICIDN HBP TAB CGH&COLD.....	79
<i>clorazepate dipotassium tab 7.5 mg</i>	65	CORICIDN HBP TAB COLD/FLU.....	79
<i>clotrimazole cream 1%</i>	141	CORLANOR SOL 5MG/5ML.....	49
<i>clotrimazole soln 1%</i>	141	CORLANOR TAB 5MG.....	49
<i>clotrimazole troche 10 mg</i>	147	CORLANOR TAB 7.5MG.....	49
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	141	<i>corn dextrin oral powder</i>	119
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	141	CORTISPORIN SUS -TC OTIC.....	147
<i>clozapine orally disintegrating tab 100 mg</i>	62	COSENTYX INJ 150MG/ML.....	110
<i>clozapine orally disintegrating tab 12.5 mg</i>	62	COSENTYX INJ 300DOSE.....	110
<i>clozapine orally disintegrating tab 150 mg</i>	63	COSENTYX INJ 75MG/0.5.....	110
<i>clozapine orally disintegrating tab 200 mg</i>	63	COSENTYX PEN INJ 150MG/ML.....	110
<i>clozapine orally disintegrating tab 25 mg</i>	62	COSENTYX PEN INJ 300DOSE.....	111
<i>clozapine tab 100 mg</i>	63	COSENTYX UNO INJ 300/2ML.....	111
<i>clozapine tab 200 mg</i>	63	CREON CAP 12000UNT.....	102
<i>clozapine tab 25 mg</i>	63	CREON CAP 24000UNT.....	102
<i>clozapine tab 50 mg</i>	63	CREON CAP 3000UNIT.....	102
COARTEM TAB 20-120MG.....	13	CREON CAP 36000UNT.....	102
<i>codeine sulfate tab 30 mg</i>	3	CREON CAP 6000UNIT.....	102
CODEINE SULF TAB 60MG.....	3	CRESEMBA CAP 186 MG.....	13
<i>cod liver oil cap</i>	124	CRESEMBA CAP 74.5MG.....	13
<i>colchicine tab 0.6 mg</i>	1	CRINONE GEL 4% VAG.....	97
<i>colchicine w/ probenecid tab 0.5-500 mg</i> ..	1	CRINONE GEL 8% VAG.....	97
<i>cold/cough liq child</i>	79	<i>cromolyn sodium ophth soln 4%</i>	128
<i>colestipol hcl granule packets 5 gm</i>	41	<i>cromolyn sodium oral conc 100 mg/5ml</i>	102
<i>colestipol hcl granules 5 gm</i>	41	<i>cromolyn sodium soln nebu 20 mg/2ml</i> ..	136
		<i>crostan lot 10%</i>	146
		<i>cryselle-28 tab 28 tabs</i>	86
		<i>cvs ivermect lot 0.5%</i>	146
		CVS PRENATAL CHW GUMMY.....	123
		<i>cyanocobalamin sl tab 1000 mcg</i>	109
		<i>cyanocobalamin sl tab 500 mcg</i>	109
		<i>cyclobenzaprine hcl tab 10 mg</i>	76
		<i>cyclobenzaprine hcl tab 5 mg</i>	76

<i>cyclophosphamide cap 25 mg</i>	25	<i>dasetta tab 7/7/7</i>	86
<i>cyclophosphamide cap 50 mg</i>	25	<i>daunorubicin hcl iv soln 20 mg/4ml (base</i>	
<i>cyclophosphamide for inj 1 gm</i>	25	<i>equiv)</i>	26
<i>cyclophosphamide for inj 2 gm</i>	25	DAYVIGO TAB 10MG	72
<i>cyclophosphamide for inj 500 mg</i>	25	DAYVIGO TAB 5MG	72
<i>cycloserine cap 250 mg</i>	17	<i>decitabine for inj 50 mg</i>	27
<i>cyclosporine cap 100 mg</i>	116	<i>deferiprone tab 1000 mg</i>	85
<i>cyclosporine cap 25 mg</i>	116	<i>deferiprone tab 500 mg</i>	85
<i>cyclosporine iv soln 50 mg/ml</i>	116	<i>delyla tab 0.1-0.02</i>	86
<i>cyclosporine modified cap 100 mg</i>	116	<i>demeclocycline hcl tab 150 mg</i>	24
<i>cyclosporine modified cap 25 mg</i>	116	<i>demeclocycline hcl tab 300 mg</i>	24
<i>cyclosporine modified cap 50 mg</i>	116	DENGVAXIA SUS	117
<i>cyclosporine modified oral soln 100 mg/ml</i>		DEPO-ESTRADI INJ 5MG/ML	90
.....	116	DEPO-MEDROL INJ 20MG/ML.....	93
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	132	DEPO-SQ PROV INJ 104	86
<i>cyproheptadine hcl tab 4 mg</i>	132	DESCOVY TAB 120-15MG.....	16
CYSTAGON CAP 150MG	90	DESCOVY TAB 200/25MG.....	16
CYSTAGON CAP 50MG	90	<i>desenex cre 1%</i>	141
CYSTARAN SOL 0.44%.....	130	<i>desipramine hcl tab 100 mg</i>	56
<i>cytarabine inj 20 mg/ml</i>	26	<i>desipramine hcl tab 10 mg</i>	56
<i>cytarabine inj pf 100 mg/ml</i>	26	<i>desipramine hcl tab 150 mg</i>	56
<i>cytarabine inj pf 20 mg/ml</i>	26	<i>desipramine hcl tab 25 mg</i>	56
D		<i>desipramine hcl tab 50 mg</i>	56
<i>dabigatran etexilate mesylate cap 150 mg</i>		<i>desipramine hcl tab 75 mg</i>	56
<i>(etexilate base eq)</i>	106	<i>desloratadine tab 5 mg</i>	132
<i>dacarbazine for inj 100 mg</i>	25	<i>desloratadine tab orally disintegrating 2.5</i>	
<i>dacarbazine for inj 200 mg</i>	25	<i>mg</i>	132
<i>daily-vite/ tab iron</i>	122	<i>desloratadine tab orally disintegrating 5 mg</i>	
<i>dalfampridine tab er 12hr 10 mg</i>	75	.....	132
<i>danazol cap 100 mg</i>	89	<i>desmopressin acetate inj 4 mcg/ml</i>	98
<i>danazol cap 200 mg</i>	89	<i>desmopressin acetate nasal spray soln</i>	
<i>danazol cap 50 mg</i>	89	<i>0.01%</i>	98
<i>dantrolene sodium cap 100 mg</i>	76	<i>desmopressin acetate nasal spray soln</i>	
<i>dantrolene sodium cap 25 mg</i>	76	<i>0.01% (refrigerated)</i>	98
<i>dantrolene sodium cap 50 mg</i>	76	<i>desmopressin acetate preservative free (pf)</i>	
<i>dapsone tab 100 mg</i>	22	<i>inj 4 mcg/ml</i>	98
<i>dapsone tab 25 mg</i>	22	<i>desmopressin acetate tab 0.1 mg</i>	98
<i>darifenacin hydrobromide tab er 24hr 15</i>		<i>desmopressin acetate tab 0.2 mg</i>	98
<i>mg (base equiv)</i>	105	<i>desonide cream 0.05%</i>	143
<i>darifenacin hydrobromide tab er 24hr 7.5</i>		<i>desonide lotion 0.05%</i>	143
<i>mg (base equiv)</i>	105	<i>desonide oint 0.05%</i>	143
<i>darunavir tab 600 mg</i>	14	<i>desoximetasone cream 0.05%</i>	143
<i>darunavir tab 800 mg</i>	14	<i>desoximetasone cream 0.25%</i>	143
<i>dasetta tab 1/35</i>	86	<i>desoximetasone gel 0.05%</i>	143

<i>desoximetasone oint 0.25%</i>	143
<i>desoximetasone spray 0.25%</i>	143
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	56
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	56
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	56
DEXAMETHASON CON 1MG/ML	93
<i>dexamethasone elixir 0.5 mg/5ml</i>	93
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	93
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	93
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	93
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	93
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	93
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	128
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	93
<i>dexamethasone soln 0.5 mg/5ml</i>	93
<i>dexamethasone tab 0.5 mg</i>	93
<i>dexamethasone tab 0.75 mg</i>	93
<i>dexamethasone tab 1.5 mg</i>	93
<i>dexamethasone tab 1 mg</i>	93
<i>dexamethasone tab 2 mg</i>	94
<i>dexamethasone tab 4 mg</i>	94
<i>dexamethasone tab 6 mg</i>	94
DEXCOM G5 MIS RECEIVER	89
DEXCOM G5 MIS TRANSMIT	89
DEXCOM G6 MIS RECEIVER	89
DEXCOM G6 MIS SENSOR	89
DEXCOM G6 MIS TRANSMIT	89
DEXCOM G7 MIS RECEIVER	89
DEXCOM G7 MIS SENSOR	89
<i>dexlansoprazole cap delayed release 30 mg</i>	103
<i>dexlansoprazole cap delayed release 60 mg</i>	103

<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	70
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	70
<i>dexmethylphenidate hcl tab 10 mg</i>	70
<i>dexmethylphenidate hcl tab 2.5 mg</i>	70
<i>dexmethylphenidate hcl tab 5 mg</i>	70
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	35
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	35
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	70
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	70
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	70
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	70
<i>dextroamphetamine sulfate tab 10 mg</i>	70
<i>dextroamphetamine sulfate tab 15 mg</i>	70
<i>dextroamphetamine sulfate tab 20 mg</i>	70
<i>dextroamphetamine sulfate tab 30 mg</i>	70
<i>dextroamphetamine sulfate tab 5 mg</i>	70
DHS TAR SHA	148
<i>diaper rash cre 13%</i>	146
<i>diaper rash pst 40%</i>	146
<i>diazepam con 5mg/ml</i>	65
<i>diazepam inj 5 mg/ml</i>	65
<i>diazepam oral soln 1 mg/ml</i>	65
<i>diazepam tab 10 mg</i>	65
<i>diazepam tab 2 mg</i>	65

<i>diazepam tab 5 mg</i>	65	<i>diltiazem hcl coated beads cap er 24hr 240</i>	
<i>dibucaine oint 1%</i>	145	<i>mg</i>	46
<i>diclofenac potassium tab 50 mg</i>	1	<i>diltiazem hcl coated beads cap er 24hr 300</i>	
<i>diclofenac sodium (actinic keratoses) gel</i>		<i>mg</i>	46
<i>3%</i>	145	<i>diltiazem hcl coated beads cap er 24hr 360</i>	
<i>diclofenac sodium gel 1% (1.16%</i>		<i>mg</i>	46
<i>diethylamine equiv)</i>	145	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium ophth soln 0.1%</i>	128	<i>er 24hr 120 mg</i>	46
<i>diclofenac sodium tab delayed release 25</i>		<i>diltiazem hcl extended release beads cap</i>	
<i>mg</i>	1	<i>er 24hr 180 mg</i>	46
<i>diclofenac sodium tab delayed release 50</i>		<i>diltiazem hcl extended release beads cap</i>	
<i>mg</i>	1	<i>er 24hr 240 mg</i>	46
<i>diclofenac sodium tab delayed release 75</i>		<i>diltiazem hcl extended release beads cap</i>	
<i>mg</i>	1	<i>er 24hr 300 mg</i>	46
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac w/ misoprostol tab delayed</i>		<i>er 24hr 360 mg</i>	46
<i>release 50-0.2 mg</i>	3	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac w/ misoprostol tab delayed</i>		<i>er 24hr 420 mg</i>	46
<i>release 75-0.2 mg</i>	3	<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	
<i>dicloxacillin sodium cap 250 mg</i>	24	.....	47
<i>dicloxacillin sodium cap 500 mg</i>	24	<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	
<i>dicyclomine hcl cap 10 mg</i>	98	.....	47
<i>dicyclomine hcl inj 10 mg/ml</i>	98	<i>diltiazem hcl tab 120 mg</i>	47
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	98	<i>diltiazem hcl tab 30 mg</i>	47
<i>dicyclomine hcl tab 20 mg</i>	98	<i>diltiazem hcl tab 60 mg</i>	47
DIFICID SUS	20	<i>diltiazem hcl tab 90 mg</i>	47
DIFICID TAB 200MG	20	<i>diltiazem hcl tab er 24hr 120 mg</i>	47
<i>diflorasone diacetate cream 0.05%</i>	143	<i>dilt-xr cap 120mg</i>	46
<i>diflorasone diacetate oint 0.05%</i>	143	<i>dilt-xr cap 180mg</i>	46
<i>diflunisal tab 500 mg</i>	10	<i>dilt-xr cap 240mg</i>	46
<i>difluprednate ophth emulsion 0.05%</i>	128	DIMETAPP CLD ELX /ALLERGY	79
<i>digoxin oral soln 0.05 mg/ml</i>	48	<i>dimetapp liq nighttim</i>	79
<i>digoxin tab 125 mcg (0.125 mg)</i>	48	DIMETAPP SYP CGH/COLD	79
<i>digoxin tab 250 mcg (0.25 mg)</i>	48	<i>dimethyl fumarate capsule delayed release</i>	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	48	<i>120 mg</i>	75
<i>dihydroergotamine mesylate inj 1 mg/ml</i> .73		<i>dimethyl fumarate capsule delayed release</i>	
DILANTIN CAP 30MG	66	<i>240 mg</i>	75
<i>diltiazem hcl cap er 12hr 120 mg</i>	46	<i>dimethyl fumarate capsule dr starter pack</i>	
<i>diltiazem hcl cap er 12hr 60 mg</i>	46	<i>120 mg & 240 mg</i>	75
<i>diltiazem hcl cap er 12hr 90 mg</i>	46	<i>diocto syp 60/15ml</i>	119
<i>diltiazem hcl coated beads cap er 24hr 120</i>		DIPENTUM CAP 250MG	101
<i>mg</i>	46	<i>diphenhydram cap 50mg</i>	132
<i>diltiazem hcl coated beads cap er 24hr 180</i>		<i>diphenhydramine hcl inj 50 mg/ml</i>	132
<i>mg</i>	46		

<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	25	DOPTELET TAB 20MG.....	107, 108
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	25	<i>dorzolamide hcl ophth soln 2%</i>	129
<i>dipyridamole tab 25 mg</i>	109	<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	129
<i>dipyridamole tab 50 mg</i>	109	DOVATO TAB 50-300MG.....	16
<i>dipyridamole tab 75 mg</i>	109	<i>doxazosin mesylate tab 1 mg</i>	104
<i>disopyramide phosphate cap 100 mg</i>	40	<i>doxazosin mesylate tab 2 mg</i>	104
<i>disopyramide phosphate cap 150 mg</i>	40	<i>doxazosin mesylate tab 4 mg</i>	104
<i>disulfiram tab 250 mg</i>	52	<i>doxazosin mesylate tab 8 mg</i>	104
<i>disulfiram tab 500 mg</i>	52	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i> 73	
DIURIL SUS 250/5ML	48	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i> 73	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	66	<i>doxepin hcl cap 100 mg</i>	56
<i>divalproex sodium tab delayed release 125 mg</i>	66	<i>doxepin hcl cap 10 mg</i>	56
<i>divalproex sodium tab delayed release 250 mg</i>	66	<i>doxepin hcl cap 150 mg</i>	57
<i>divalproex sodium tab delayed release 500 mg</i>	66	<i>doxepin hcl cap 25 mg</i>	56
<i>divalproex sodium tab er 24 hr 250 mg</i>	66	<i>doxepin hcl cap 50 mg</i>	56
<i>divalproex sodium tab er 24 hr 500 mg</i>	66	<i>doxepin hcl cap 75 mg</i>	56
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	27	<i>doxepin hcl conc 10 mg/ml</i>	57
<i>docetaxel for inj conc 20 mg/ml</i>	27	<i>doxepin hcl cream 5%</i>	142
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	27	<i>doxercalciferol cap 0.5 mcg</i>	126
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	27	<i>doxercalciferol cap 1 mcg</i>	126
<i>docetaxel soln for iv infusion 20 mg/2ml</i> ..	27	<i>doxercalciferol cap 2.5 mcg</i>	126
<i>docetaxel soln for iv infusion 80 mg/8ml</i> ..	27	<i>doxorubicin hcl for inj 10 mg</i>	26
<i>docusate calcium cap 240 mg</i>	119	<i>doxorubicin hcl inj 2 mg/ml</i>	26
<i>docusate sodium cap 250 mg</i>	119	<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	26
<i>docusate sodium liquid 150 mg/15ml</i>	119	<i>doxy 100 inj 100mg</i>	24
<i>dofetilide cap 125 mcg (0.125 mg)</i>	40	<i>doxycycline hyclate cap 100 mg</i>	24
<i>dofetilide cap 250 mcg (0.25 mg)</i>	40	<i>doxycycline hyclate cap 50 mg</i>	24
<i>dofetilide cap 500 mcg (0.5 mg)</i>	40	<i>doxycycline hyclate for inj 100 mg</i>	24
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	53	<i>doxycycline hyclate tab 100 mg</i>	24
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	53	<i>doxycycline hyclate tab 20 mg</i>	24
<i>donepezil hydrochloride tab 10 mg</i>	53	<i>doxycycline monohydrate cap 100 mg</i>	24
<i>donepezil hydrochloride tab 23 mg</i>	53	<i>doxycycline monohydrate cap 50 mg</i>	24
<i>donepezil hydrochloride tab 5 mg</i>	53	<i>doxycycline monohydrate for susp 25 mg/5ml</i>	24
		<i>doxycycline monohydrate tab 150 mg</i>	24
		<i>doxycycline monohydrate tab 50 mg</i>	24
		<i>doxycycline monohydrate tab 75 mg</i>	24
		<i>doxylamine succinate tab 25mg</i>	73
		DRAMAMINE CHW 50MG.....	99
		<i>dramamine tab 25mg</i>	99
		DRAMAMINE TAB 50MG.....	99
		<i>dronabinol cap 10 mg</i>	99

<i>dronabinol cap 2.5 mg</i>	99	<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	73
<i>dronabinol cap 5 mg</i>	99	<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	73
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	86	ELIGARD INJ 22.5MG.....	29
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	86	ELIGARD INJ 30MG.....	29
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	86	ELIGARD INJ 45MG.....	29
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	86	ELIGARD INJ 7.5MG.....	29
DROXIA CAP 200MG.....	108	<i>elinest tab</i>	86
DROXIA CAP 300MG.....	108	ELIQUIS ST P TAB 5MG.....	106
DROXIA CAP 400MG.....	108	ELIQUIS TAB 2.5MG.....	106
DR SMITHS OIN DIAPER.....	146	ELIQUIS TAB 5MG.....	106
DRY MOUTH SPR.....	147	<i>elite-ob tab</i>	123
<i>dual action chw complete</i>	104	ELLA TAB 30MG.....	86
DUAVEE TAB 0.45-20.....	90	ELMIRON CAP 100MG.....	105
<i>duloxetine hcl cap 20 mg</i>	57	EMCYT CAP 140MG.....	25
<i>duloxetine hcl cap 30 mg</i>	57	EMFLAZA SUS 22.75/ML.....	94
<i>duloxetine hcl cap 60 mg</i>	57	EMFLAZA TAB 18MG.....	94
DUREX MIS REALFEEL.....	86	EMFLAZA TAB 30MG.....	94
<i>dutasteride cap 0.5 mg</i>	104	EMFLAZA TAB 36MG.....	94
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	104	EMFLAZA TAB 6MG.....	94
D-VI-SOL LIQ 400UNIT.....	148	EMGALITY INJ 100MG/ML.....	73
E		EMGALITY INJ 120MG/ML.....	73
E600 CAP 600UNIT.....	148	EMSAM DIS 12MG/24H.....	57
<i>easy-lax pls tab 8.6-50mg</i>	119	EMSAM DIS 6MG/24HR.....	57
<i>econazole nitrate cream 1%</i>	141	EMSAM DIS 9MG/24HR.....	57
ECOTRIN M/S TAB 500MG EC.....	11	<i>emtricitabine caps 200 mg</i>	14
<i>ed-apap liq 80mg/2.5</i>	10	<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	16
EDURANT TAB 25MG.....	14	<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	16
<i>efavirenz cap 200 mg</i>	14	<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	16
<i>efavirenz cap 50 mg</i>	14	<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	16
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	16	EMTRIVA SOL 10MG/ML.....	14
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	16	EMVERM CHW 100MG.....	12
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	16	<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	36
<i>efavirenz tab 600 mg</i>	14	<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	36
<i>effer-k tab 25meq ef</i>	124	<i>enalapril maleate tab 10 mg</i>	37
ELESTRIN GEL 0.06%.....	90	<i>enalapril maleate tab 2.5 mg</i>	37
		<i>enalapril maleate tab 20 mg</i>	37

<i>enalapril maleate tab 5 mg</i>	37	<i>epinephrine solution auto-injector 0.15</i>	
ENBREL INJ 25/0.5ML	111	<i>mg/0.3ml (1:2000)</i>	131
ENBREL INJ 25MG	111	<i>epinephrine solution auto-injector 0.3</i>	
ENBREL INJ 50MG/ML	111	<i>mg/0.3ml (1:1000)</i>	131
ENBREL MINI INJ 50MG/ML.....	111	EPIPEN 2-PAK INJ 0.3MG.....	131
ENBREL SRCLK INJ 50MG/ML.....	111	EPIPEN-JR INJ 0.15MG	131
ENCARE SUP 100MG	104	<i>epitol tab 200mg</i>	66
ENFAMIL MIS EXPECTA	123	EPIVIR HBV SOL 5MG/ML.....	18
ENGERIX-B INJ 10/0.5ML	117	<i>eplerenone tab 25 mg</i>	38
ENGERIX-B INJ 20MCG/ML	117	<i>eplerenone tab 50 mg</i>	38
<i>enoxaparin sodium inj 300 mg/3ml</i>	106	ERBITUX INJ 100MG.....	28
<i>enoxaparin sodium inj soln pref syr 100</i>		ERBITUX INJ 200MG	28
<i>mg/ml</i>	106	<i>ergocalciferol cap 1.25 mg (50000 unit)</i> .	126
<i>enoxaparin sodium inj soln pref syr 120</i>		<i>ergotamine w/ caffeine tab 1-100 mg</i>	73
<i>mg/0.8ml</i>	106	ERIVEDGE CAP 150MG	28
<i>enoxaparin sodium inj soln pref syr 150</i>		ERLEADA TAB 240MG	29
<i>mg/ml</i>	106	ERLEADA TAB 60MG	29
<i>enoxaparin sodium inj soln pref syr 30</i>		<i>erlotinib hcl tab 100 mg (base equivalent)</i> .	31
<i>mg/0.3ml</i>	106	<i>erlotinib hcl tab 150 mg (base equivalent)</i> .	31
<i>enoxaparin sodium inj soln pref syr 40</i>		<i>erlotinib hcl tab 25 mg (base equivalent)</i> .	30
<i>mg/0.4ml</i>	106	<i>e-r-o ear dro 6.5% ot</i>	147
<i>enoxaparin sodium inj soln pref syr 60</i>		<i>errin tab 0.35mg</i>	86
<i>mg/0.6ml</i>	106	ERTACZO CRE 2%	141
<i>enoxaparin sodium inj soln pref syr 80</i>		<i>ertapenem sodium for inj 1 gm (base</i>	
<i>mg/0.8ml</i>	106	<i>equivalent)</i>	22
<i>enpresse-28 tab</i>	86	<i>ery pad 2%</i>	140
<i>enskyce tab</i>	86	<i>ery-tab tab 250mg ec</i>	20
<i>entacapone tab 200 mg</i>	61	<i>ery-tab tab 333mg ec</i>	20
<i>entecavir tab 0.5 mg</i>	17	<i>ery-tab tab 500mg ec</i>	20
<i>entecavir tab 1 mg</i>	18	<i>erythrocin tab 250mg</i>	20
ENTRESTO TAB 24-26MG	49	<i>erythromycin ethylsuccinate for susp 200</i>	
ENTRESTO TAB 49-51MG.....	49	<i>mg/5ml</i>	20
ENTRESTO TAB 97-103MG	49	<i>erythromycin ethylsuccinate for susp 400</i>	
<i>enulose sol 10gm/15</i>	101	<i>mg/5ml</i>	20
ENVARUSUS XR TAB 0.75MG.....	116	<i>erythromycin ethylsuccinate tab 400 mg</i> .	20
ENVARUSUS XR TAB 1MG	116	<i>erythromycin gel 2%</i>	140
ENVARUSUS XR TAB 4MG	116	<i>erythromycin ophth oint 5 mg/gm</i>	127
EPCLUSA PAK 150-37.5.....	21	<i>erythromycin soln 2%</i>	140
EPCLUSA PAK 200-50MG	21	<i>erythromycin tab 250 mg</i>	20
EPCLUSA TAB 200-50MG.....	21	<i>erythromycin tab 500 mg</i>	20
EPCLUSA TAB 400-100	21	<i>erythromycin w/ delayed release particles</i>	
<i>epinastine hcl ophth soln 0.05%</i>	128	<i>cap 250 mg</i>	20
<i>epinephrine solution auto-injector 0.15</i>		<i>escitalopram oxalate soln 5 mg/5ml (base</i>	
<i>mg/0.15ml (1:1000)</i>	131	<i>equiv)</i>	57

escitalopram oxalate tab 10 mg (base equiv)	57	estradiol valerate im in oil 20 mg/ml	92
escitalopram oxalate tab 20 mg (base equiv)	57	estradiol valerate im in oil 40 mg/ml	92
escitalopram oxalate tab 5 mg (base equiv)	57	ESTROGEL GEL	92
esomeprazole magnesium cap delayed release 20 mg (base eq)	103	eszopiclone tab 1 mg	73
esomeprazole magnesium cap delayed release 40 mg (base eq)	103	eszopiclone tab 2 mg	73
esomeprazole magnesium for delayed release susp packet 10 mg	103	eszopiclone tab 3 mg	73
estazolam tab 1 mg	73	ethacrynic acid tab 25 mg	48
estazolam tab 2 mg	73	ethambutol hcl tab 100 mg	17
estradiol & norethindrone acetate tab 0.5-0.1 mg	90	ethambutol hcl tab 400 mg	17
estradiol & norethindrone acetate tab 1-0.5 mg	90	ethosuximide cap 250 mg	66
estradiol tab 0.5 mg	90	ethosuximide soln 250 mg/5ml	66
estradiol tab 1 mg	90	ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	86
estradiol tab 2 mg	90	etodolac cap 200 mg	2
estradiol td gel 0.25 mg/0.25gm (0.1%)	91	etodolac cap 300 mg	2
estradiol td gel 0.5 mg/0.5gm (0.1%)	90	etodolac tab 400 mg	2
estradiol td gel 0.75 mg/0.75gm (0.1%)	91	etodolac tab 500 mg	2
estradiol td gel 1.25 mg/1.25gm (0.1%)	91	etodolac tab er 24hr 400 mg	2
estradiol td gel 1 mg/gm (0.1%)	91	etodolac tab er 24hr 500 mg	2
estradiol td patch twice weekly 0.025 mg/24hr	91	etodolac tab er 24hr 600 mg	2
estradiol td patch twice weekly 0.0375 mg/24hr	91	etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	86
estradiol td patch twice weekly 0.05 mg/24hr	91	etoposide cap 50 mg	36
estradiol td patch twice weekly 0.075 mg/24hr	91	etoposide inj 100 mg/5ml (20 mg/ml)	36
estradiol td patch twice weekly 0.1 mg/24hr	91	etoposide inj 1 gm/50ml (20 mg/ml)	36
estradiol td patch weekly 0.025 mg/24hr	91	etoposide inj 500 mg/25ml (20 mg/ml)	36
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	92	etravirine tab 100 mg	14
estradiol td patch weekly 0.05 mg/24hr	91	etravirine tab 200 mg	14
estradiol td patch weekly 0.06 mg/24hr	91	EUCERIN CALM LOT 0.1%	138
estradiol td patch weekly 0.075 mg/24hr	91	EUCRISA OIN 2%	142
estradiol td patch weekly 0.1 mg/24hr	91	EVAMIST SPR 1.53MG	92
estradiol vaginal cream 0.1 mg/gm	92	everolimus tab 0.25 mg	116
		everolimus tab 0.5 mg	116
		everolimus tab 0.75 mg	116
		everolimus tab 10 mg	31
		everolimus tab 1 mg	116
		everolimus tab 2.5 mg	31
		everolimus tab 5 mg	31
		everolimus tab 7.5 mg	31
		everolimus tab for oral susp 2 mg	31
		everolimus tab for oral susp 3 mg	31
		everolimus tab for oral susp 5 mg	31
		EVOTAZ TAB 300-150	16
		EVRYSDI SOL	75

EXCEDRIN PM TAB 500-38MG	73	<i>fenofibrate tab 160 mg</i>	41
EXCEDRIN TAB MIGRAINE.....	10	<i>fenofibrate tab 48 mg</i>	41
<i>exemestane tab 25 mg</i>	29	<i>fenofibrate tab 54 mg</i>	41
<i>ex-lax ultra tab 5mg ec</i>	119	<i>fenoprofen calcium tab 600 mg</i>	2
<i>eye drops sol 0.05% op</i>	130	<i>fentanyl citrate lozenge on a handle 1200</i> <i>mcg</i>	3
<i>ezetimibe-simvastatin tab 10-10 mg</i>	41	<i>fentanyl citrate lozenge on a handle 1600</i> <i>mcg</i>	3
<i>ezetimibe-simvastatin tab 10-20 mg</i>	41	<i>fentanyl citrate lozenge on a handle 200</i> <i>mcg</i>	3
<i>ezetimibe-simvastatin tab 10-40 mg</i>	41	<i>fentanyl citrate lozenge on a handle 400</i> <i>mcg</i>	3
<i>ezetimibe-simvastatin tab 10-80 mg</i>	41	<i>fentanyl citrate lozenge on a handle 600</i> <i>mcg</i>	3
<i>ezetimibe tab 10 mg</i>	41	<i>fentanyl citrate lozenge on a handle 800</i> <i>mcg</i>	3
EZFE FORTE CAP	123	<i>fentanyl td patch 72hr 100 mcg/hr</i>	4
F		<i>fentanyl td patch 72hr 12 mcg/hr</i>	4
<i>falmina tab</i>	86	<i>fentanyl td patch 72hr 25 mcg/hr</i>	4
<i>famciclovir tab 125 mg</i>	18	<i>fentanyl td patch 72hr 50 mcg/hr</i>	4
<i>famciclovir tab 250 mg</i>	18	<i>ferate tab 27mg</i>	109
<i>famciclovir tab 500 mg</i>	18	FER-IN-SOL DRO 15MG/ML	109
<i>famotidine for susp 40 mg/5ml</i>	101	FERPRX 2-DAY TAB 1000MG.....	85
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	101	FERRETTS TAB 325MG	109
<i>famotidine preservative free inj 20 mg/2ml</i>	101	FERRIPROX SOL 100MG/ML.....	85
<i>famotidine tab 10 mg</i>	101	<i>ferrocite tab 324mg</i>	109
<i>famotidine tab 20 mg</i>	101	FERROUS GLUC TAB 324MG	109
<i>famotidine tab 40 mg</i>	101	<i>ferrous sulfat e elixir 220 mg/5ml (44</i> <i>mg/5ml elemental fe)</i>	109
FASENRA INJ 30MG/ML	137	<i>ferrous sulfate soln 300 mg/5ml (60</i> <i>mg/5ml elemental fe)</i>	109
FASENRA PEN INJ 30MG/ML	137	<i>ferrous sulfate tab ec 325 mg (65 mg fe</i> <i>equivalent)</i>	110
FC2 FEMALE MIS CONDOM.....	86	FERROUS SULF TAB 140MG	109
<i>febuxostat tab 40 mg</i>	1	FERROUS SULF TAB 324MG EC.....	109
<i>febuxostat tab 80 mg</i>	1	<i>ferrous sulf tab 325mg</i>	109
<i>felbamate susp 600 mg/5ml</i>	66	FERROUS SUL LIQ 220/5ML	109
<i>felbamate tab 400 mg</i>	66	<i>fesoterodine fumarate tab er 24hr 4 mg</i> .105	
<i>felbamate tab 600 mg</i>	66	<i>fesoterodine fumarate tab er 24hr 8 mg</i> .105	
<i>felodipine tab er 24hr 10 mg</i>	47	FETZIMA CAP 120MG.....	57
<i>felodipine tab er 24hr 2.5 mg</i>	47	FETZIMA CAP 20MG	57
<i>felodipine tab er 24hr 5 mg</i>	47	FETZIMA CAP 40MG	57
FEMCAP MIS 22MM	119	FETZIMA CAP 80MG	57
FEMCAP MIS 26MM.....	120		
FEMCAP MIS 30MM	120		
<i>fenofibrate cap 150 mg</i>	41		
<i>fenofibrate micronized cap 134 mg</i>	41		
<i>fenofibrate micronized cap 200 mg</i>	41		
<i>fenofibrate micronized cap 43 mg</i>	41		
<i>fenofibrate micronized cap 67 mg</i>	41		
<i>fenofibrate tab 145 mg</i>	41		

FETZIMA CAP TITRATIO	57	<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	27
FEVERALL INF SUP 80MG.....	10	.....	27
FIASP FLEX INJ TOUCH	83	<i>fluorouracil iv soln 500 mg/10ml (50</i>	27
FIASP INJ 100/ML.....	83	<i>mg/ml)</i>	27
FIASP PENFIL INJ U-100	83	<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	27
FIBERCON TAB 625MG.....	119	.....	27
<i>fiber oral powder</i>	119	<i>fluorouracil soln 2%</i>	140
FINACEA AER 15%	146	<i>fluorouracil soln 5%</i>	140
<i>finasteride tab 5 mg</i>	104	<i>fluoxetine hcl cap 10 mg.....</i>	57
FINGERSTIX MIS LANCETS	120	<i>fluoxetine hcl cap 20 mg.....</i>	57
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	75	<i>fluoxetine hcl cap 40 mg.....</i>	57
<i>flecainide acetate tab 100 mg</i>	40	<i>fluoxetine hcl cap delayed release 90 mg</i>	57
<i>flecainide acetate tab 150 mg</i>	40	<i>fluoxetine hcl solution 20 mg/5ml</i>	57
<i>flecainide acetate tab 50 mg.....</i>	40	<i>fluoxetine hcl tab 10 mg</i>	57
FLEET ENE ENEMA	119	<i>fluoxetine hcl tab 20 mg.....</i>	57
<i>floxuridine for inj 0.5 gm.....</i>	27	<i>fluphenazine decanoate inj 25 mg/ml.....</i>	63
<i>fluconazole for susp 10 mg/ml.....</i>	13	<i>fluphenazine hcl elixir 2.5 mg/5ml.....</i>	63
<i>fluconazole for susp 40 mg/ml</i>	13	<i>fluphenazine hcl inj 2.5 mg/ml</i>	63
<i>fluconazole tab 100 mg</i>	13	<i>fluphenazine hcl oral conc 5 mg/ml</i>	63
<i>fluconazole tab 150 mg</i>	13	<i>fluphenazine hcl tab 10 mg</i>	63
<i>fluconazole tab 200 mg</i>	13	<i>fluphenazine hcl tab 1 mg.....</i>	63
<i>fluconazole tab 50 mg.....</i>	13	<i>fluphenazine hcl tab 2.5 mg.....</i>	63
<i>fludarabine phosphate for inj 50 mg.....</i>	27	<i>fluphenazine hcl tab 5 mg.....</i>	63
<i>fludarabine phosphate inj 25 mg/ml.....</i>	27	<i>flurbiprofen sodium ophth soln 0.03%</i>	128
<i>fludrocortisone acetate tab 0.1 mg.....</i>	94	<i>flurbiprofen tab 100 mg</i>	2
FLUMIST QUAD SUS 2023-24	117	<i>flurbiprofen tab 50 mg</i>	2
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	136	<i>flutamide cap 125 mg</i>	29
.....	136	<i>fluticasone propionate cream 0.05%</i>	144
<i>fluocinolone acetonide (otic) oil 0.01% ...</i>	147	<i>fluticasone propionate lotion 0.05%</i>	144
<i>fluocinolone acetonide cream 0.01%</i>	143	<i>fluticasone propionate oint 0.005%</i>	144
<i>fluocinolone acetonide cream 0.025% ...</i>	143	<i>fluvastatin sodium cap 20 mg (base</i>	42
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	143	<i>equivalent).....</i>	42
.....	143	<i>fluvastatin sodium cap 40 mg (base</i>	42
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	143	<i>equivalent).....</i>	42
.....	143	<i>fluvastatin sodium tab er 24 hr 80 mg (base</i>	42
<i>fluocinolone acetonide oint 0.025%.....</i>	144	<i>equivalent).....</i>	42
<i>fluocinolone acetonide soln 0.01%</i>	144	<i>fluvoxamine maleate cap er 24hr 100 mg.</i>	57
<i>fluocinonide cream 0.05%.....</i>	144	<i>fluvoxamine maleate cap er 24hr 150 mg.</i>	57
<i>fluocinonide gel 0.05%</i>	144	<i>fluvoxamine maleate tab 100 mg.....</i>	53
<i>fluocinonide oint 0.05%</i>	144	<i>fluvoxamine maleate tab 25 mg.....</i>	53
<i>fluocinonide soln 0.05%.....</i>	144	<i>fluvoxamine maleate tab 50 mg</i>	53
<i>fluoritab dro 0.125mg.....</i>	124	FLUZONE QUAD INJ 2023-24	117
<i>fluorouracil cream 5%</i>	140	FML OIN 0.1% OP	128
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	27	<i>folic acid cap 0.8 mg</i>	126

<i>folic acid tab 1 mg</i>	126	<i>furosemide inj 10 mg/ml</i>	48
<i>folic acid tab 400 mcg</i>	126	<i>furosemide oral soln 10 mg/ml</i>	48
<i>folic acid tab 800 mcg</i>	126	<i>furosemide oral soln 8 mg/ml</i>	48
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	106	<i>furosemide tab 20 mg</i>	48
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	106	<i>furosemide tab 40 mg</i>	48
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	106	<i>furosemide tab 80 mg</i>	48
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	106	FUZEON INJ 90MG	14
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	134	FYCOMPA SUS 0.5MG/ML	66
FOSAMAX + D TAB 70-2800	85	FYCOMPA TAB 10MG	66
FOSAMAX + D TAB 70-5600	85	FYCOMPA TAB 12MG	66
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	14	FYCOMPA TAB 2MG	66
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	12	FYCOMPA TAB 4MG	66
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	36	FYCOMPA TAB 6MG	66
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	36	FYCOMPA TAB 8MG	66
<i>fosinopril sodium tab 10 mg</i>	37	FYLNETRA INJ 6MG/0.6	108
<i>fosinopril sodium tab 20 mg</i>	37	<i>fyremadel sol 250/0.5</i>	98
<i>fosinopril sodium tab 40 mg</i>	37	G	
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	66	G4 PLATINUM MIS PEDIATRC	89
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	66	G4 PLATINUM MIS RCV/SHAR	89
FOSRENOL POW 1000MG	96	G4 PLATINUM MIS RECEIVER	89
FOSRENOL POW 750MG	96	G4 PLATINUM MIS TRANSMIT	89
FRAGMIN INJ 10000/ML	106	G4 PLAT PED MIS RVC/SHAR	89
FRAGMIN INJ 12500UNT	106	G4 SENSOR MIS	89
FRAGMIN INJ 15000UNT	106	G5/G4 MIS SENSOR	89
FRAGMIN INJ 18000UNT	106	<i>gabapentin cap 100 mg</i>	66
FRAGMIN INJ 2500/0.2	106	<i>gabapentin cap 300 mg</i>	66
FRAGMIN INJ 2500/ML	106	<i>gabapentin cap 400 mg</i>	66
FRAGMIN INJ 5000/0.2	106	<i>gabapentin oral soln 250 mg/5ml</i>	66
FRAGMIN INJ 7500/0.3	106	<i>gabapentin tab 600 mg</i>	66
FRAGMIN INJ 95000UNT	106	<i>gabapentin tab 800 mg</i>	66
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	74	<i>galantamine hydrobromide cap er 24hr 16 mg</i>	53
<i>fulvestrant inj soln pref syr 250 mg/5ml</i> ...	29	<i>galantamine hydrobromide cap er 24hr 24 mg</i>	53
		<i>galantamine hydrobromide cap er 24hr 8 mg</i>	53
		<i>galantamine hydrobromide oral soln 4 mg/ml</i>	53
		<i>galantamine hydrobromide tab 12 mg</i>	53
		<i>galantamine hydrobromide tab 4 mg</i>	53
		<i>galantamine hydrobromide tab 8 mg</i>	53
		<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	93
		GARDASIL 9 INJ	117

GAS-X CHW 80MG	100	GLEOSTINE CAP 10MG	25
gatifloxacin ophth soln 0.5%.....	127	GLEOSTINE CAP 40MG	25
gavilyte-c sol.....	119	GLIADEL WAF 7.7MG	25
gavilyte-g sol.....	119	glimepiride tab 1 mg	84
GAZYVA INJ 25MG/ML.....	28	glimepiride tab 2 mg.....	84
gemcitabine hcl for inj 1 gm	27	glimepiride tab 4 mg.....	84
gemcitabine hcl for inj 200 mg.....	27	glipizide-metformin hcl tab 2.5-250 mg ...	82
gemcitabine hcl for inj 2 gm.....	27	glipizide-metformin hcl tab 2.5-500 mg ...	82
gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml)		glipizide-metformin hcl tab 5-500 mg	82
(base equiv).....	27	glipizide tab 10 mg	84
gemcitabine hcl inj 200 mg/5.26ml (38		glipizide tab 5 mg.....	84
mg/ml) (base equiv).....	27	glipizide tab er 24hr 10 mg.....	85
gemcitabine hcl inj 2 gm/52.6ml (38		glipizide tab er 24hr 2.5 mg	85
mg/ml) (base equiv).....	27	glipizide tab er 24hr 5 mg	85
gemfibrozil tab 600 mg.....	41	glucagon (rdna) for inj kit 1 mg	95
gemmily cap 1/20.....	86	GLUCOSE CHW 4GM	95
GEMTESA TAB 75MG	105	GLUCOSE URINE TEST STRIPS	120
generlac sol 10gm/15.....	101	GLYCERIN SUP 2GM.....	119
gengraf cap 100mg	116	glycopyrrolate inj 1 mg/5ml (0.2 mg/ml) ..	98
gengraf cap 25mg	116	glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)	
gengraf sol 100mg/ml	116	.....	98
GENOTROPIN INJ 0.2MG	95	glycopyrrolate oral soln 1 mg/5ml	99
GENOTROPIN INJ 0.4MG	95	glycopyrrolate tab 1 mg.....	99
GENOTROPIN INJ 0.6MG	95	glycopyrrolate tab 2 mg	99
GENOTROPIN INJ 0.8MG	95	GLYXAMBI TAB 10-5 MG.....	84
GENOTROPIN INJ 1.2MG	95	GLYXAMBI TAB 25-5 MG	84
GENOTROPIN INJ 1.4MG.....	95	gnp suphedrn liq 15mg/5ml	138
GENOTROPIN INJ 1.6MG	95	GONAL-F INJ 1050UNIT	93
GENOTROPIN INJ 1.8MG.....	95	GONAL-F INJ 450UNIT	93
GENOTROPIN INJ 12MG	95	GONAL-F RFF INJ 300/0.5.....	93
GENOTROPIN INJ 1MG	95	GONAL-F RFF INJ 450/0.75.....	93
GENOTROPIN INJ 2MG.....	95	GONAL-F RFF INJ 75UNIT	93
GENOTROPIN INJ 5MG	95	GONAL-F RFF INJ 900/1.5.....	93
gentak oin 0.3% op	127	GOOD START LIQ W/IRON	80
gentamicin sulfate cream 0.1%	140	GOOD START POW NATURAL.....	80
gentamicin sulfate inj 40 mg/ml	12	gordon-vit e cre 1500unit	145
gentamicin sulfate oint 0.1%.....	140	granisetron hcl inj 1 mg/ml.....	99
gentamicin sulfate ophth soln 0.3%	127	granisetron hcl tab 1 mg.....	99
gentle laxat sup 10mg.....	119	griseofulvin microsize susp 125 mg/5ml ...	13
GENVOYA TAB.....	16	griseofulvin microsize tab 500 mg	13
glatiramer acetate soln prefilled syringe 40		griseofulvin ultramicrosize tab 125 mg	13
mg/ml	75	griseofulvin ultramicrosize tab 250 mg	13
glatopa inj 20mg/ml.....	75	guaifenesin-codeine soln 100-10 mg/5ml	
GLEOSTINE CAP 100MG.....	25	.....	79, 134

<i>guaifenesin tab 200 mg</i>	80	<i>hemorrhoidal cre</i>	11
<i>guanfacine hcl tab 1 mg</i>	49	<i>hemorrhoidal gel 0.25-50%</i>	11
<i>guanfacine hcl tab 2 mg</i>	49	<i>hemorrhoidal sup</i>	11
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	70	<i>heparin sodium (porcine) inj 10000 unit/ml</i>	107
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	70	<i>heparin sodium (porcine) inj 1000 unit/ml</i>	106
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	70	<i>heparin sodium (porcine) inj 20000 unit/ml</i>	107
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	70	<i>heparin sodium (porcine) inj 5000 unit/ml</i>	107
<i>gummy vit/ chw minerals</i>	122	<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	107
GYNAZOLE-1 CRE 2%	105	HIBICLENS LIQ 4%	139
GYNE-LOTRIM CRE 1% VAG	105	HOLD CHAMBER MIS MEDIUM	137
GYNE-LOTRIMI CRE 3	105	HUMIRA INJ 10/0.1ML	111
GYNOL II GEL 3%	104	HUMIRA INJ 20/0.2ML	111
H		HUMIRA INJ 40/0.4ML	111
HAEGARDA INJ 2000UNIT	115	HUMIRA KIT 40MG/0.8	111
HAEGARDA INJ 3000UNIT	115	HUMIRA PEDIA INJ CROHNS	112
<i>halobetasol propionate cream 0.05%</i>	144	HUMIRA PEN INJ 40/0.4ML	112
<i>halobetasol propionate oint 0.05%</i>	144	HUMIRA PEN INJ 40MG/0.8	112
<i>haloperidol decanoate im soln 100 mg/ml</i>	63	HUMIRA PEN INJ 80/0.8ML	112
<i>haloperidol decanoate im soln 50 mg/ml</i>	63	HUMIRA PEN KIT PS/UV	112
<i>haloperidol lactate inj 5 mg/ml</i>	63	HUMULIN INJ 70/30	83
<i>haloperidol lactate oral conc 2 mg/ml</i>	63	HUMULIN INJ 70/30KWP	83
<i>haloperidol tab 0.5 mg</i>	63	HUMULIN N INJ U-100	83
<i>haloperidol tab 10 mg</i>	63	HUMULIN N INJ U-100KWP	83
<i>haloperidol tab 1 mg</i>	63	HUMULIN R INJ U-100	83
<i>haloperidol tab 20 mg</i>	63	HUMULIN R INJ U-500	83
<i>haloperidol tab 2 mg</i>	63	HURRICAIN SOL 20%	147
<i>haloperidol tab 5 mg</i>	63	<i>hydralazine hcl tab 100 mg</i>	50
HARVONI PAK	21	<i>hydralazine hcl tab 10 mg</i>	49
HARVONI PAK 45-200MG	21	<i>hydralazine hcl tab 25 mg</i>	50
HARVONI TAB 45-200MG	21	<i>hydralazine hcl tab 50 mg</i>	50
HARVONI TAB 90-400MG	21	<i>hydrochlorothiazide cap 12.5 mg</i>	48
HAVRIX INJ 1440UNIT	117	<i>hydrochlorothiazide tab 12.5 mg</i>	48
HAVRIX INJ 720UNIT	117	<i>hydrochlorothiazide tab 25 mg</i>	48
HEALTHY KIDS CHW GUMMIES	122	<i>hydrochlorothiazide tab 50 mg</i>	48
<i>heather tab 0.35mg</i>	86	<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	4
HEMLIBRA INJ 105/0.7	108	<i>hydrocodone-acetaminophen tab 10-325 mg</i>	4
HEMLIBRA INJ 150/ML	108		
HEMLIBRA INJ 30MG/ML	108		
HEMLIBRA INJ 60/0.4	108		

<i>hydrocodone-acetaminophen tab 5-325 mg</i>	4	<i>hydromorphone hcl inj 2 mg/ml</i>	5
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	4	<i>hydromorphone hcl tab 2 mg</i>	5
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	134	<i>hydromorphone hcl tab 4 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	4	<i>hydromorphone hcl tab 8 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	4	<i>hydromorphone hcl tab er 24hr 12 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	4	<i>hydromorphone hcl tab er 24hr 16 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	4	<i>hydromorphone hcl tab er 24hr 32 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	4	<i>hydromorphone hcl tab er 24hr 8 mg</i>	5
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	4	<i>hydroxychloroquine sulfate tab 200 mg</i> ..	115
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	4	<i>hydroxyurea cap 500 mg</i>	34
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	4	<i>hydroxyzine hcl im soln 25 mg/ml</i>	132
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	134	<i>hydroxyzine hcl im soln 50 mg/ml</i>	132
<i>hydrocortisone butyrate cream 0.1%</i>	144	<i>hydroxyzine hcl syrup 10 mg/5ml</i>	132
<i>hydrocortisone butyrate oint 0.1%</i>	144	<i>hydroxyzine hcl tab 10 mg</i>	132
<i>hydrocortisone butyrate soln 0.1%</i>	144	<i>hydroxyzine hcl tab 25 mg</i>	133
<i>hydrocortisone cream 0.5%</i>	144	<i>hydroxyzine hcl tab 50 mg</i>	133
<i>hydrocortisone cream 1%</i>	144	<i>hydroxyzine pamoate cap 100 mg</i>	133
<i>hydrocortisone cream 2.5%</i>	144	<i>hydroxyzine pamoate cap 25 mg</i>	133
<i>hydrocortisone enema 100 mg/60ml</i>	101	<i>hydroxyzine pamoate cap 50 mg</i>	133
<i>hydrocortisone lotion 2.5%</i>	144	HYPO NEEDLE MIS 23GX1	121
<i>hydrocortisone oint 0.5%</i>	144	HYPO NEEDLE MIS 25GX5/8	121
<i>hydrocortisone oint 1%</i>	144	HYQVIA INJ 10-800	115
<i>hydrocortisone oint 2.5%</i>	144	HYQVIA INJ 2.5-200	115
<i>hydrocortisone perianal cream 1%</i>	104	HYQVIA INJ 20-1600	115
<i>hydrocortisone perianal cream 2.5%</i>	104	HYQVIA INJ 30-2400	115
<i>hydrocortisone tab 10 mg</i>	94	HYQVIA INJ 5-400	115
<i>hydrocortisone tab 20 mg</i>	94	HYRIMOZ-CROH INJ UC SP	112
<i>hydrocortisone tab 5 mg</i>	94	HYRIMOZ INJ 10/0.1ML	112
<i>hydrocortisone valerate cream 0.2%</i>	144	HYRIMOZ INJ 20/0.2ML	112
<i>hydrocortisone valerate oint 0.2%</i>	144	HYRIMOZ INJ 40/0.4ML	112
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	147	HYRIMOZ INJ 80/0.8ML	112
<i>hydromet syp 5-1.5/5</i>	134	HYRIMOZ-PED INJ CROHNS	112
		HYRIMOZ-PLAQ INJ PSORIASI	112
		I	
		<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	85
		<i>ibandronate sodium tab 150 mg (base equivalent)</i>	85
		IBRANCE CAP 100MG	31
		IBRANCE CAP 125MG	31
		IBRANCE CAP 75MG	31
		IBRANCE TAB 100MG	31
		IBRANCE TAB 125MG	31
		IBRANCE TAB 75MG	31

<i>ibuprofen jr chw 100mg</i>	2	IMODIUM A-D TAB 2MG	25
<i>ibuprofen susp 100 mg/5ml</i>	2	IMVEXXY MAIN SUP 10MCG	92
<i>ibuprofen tab 400 mg</i>	2	IMVEXXY MAIN SUP 4MCG	92
<i>ibuprofen tab 600 mg</i>	2	IMVEXXY STRT SUP 10MCG	92
<i>ibuprofen tab 800 mg</i>	2	IMVEXXY STRT SUP 4MCG	92
<i>icatibant acetate subcutaneous soln pref</i>		<i>inatal gt tab</i>	125
<i>syr 30 mg/3ml</i>	115	INBRIJA CAP 42MG	61
ICLUSIG TAB 10MG.....	31	INCRELEX INJ 40MG/4ML	96
ICLUSIG TAB 15MG.....	31	<i>indapamide tab 1.25 mg</i>	48
ICLUSIG TAB 30MG.....	31	<i>indapamide tab 2.5 mg</i>	48
ICLUSIG TAB 45MG.....	31	INFANRIX INJ.....	117
<i>icosapent ethyl cap 0.5 gm</i>	43	INFLIXIMAB INJ 100MG	110
<i>icosapent ethyl cap 1 gm</i>	43	INLYTA TAB 1MG.....	32
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	26	INLYTA TAB 5MG.....	32
.....	26	INSULIN PEN NEEDLES	120
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	26	INSULIN PEN NEEDLES/SYRINGES..	120, 121
IDHIFA TAB 100MG.....	34	INTELENCE TAB 25MG.....	14
IDHIFA TAB 50MG	34	INTRAROSA SUP 6.5MG	96
<i>ifosfamide for inj 1 gm</i>	25	INTRON A INJ 10MU	115
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	26	INTRON A INJ 18MU	115
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i> ...26		INTRON A INJ 50MU	115
ILEVRO DRO 0.3% OP.....	128	<i>introvale tab</i>	86
<i>imatinib mesylate tab 100 mg (base</i>		IONIL LIQ	146
<i>equivalent)</i>	31	IONIL-T SHA 1%.....	148
<i>imatinib mesylate tab 400 mg (base</i>		IOPIDINE SOL 1% OP	129
<i>equivalent)</i>	31	IPOL INJ INACTIVE	117
IMBRUVICA CAP 140MG.....	32	<i>ipratropium-albuterol nebu soln 0.5-2.5(3)</i>	
IMBRUVICA CAP 70MG.....	31	<i>mg/3ml</i>	131
IMBRUVICA SUS 70MG/ML	32	<i>ipratropium bromide inhal soln 0.02%</i>	131
IMBRUVICA TAB 140MG	32	<i>ipratropium bromide nasal soln 0.03% (21</i>	
IMBRUVICA TAB 280MG	32	<i>mcg/spray)</i>	131
IMBRUVICA TAB 420MG	32	<i>ipratropium bromide nasal soln 0.06% (42</i>	
IMBRUVICA TAB 560MG	32	<i>mcg/spray)</i>	131
<i>imipramine hcl tab 10 mg</i>	57	<i>irbesartan-hydrochlorothiazide tab 150-12.5</i>	
<i>imipramine hcl tab 25 mg</i>	58	<i>mg</i>	38
<i>imipramine hcl tab 50 mg</i>	58	<i>irbesartan-hydrochlorothiazide tab 300-</i>	
<i>imipramine pamoate cap 100 mg</i>	58	<i>12.5 mg</i>	38
<i>imipramine pamoate cap 125 mg</i>	58	<i>irbesartan tab 150 mg</i>	39
<i>imipramine pamoate cap 150 mg</i>	58	<i>irbesartan tab 300 mg</i>	39
<i>imipramine pamoate cap 75 mg</i>	58	<i>irbesartan tab 75 mg</i>	39
<i>imiquimod cream 5%</i>	140	<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	36
IMODIUM A-D CAP 2MG.....	25	.....	36
IMODIUM A-D SOL 1MG/7.5.....	25	<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i> ..	36

<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	36	<i>jantoven tab 2.5mg</i>	107
.....	36	<i>jantoven tab 2mg</i>	107
IRON CHW PEDIATRI	110	<i>jantoven tab 3mg</i>	107
ISENTRESS CHW 100MG	14	<i>jantoven tab 4mg</i>	107
ISENTRESS CHW 25MG	14	<i>jantoven tab 5mg</i>	107
ISENTRESS HD TAB 600MG	14	<i>jantoven tab 6mg</i>	107
ISENTRESS POW 100MG.....	14	<i>jantoven tab 7.5mg</i>	107
ISENTRESS TAB 400MG.....	14	JANUMET TAB 50-1000	82
<i>isoniazid inj 100 mg/ml</i>	17	JANUMET TAB 50-500MG.....	82
<i>isoniazid syrup 50 mg/5ml</i>	17	JANUMET XR TAB 100-1000	82
<i>isoniazid tab 100 mg</i>	17	JANUMET XR TAB 50-1000	82
<i>isoniazid tab 300 mg</i>	17	JANUMET XR TAB 50-500MG.....	82
<i>isosorbide dinitrate tab 10 mg</i>	50	JANUVIA TAB 100MG.....	82
<i>isosorbide dinitrate tab 20 mg</i>	50	JANUVIA TAB 25MG.....	82
<i>isosorbide dinitrate tab 30 mg</i>	50	JANUVIA TAB 50MG	82
<i>isosorbide dinitrate tab 5 mg</i>	50	JARDIANCE TAB 10MG.....	84
<i>isosorbide mononitrate tab 10 mg</i>	50	JARDIANCE TAB 25MG	84
<i>isosorbide mononitrate tab 20 mg</i>	50	JENTADUETO TAB XR.....	82
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	50	<i>jinteli tab 1mg-5mcg</i>	92
.....	50	<i>jolessa tab</i>	86
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	50	JUBLIA SOL 10%	141
.....	50	<i>junel 1/20 tab</i>	87
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	50	<i>junel 1.5/30 tab</i>	87
.....	50	<i>junel fe 24 tab 1/20</i>	87
<i>isotretinoin cap 10 mg</i>	140	<i>junel fe tab 1/20</i>	87
<i>isotretinoin cap 20 mg</i>	140	<i>junel fe tab 1.5/30</i>	87
<i>isotretinoin cap 30 mg</i>	140	K	
<i>isotretinoin cap 40 mg</i>	140	KADCYLA INJ 100MG.....	28
<i>isradipine cap 2.5 mg</i>	47	KADCYLA INJ 160MG.....	28
<i>isradipine cap 5 mg</i>	47	KALYDECO GRA 13.4MG.....	135
<i>itraconazole cap 100 mg</i>	13	KALYDECO PAK 25MG.....	135
<i>itraconazole oral soln 10 mg/ml</i>	13	KALYDECO PAK 50MG.....	135
<i>ivermectin cream 1%</i>	146	KALYDECO PAK 75MG.....	135
<i>ivermectin lotion 0.5%</i>	146	KALYDECO TAB 150MG	135
<i>ivermectin tab 3 mg</i>	12	<i>kariva tab 28 day</i>	87
IV PREP WIPE PAD.....	140	<i>kelnor tab 1/35</i>	87
J		KERENDIA TAB 10MG	96
JAKAFI TAB 10MG	32	KERENDIA TAB 20MG.....	96
JAKAFI TAB 15MG.....	32	KERI NRSHING LOT SHEA BTR.....	80
JAKAFI TAB 20MG.....	32	<i>ketoconazole cream 2%</i>	141
JAKAFI TAB 25MG.....	32	<i>ketoconazole shampoo 2%</i>	142
JAKAFI TAB 5MG	32	KETONE URINE TEST STRIPS.....	120
<i>jantoven tab 10mg</i>	107	<i>ketorolac tromethamine im inj 60 mg/2ml</i>	
<i>jantoven tab 1mg</i>	107	(30 mg/ml)	2

<i>ketorolac tromethamine inj 15 mg/ml</i>	2	<i>lamivudine tab 300 mg</i>	14
<i>ketorolac tromethamine inj 30 mg/ml</i>	2	<i>lamivudine-zidovudine tab 150-300 mg</i>	17
<i>ketorolac tromethamine ophth soln 0.4%</i>	128	<i>lamotrigine orally disintegrating tab 100 mg</i>	66
<i>ketorolac tromethamine ophth soln 0.5%</i>	128	<i>lamotrigine orally disintegrating tab 200 mg</i>	66
<i>ketorolac tromethamine tab 10 mg</i>	2	<i>lamotrigine orally disintegrating tab 25 mg</i>	66
KEVZARA INJ 150/1.14.....	112	<i>lamotrigine orally disintegrating tab 50 mg</i>	66
KEVZARA INJ 200/1.14.....	113	<i>lamotrigine tab 100 mg</i>	67
KEYTRUDA INJ 100MG/4ML.....	28	<i>lamotrigine tab 150 mg</i>	67
<i>kidkare liq cgh/cold</i>	79	<i>lamotrigine tab 200 mg</i>	67
KINRIX INJ.....	117	<i>lamotrigine tab 25 mg</i>	66
KISQALI TAB 200DOSE.....	32	<i>lamotrigine tab 25 mg (42) & 100 mg (7)</i> <i>starter kit</i>	67
KISQALI TAB 400DOSE.....	32	<i>lamotrigine tab 35 x 25 mg starter kit</i>	67
KISQALI TAB 600DOSE.....	32	<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg</i> <i>starter kit</i>	67
<i>klor-con 10 tab 10meq er</i>	124	<i>lamotrigine tab chewable dispersible 25 mg</i>	67
<i>klor-con 8 tab 8meq er</i>	124	<i>lamotrigine tab chewable dispersible 5 mg</i>	67
<i>klor-con m15 tab 15meq er</i>	124	<i>lamotrigine tab er 24hr 100 mg</i>	67
<i>kobee tab</i>	122	<i>lamotrigine tab er 24hr 200 mg</i>	67
<i>konsyl daily pow 28.3%</i>	119	<i>lamotrigine tab er 24hr 250 mg</i>	67
KPN PRENATAL TAB.....	123	<i>lamotrigine tab er 24hr 25 mg</i>	67
<i>kurvelo tab 0.15/30</i>	87	<i>lamotrigine tab er 24hr 300 mg</i>	67
KYLEENA IUD 19.5MG	87	<i>lamotrigine tab er 24hr 50 mg</i>	67
L		LANCING DEVICE.....	120
<i>labetalol hcl tab 100 mg</i>	44	<i>lansoprazole cap delayed release 15 mg</i> 103	
<i>labetalol hcl tab 200 mg</i>	44	<i>lansoprazole cap delayed release 30 mg</i> 103	
<i>labetalol hcl tab 300 mg</i>	44	<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	32
LAC-HYDRIN LOT FIVE.....	145	<i>larin tab 1.5/30</i>	87
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	66	<i>latanoprost ophth soln 0.005%</i>	129
<i>lacosamide oral solution 10 mg/ml</i>	66	L-CARNITINE TAB 500MG.....	126
<i>lacosamide tab 100 mg</i>	66	<i>leena tab</i>	87
<i>lacosamide tab 150 mg</i>	66	<i>leflunomide tab 10 mg</i>	115
<i>lacosamide tab 200 mg</i>	66	<i>leflunomide tab 20 mg</i>	115
<i>lacosamide tab 50 mg</i>	66	LENVIMA CAP 10 MG	32
LACRISERT MIS 5MG OP	129	LENVIMA CAP 12MG	32
<i>lactic acid (ammonium lactate) cream 12%</i>	145	LENVIMA CAP 14 MG	32
<i>lactulose solution 10 gm/15ml</i>	101	LENVIMA CAP 18 MG	33
<i>lamisil af aer 1%</i>	141		
LAMISIL AT CRE 1%	141		
<i>lamivudine oral soln 10 mg/ml</i>	14		
<i>lamivudine tab 100 mg (hbv)</i>	18		
<i>lamivudine tab 150 mg</i>	14		

LENVIMA CAP 20 MG.....	33	levetiracetam tab er 24hr 750 mg	67
LENVIMA CAP 24 MG.....	33	levobunolol hcl ophth soln 0.5%	129
LENVIMA CAP 4MG.....	32	levocarnitine cap 250 mg	126
LENVIMA CAP 8 MG.....	32	levocetirizine dihydrochloride soln 2.5	
lessina tab	87	mg/5ml (0.5 mg/ml).....	133
letrozole tab 2.5 mg	29	levocetirizine dihydrochloride tab 5 mg ..	133
leucovorin calcium for inj 100 mg	35	levofloxacin iv soln 25 mg/ml.....	20
leucovorin calcium for inj 200 mg.....	35	levofloxacin ophth soln 0.5%.....	127
leucovorin calcium for inj 350 mg.....	35	levofloxacin oral soln 25 mg/ml.....	20
leucovorin calcium for inj 500 mg	35	levofloxacin tab 250 mg.....	20
leucovorin calcium for inj 50 mg	35	levofloxacin tab 500 mg.....	20
leucovorin calcium tab 10 mg.....	35	levofloxacin tab 750 mg.....	21
leucovorin calcium tab 15 mg.....	35	levonest tab.....	87
leucovorin calcium tab 25 mg	35	levonorgestrel & ethinyl estradiol (91-day)	
leucovorin calcium tab 5 mg	35	tab 0.15-0.03 mg	87
LEUKERAN TAB 2MG	26	levonorgestrel & ethinyl estradiol tab 0.15	
leuprolide acetate inj kit 1 mg/0.2ml (5		mg-30 mcg.....	87
mg/ml)	29	levonorgestrel & ethinyl estradiol tab 0.1	
levabuterol hcl soln nebu 0.31 mg/3ml		mg-20 mcg.....	87
(base equiv)	134	levonorgestrel-ethinyl estradiol-fe tab 0.1	
levabuterol hcl soln nebu 0.63 mg/3ml		mg-20 mcg (21)	87
(base equiv)	134	levonorg-eth est tab 0.1-0.02mg(84) & eth	
levabuterol hcl soln nebu 1.25 mg/3ml		est tab 0.01mg(7)	87
(base equiv)	134	levora-28 tab 0.15/30	87
levabuterol hcl soln nebu conc 1.25		levothyroxine sodium tab 100 mcg.....	97
mg/0.5ml (base equiv).....	134	levothyroxine sodium tab 112 mcg.....	97
levabuterol tartrate inhal aerosol 45		levothyroxine sodium tab 125 mcg	97
mcg/act (base equiv)	134	levothyroxine sodium tab 137 mcg	97
LEVEMIR INJ.....	83	levothyroxine sodium tab 150 mcg.....	97
LEVEMIR INJ FLEXPEN	83	levothyroxine sodium tab 175 mcg	97
levetiracetam inj 500 mg/5ml (100 mg/ml)		levothyroxine sodium tab 200 mcg.....	97
.....	67	levothyroxine sodium tab 25 mcg.....	97
levetiracetam in sodium chloride iv soln		levothyroxine sodium tab 300 mcg.....	97
1000 mg/100ml	67	levothyroxine sodium tab 50 mcg	97
levetiracetam in sodium chloride iv soln		levothyroxine sodium tab 75 mcg.....	97
1500 mg/100ml.....	67	levothyroxine sodium tab 88 mcg	97
levetiracetam in sodium chloride iv soln		levoxyl tab 100mcg	97
500 mg/100ml.....	67	levoxyl tab 112mcg	97
levetiracetam oral soln 100 mg/ml	67	levoxyl tab 125mcg	97
levetiracetam tab 1000 mg	67	levoxyl tab 137mcg	97
levetiracetam tab 250 mg	67	levoxyl tab 150mcg	97
levetiracetam tab 500 mg.....	67	levoxyl tab 175mcg	97
levetiracetam tab 750 mg.....	67	levoxyl tab 200mcg	97
levetiracetam tab er 24hr 500 mg	67	levoxyl tab 25mcg.....	97

<i>levoxyl tab 50mcg</i>	97	<i>lisinopril & hydrochlorothiazide tab 20-12.5</i>	
<i>levoxyl tab 75mcg</i>	97	<i>mg</i>	37
<i>levoxyl tab 88mcg</i>	97	<i>lisinopril & hydrochlorothiazide tab 20-25</i>	
LEXIVA SUS 50MG/ML.....	14	<i>mg</i>	37
<i>lice killing sha 0.33-4%</i>	146	<i>lisinopril tab 10 mg</i>	37
<i>lice treatmt lot 1%</i>	146	<i>lisinopril tab 2.5 mg</i>	37
<i>lice trtmnt liq 1%</i>	146	<i>lisinopril tab 20 mg</i>	37
<i>lidocaine hcl (cardiac) iv pf soln pref syr 50</i>		<i>lisinopril tab 30 mg</i>	37
<i>mg/5ml(1%)</i>	40	<i>lisinopril tab 40 mg</i>	37
<i>lidocaine hcl (cardiac) iv soln pref syr 100</i>		<i>lisinopril tab 5 mg</i>	37
<i>mg/5ml (2%)</i>	40	<i>lithium carbonate cap 150 mg</i>	75
<i>lidocaine hcl laryngotracheal soln 4%</i>	147	<i>lithium carbonate cap 300 mg</i>	75
<i>lidocaine hcl local inj 0.5%</i>	11	<i>lithium carbonate cap 600 mg</i>	75
<i>lidocaine hcl local inj 1%</i>	11	<i>lithium carbonate tab 300 mg</i>	75
<i>lidocaine hcl local inj 2%</i>	11	<i>lithium carbonate tab er 300 mg</i>	75
<i>lidocaine hcl local preservative free (pf) inj</i>		<i>lithium carbonate tab er 450 mg</i>	75
<i>0.5%</i>	11	LITHIUM SOL 8MEQ/5ML.....	75
<i>lidocaine hcl local preservative free (pf) inj</i>		LITTLE REMED DRO 0.125%.....	138
<i>1%</i>	11	LMX 4 CRE 4%.....	145
<i>lidocaine hcl local preservative free (pf) inj</i>		LO LOESTRIN TAB 1-10-10.....	87
<i>2%</i>	11	<i>lopinavir-ritonavir soln 400-100 mg/5ml</i>	
<i>lidocaine hcl soln 4%</i>	145	<i>(80-20 mg/ml)</i>	17
<i>lidocaine hcl urethral/mucosal gel prefilled</i>		<i>lopinavir-ritonavir tab 100-25 mg</i>	17
<i>syringe 2%</i>	145	<i>lopinavir-ritonavir tab 200-50 mg</i>	17
<i>lidocaine hcl viscous soln 2%</i>	147	<i>loratadine tab 10 mg</i>	133
<i>lidocaine oint 5%</i>	145	<i>lorazepam conc 2 mg/ml</i>	53
<i>lidocaine pa pad 4%</i>	145	<i>lorazepam tab 0.5 mg</i>	53
<i>lidocaine patch 5%</i>	145	<i>lorazepam tab 1 mg</i>	53
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	145	<i>lorazepam tab 2 mg</i>	53
LILETTA IUD 52MG.....	87	LORBRENA TAB 100MG.....	33
<i>linezolid for susp 100 mg/5ml</i>	22	LORBRENA TAB 25MG.....	33
LINEZOLID INJ 2MG/ML.....	22	<i>loryna tab 3-0.02mg</i>	87
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>		<i>losartan potassium & hydrochlorothiazide</i>	
.....	22	<i>tab 100-12.5 mg</i>	39
<i>linezolid tab 600 mg</i>	22	<i>losartan potassium & hydrochlorothiazide</i>	
LINZESS CAP 145MCG.....	101	<i>tab 100-25 mg</i>	39
LINZESS CAP 290MCG.....	101	<i>losartan potassium & hydrochlorothiazide</i>	
LINZESS CAP 72MCG.....	101	<i>tab 50-12.5 mg</i>	39
<i>liothyronine sodium tab 25 mcg</i>	97	<i>losartan potassium tab 100 mg</i>	40
<i>liothyronine sodium tab 50 mcg</i>	97	<i>losartan potassium tab 25 mg</i>	39
<i>liothyronine sodium tab 5 mcg</i>	97	<i>losartan potassium tab 50 mg</i>	40
LIQUID C 500 LIQ 500/15ML.....	148	<i>loteprednol etabonate ophth susp 0.5%</i>	128
<i>lisinopril & hydrochlorothiazide tab 10-12.5</i>		LOTRIMIN ULT CRE 1%.....	141
<i>mg</i>	37	<i>lovastatin tab 10 mg</i>	42

<i>lovastatin tab 20 mg</i>	42	<i>MATULANE CAP 50MG</i>	26
<i>lovastatin tab 40 mg</i>	42	<i>matzim la tab 180mg/24</i>	47
<i>low-ogestrel tab</i>	87	<i>matzim la tab 240mg/24</i>	47
<i>loxapine succinate cap 10 mg</i>	63	<i>matzim la tab 300mg/24</i>	47
<i>loxapine succinate cap 25 mg</i>	63	<i>matzim la tab 360mg/24</i>	47
<i>loxapine succinate cap 50 mg</i>	63	<i>matzim la tab 420mg/24</i>	47
<i>loxapine succinate cap 5 mg</i>	63	<i>maxilube gel</i>	146
<i>lubiprostone cap 24 mcg</i>	101	<i>mccarnitine tab 330mg</i>	96
<i>lubiprostone cap 8 mcg</i>	101	<i>MCT OIL</i>	125
<i>luliconazole cream 1%</i>	141	<i>meclizine hcl tab 12.5 mg</i>	99
<i>LUMIGAN SOL 0.01%</i>	129	<i>meclizine hcl tab 25 mg</i>	99
<i>lurasidone hcl tab 120 mg</i>	63	<i>meclofenamate sodium cap 100 mg</i>	2
<i>lurasidone hcl tab 20 mg</i>	63	<i>meclofenamate sodium cap 50 mg</i>	2
<i>lurasidone hcl tab 40 mg</i>	63	<i>medicated oin chst rub</i>	80
<i>lurasidone hcl tab 60 mg</i>	63	<i>medi pad</i>	146
<i>lurasidone hcl tab 80 mg</i>	63	<i>MEDROL TAB 2MG</i>	94
<i>lutera tab</i>	87	<i>medroxyprogesterone acetate im susp 150</i>	
<i>LYNPARZA TAB 100MG</i>	34	<i>mg/ml</i>	87
<i>LYNPARZA TAB 150MG</i>	34	<i>medroxyprogesterone acetate im susp</i>	
<i>LYSODREN TAB 500MG</i>	29	<i>prefilled syr 150 mg/ml</i>	87
M		<i>medroxyprogesterone acetate tab 10 mg</i>	97
<i>maalox advan sus max st</i>	11	<i>medroxyprogesterone acetate tab 2.5 mg</i>	
<i>magnesium citrate soln</i>	119	.....	97
<i>MAGNESIUM GL TAB 500MG</i>	124	<i>medroxyprogesterone acetate tab 5 mg</i> ..	97
<i>magnesium gluconate tab 27.5 mg</i>		<i>mefenamic acid cap 250 mg</i>	2
<i>(elemental mg)</i>	124	<i>mefloquine hcl tab 250 mg</i>	13
<i>magnesium oxide tab 250 mg (mg</i>		<i>megestrol acetate susp 40 mg/ml</i>	29
<i>supplement)</i>	122	<i>megestrol acetate susp 625 mg/5ml</i>	97
<i>magnesium oxide tab 400 mg (240 mg</i>		<i>megestrol acetate tab 20 mg</i>	30
<i>elemental mg)</i>	124	<i>megestrol acetate tab 40 mg</i>	30
<i>magnesium sulfate in dextrose 5% iv soln 1</i>		<i>MEKINIST SOL 0.05/ML</i>	33
<i>gm/100ml</i>	124	<i>MEKINIST TAB 0.5MG</i>	33
<i>magnesium sulfate inj 50%</i>	124	<i>MEKINIST TAB 2MG</i>	33
<i>magnesium sulfate iv soln 2 gm/50ml (40</i>		<i>MELATONIN LIQ 1MG/4ML</i>	1
<i>mg/ml)</i>	124	<i>melatonin sub 5mg</i>	1
<i>magnesium tab 250mg</i>	124	<i>melatonin tab 10mg cr</i>	1
<i>malathion lotion 0.5%</i>	146	<i>melatonin tab 1 mg</i>	1
<i>mandelay gel max str</i>	145	<i>melatonin tab 3mg</i>	1
<i>mannitol iv soln 20%</i>	49	<i>melatonin tab 5 mg</i>	1
<i>mannitol iv soln 25%</i>	49	<i>meloxicam tab 15 mg</i>	2
<i>maraviroc tab 150 mg</i>	15	<i>meloxicam tab 7.5 mg</i>	2
<i>maraviroc tab 300 mg</i>	15	<i>melphalan hcl for inj 50 mg (base equiv)</i> ..	26
<i>marlissa tab 0.15/30</i>	87	<i>melphalan tab 2 mg</i>	26
<i>MARPLAN TAB 10MG</i>	58	<i>memantine hcl cap er 24hr 14 mg</i>	54

<i>memantine hcl cap er 24hr 21 mg</i>	54	<i>methadose tab 40mg</i>	5
<i>memantine hcl cap er 24hr 28 mg</i>	54	<i>methamphetamine hcl tab 5 mg</i>	71
<i>memantine hcl cap er 24hr 7 mg</i>	54	<i>methazolamide tab 25 mg</i>	49
<i>memantine hcl oral solution 2 mg/ml</i>	54	<i>methazolamide tab 50 mg</i>	49
<i>memantine hcl tab 10 mg</i>	54	<i>methenamine hippurate tab 1 gm</i>	22
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg</i>		<i>methimazole tab 10 mg</i>	97
<i>titration pack</i>	54	<i>methimazole tab 5 mg</i>	97
<i>memantine hcl tab 5 mg</i>	54	<i>methocarbamol tab 500 mg</i>	76
MENEST TAB 0.3MG	92	<i>methocarbamol tab 750 mg</i>	76
MENEST TAB 0.625MG	92	<i>methotrexate sodium for inj 1 gm</i>	27
MENEST TAB 1.25MG	92	<i>methotrexate sodium inj 250 mg/10ml (25</i>	
MENEST TAB 2.5MG	92	<i>mg/ml)</i>	27
MENQUADFI INJ	117	<i>methotrexate sodium inj 50 mg/2ml (25</i>	
MENVEO INJ	118	<i>mg/ml)</i>	27
MENVEO SOL	118	<i>methotrexate sodium inj pf 1000 mg/40ml</i>	
<i>meprobamate tab 200 mg</i>	53	<i>(25 mg/ml)</i>	27
<i>meprobamate tab 400 mg</i>	53	<i>methotrexate sodium inj pf 250 mg/10ml</i>	
<i>mercaptopurine tab 50 mg</i>	27	<i>(25 mg/ml)</i>	27
<i>meribin cap 5mg</i>	148	<i>methotrexate sodium inj pf 50 mg/2ml (25</i>	
<i>meropenem iv for soln 1 gm</i>	22	<i>mg/ml)</i>	27
<i>meropenem iv for soln 500 mg</i>	22	<i>methotrexate sodium tab 2.5 mg (base</i>	
<i>mesalamine cap dr 400 mg</i>	101	<i>equiv)</i>	115
<i>mesalamine cap er 24hr 0.375 gm</i>	101	<i>methoxsalen rapid cap 10 mg</i>	142
<i>mesalamine enema 4 gm</i>	101	<i>methscopolamine bromide tab 2.5 mg</i>	99
<i>mesalamine rectal enema 4 gm & cleanser</i>		<i>methscopolamine bromide tab 5 mg</i>	99
<i>wipe kit</i>	101	<i>methsuximide cap 300 mg</i>	67
<i>mesalamine suppos 1000 mg</i>	101	<i>methylidopa tab 250 mg</i>	50
<i>mesalamine tab delayed release 1.2 gm</i> ..	101	<i>methylidopa tab 500 mg</i>	50
<i>mesalamine tab delayed release 800 mg</i>	101	<i>methylphenidate hcl cap er 10 mg (cd)</i>	71
<i>mesna inj 100 mg/ml</i>	35	<i>methylphenidate hcl cap er 20 mg (cd)</i>	71
MESNEX TAB 400MG	35	<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	
<i>metaxalone tab 800 mg</i>	76	.....	71
<i>metformin hcl tab 1000 mg</i>	82	<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	
<i>metformin hcl tab 500 mg</i>	82	.....	71
<i>metformin hcl tab 850 mg</i>	82	<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	
<i>metformin hcl tab er 24hr 500 mg</i>	82	.....	71
<i>metformin hcl tab er 24hr 750 mg</i>	82	<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	
<i>methadone con 10mg/ml</i>	5	.....	71
<i>methadone hcl conc 10 mg/ml</i>	5	<i>methylphenidate hcl cap er 30 mg (cd)</i>	71
<i>methadone hcl soln 10 mg/5ml</i>	5	<i>methylphenidate hcl cap er 40 mg (cd)</i>	71
<i>methadone hcl soln 5 mg/5ml</i>	5	<i>methylphenidate hcl cap er 50 mg (cd)</i>	71
<i>methadone hcl tab 10 mg</i>	5	<i>methylphenidate hcl cap er 60 mg (cd)</i>	71
<i>methadone hcl tab 5 mg</i>	5	<i>methylphenidate hcl chew tab 10 mg</i>	71
<i>methadone hcl tab for oral susp 40 mg</i>	5	<i>methylphenidate hcl chew tab 2.5 mg</i>	71

<i>methylphenidate hcl chew tab 5 mg</i>	71	<i>metoprolol & hydrochlorothiazide tab 100-</i>	
<i>methylphenidate hcl soln 10 mg/5ml</i>	71	<i>25 mg</i>	44
<i>methylphenidate hcl soln 5 mg/5ml</i>	71	<i>metoprolol & hydrochlorothiazide tab 100-</i>	
<i>methylphenidate hcl tab 10 mg</i>	71	<i>50 mg</i>	44
<i>methylphenidate hcl tab 20 mg</i>	71	<i>metoprolol & hydrochlorothiazide tab 50-25</i>	
<i>methylphenidate hcl tab 5 mg</i>	71	<i>mg</i>	44
<i>methylphenidate hcl tab er 10 mg</i>	71	<i>metoprolol succinate tab er 24hr 100 mg</i>	
<i>methylphenidate hcl tab er 20 mg</i>	71	<i>(tartrate equiv)</i>	45
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol succinate tab er 24hr 200 mg</i>	
<i>(osm) 18 mg</i>	71	<i>(tartrate equiv)</i>	45
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol succinate tab er 24hr 25 mg</i>	
<i>(osm) 27 mg</i>	71	<i>(tartrate equiv)</i>	44
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol succinate tab er 24hr 50 mg</i>	
<i>(osm) 36 mg</i>	71	<i>(tartrate equiv)</i>	44
<i>methylphenidate hcl tab er osmotic release</i>		<i>metoprolol tartrate tab 100 mg</i>	45
<i>(osm) 54 mg</i>	72	<i>metoprolol tartrate tab 25 mg</i>	45
<i>methylprednisolone acetate inj susp 40</i>		<i>metoprolol tartrate tab 50 mg</i>	45
<i>mg/ml</i>	94	<i>metronidazole cap 375 mg</i>	22
<i>methylprednisolone acetate inj susp 80</i>		<i>metronidazole cream 0.75%</i>	146
<i>mg/ml</i>	94	<i>metronidazole gel 0.75%</i>	146
<i>methylprednisolone sod succ for inj 1000</i>		<i>metronidazole gel 1%</i>	146
<i>mg (base equiv)</i>	94	<i>metronidazole iv soln 500 mg/100ml</i>	22
<i>methylprednisolone sod succ for inj 125 mg</i>		<i>metronidazole lotion 0.75%</i>	146
<i>(base equiv)</i>	94	<i>metronidazole tab 250 mg</i>	22
<i>methylprednisolone tab 16 mg</i>	94	<i>metronidazole tab 500 mg</i>	22
<i>methylprednisolone tab 32 mg</i>	94	<i>metronidazole vaginal gel 0.75%</i>	105
<i>methylprednisolone tab 4 mg</i>	94	<i>miconazole 1 kit 1200-2%</i>	105
<i>methylprednisolone tab 8 mg</i>	94	<i>miconazole 3 sup 200mg</i>	105
<i>methylprednisolone tab therapy pack 4 mg</i>		<i>miconazole 7 cre tube/kit</i>	105
<i>(21)</i>	94	<i>miconazole 7 sup 100mg</i>	105
<i>metoclopramide hcl inj 5 mg/ml (base</i>		<i>miconazole cre 2%</i>	141
<i>equivalent)</i>	99	<i>microgestin tab 1.5/30</i>	87
<i>metoclopramide hcl orally disintegrating</i>		<i>midodrine hcl tab 10 mg</i>	50
<i>tab 5 mg (base eq)</i>	99	<i>midodrine hcl tab 2.5 mg</i>	50
<i>metoclopramide hcl soln 5 mg/5ml (10</i>		<i>midodrine hcl tab 5 mg</i>	50
<i>mg/10ml) (base equiv)</i>	99	<i>miglitol tab 100 mg</i>	82
<i>metoclopramide hcl tab 10 mg (base</i>		<i>miglitol tab 25 mg</i>	82
<i>equivalent)</i>	99	<i>miglitol tab 50 mg</i>	82
<i>metoclopramide hcl tab 5 mg (base</i>		<i>milk of magn sus frsh mnt</i>	119
<i>equivalent)</i>	99	<i>mimvey tab 1-0.5mg</i>	92
<i>metolazone tab 10 mg</i>	49	<i>mineral oil</i>	119
<i>metolazone tab 2.5 mg</i>	49	<i>minerin cre</i>	146
<i>metolazone tab 5 mg</i>	49	<i>minocycline hcl cap 100 mg</i>	25
		<i>minocycline hcl cap 50 mg</i>	25

<i>minocycline hcl cap 75 mg</i>	25	<i>mometasone furoate oint 0.1%</i>	144
<i>minocycline hcl tab 100 mg</i>	25	<i>mometasone furoate solution 0.1% (lotion)</i>	144
<i>minocycline hcl tab 50 mg</i>	25	MONOJECT S/P MIS 35ML/REG	121
<i>minocycline hcl tab 75 mg</i>	25	<i>mono-lynyah tab 0.25-35</i>	87
<i>minoxidil tab 10 mg</i>	50	<i>montelukast sodium chew tab 4 mg (base</i> <i>equiv)</i>	135
<i>minoxidil tab 2.5 mg</i>	50	<i>montelukast sodium chew tab 5 mg (base</i> <i>equiv)</i>	136
MIRCERA INJ 100MCG	108	<i>montelukast sodium oral granules packet 4</i> <i>mg (base equiv)</i>	136
MIRCERA INJ 120MCG	108	<i>montelukast sodium tab 10 mg (base equiv)</i>	136
MIRCERA INJ 150MCG	108	<i>morphine sulfate beads cap er 24hr 120 mg</i>	6
MIRCERA INJ 200MCG	108	<i>morphine sulfate beads cap er 24hr 30 mg</i> 5	
MIRCERA INJ 30MCG	108	<i>morphine sulfate beads cap er 24hr 45 mg</i> 5	
MIRCERA INJ 50MCG	108	<i>morphine sulfate beads cap er 24hr 60 mg</i> 5	
MIRCERA INJ 75MCG	108	<i>morphine sulfate beads cap er 24hr 75 mg</i> 5	
MIRENA IUD SYSTEM	87	<i>morphine sulfate beads cap er 24hr 90 mg</i> 6	
<i>mirtazapine orally disintegrating tab 15 mg</i>	58	<i>morphine sulfate cap er 24hr 100 mg</i>	6
<i>mirtazapine orally disintegrating tab 30 mg</i>	58	<i>morphine sulfate cap er 24hr 10 mg</i>	6
<i>mirtazapine orally disintegrating tab 45 mg</i>	58	<i>morphine sulfate cap er 24hr 20 mg</i>	6
<i>mirtazapine tab 15 mg</i>	58	<i>morphine sulfate cap er 24hr 30 mg</i>	6
<i>mirtazapine tab 30 mg</i>	58	<i>morphine sulfate cap er 24hr 50 mg</i>	6
<i>mirtazapine tab 45 mg</i>	58	<i>morphine sulfate cap er 24hr 60 mg</i>	6
<i>mirtazapine tab 7.5 mg</i>	58	<i>morphine sulfate cap er 24hr 80 mg</i>	6
<i>misoprostol tab 100 mcg</i>	102	<i>morphine sulfate iv soln 10 mg/ml</i>	6
<i>misoprostol tab 200 mcg</i>	102	<i>morphine sulfate iv soln 4 mg/ml</i>	6
<i>mitomycin for iv soln 20 mg</i>	26	<i>morphine sulfate oral soln 100 mg/5ml (20</i> <i>mg/ml)</i>	6
<i>mitomycin for iv soln 40 mg</i>	26	<i>morphine sulfate oral soln 10 mg/5ml</i>	6
<i>mitomycin for iv soln 5 mg</i>	26	<i>morphine sulfate oral soln 20 mg/5ml</i>	6
<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i> <i>mg/ml)</i>	26	<i>morphine sulfate tab 15 mg</i>	6
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2</i> <i>mg/ml)</i>	26	<i>morphine sulfate tab 30 mg</i>	6
<i>mitoxantrone hcl inj conc 30 mg/15ml (2</i> <i>mg/ml)</i>	26	<i>morphine sulfate tab er 100 mg</i>	7
<i>modafinil tab 100 mg</i>	77	<i>morphine sulfate tab er 15 mg</i>	6
<i>modafinil tab 200 mg</i>	77	<i>morphine sulfate tab er 200 mg</i>	7
MODERNA INJ 6MO-11Y	118	<i>morphine sulfate tab er 30 mg</i>	6
<i>moexipril hcl tab 15 mg</i>	37	<i>morphine sulfate tab er 60 mg</i>	6
<i>moexipril hcl tab 7.5 mg</i>	37	<i>motion sick chw 25mg</i>	99
MOISTURE EYE DRO	129	MOTOFEN TAB 1-0.025	25
<i>mometasone furoate cream 0.1%</i>	144	MOTRIN CHILD SUS 100/5ML	2
<i>mometasone furoate nasal susp 50</i> <i>mcg/act</i>	136	<i>motrin ib tab 200mg</i>	2

MOTRIN INFAN DRO 50/1.25	2
MOVANTIK TAB 12.5MG	102
MOVANTIK TAB 25MG	102
<i>moxifloxacin hcl ophth soln 0.5% (base eq)</i> <i>(2 times daily)</i>	127
<i>moxifloxacin hcl ophth soln 0.5% (base</i> <i>equiv)</i>	127
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	21
MTERYTI TAB	123
MTERYTI TAB FOLIC 5	123
<i>mucus+chst liq 100/5ml</i>	80
<i>mucus-d tab 60-600mg</i>	79
<i>mucus relief tab 1200mg</i>	80
<i>mucus relief tab 400mg</i>	80
<i>mucus relief tab 600mg er</i>	80
<i>mucus relief tab dm cough</i>	79
MULTAQ TAB 400MG	40
MULTISTIX 10 TES SG	120
<i>multivit/fl chw 0.25mg</i>	126
<i>multivit/fl chw 0.5mg</i>	126
<i>multivit/fl chw 1mg</i>	126
<i>multi-vit/fl dro /fe 0.25</i>	126
<i>multivit/fl dro 0.25mg</i>	126
<i>multi-vit/fl dro 0.5mg/ml</i>	126
<i>multivitamin dro pediatrc</i>	122
<i>mupirocin oint 2%</i>	140
<i>muscle rub cre ultra st</i>	145
MYALEPT INJ 11.3MG	90
<i>mycophenolate mofetil cap 250 mg</i>	116
<i>mycophenolate mofetil for oral susp 200</i> <i>mg/ml</i>	116
<i>mycophenolate mofetil hcl for iv soln 500</i> <i>mg (base equiv)</i>	116
<i>mycophenolate mofetil tab 500 mg</i>	116
<i>mycophenolate sodium tab dr 180 mg</i> <i>(mycophenolic acid equiv)</i>	116
<i>mycophenolate sodium tab dr 360 mg</i> <i>(mycophenolic acid equiv)</i>	116
MYFORTIC TAB 180MG	116
MYFORTIC TAB 360MG	116
MYOFLEX CRE 10%	145
MYRBETRIQ SUS 8MG/ML	105
MYRBETRIQ TAB 25MG	105
MYRBETRIQ TAB 50MG	105

N

<i>nabumetone tab 500 mg</i>	2
<i>nabumetone tab 750 mg</i>	2
<i>nadolol tab 20 mg</i>	45
<i>nadolol tab 40 mg</i>	45
<i>nadolol tab 80 mg</i>	45
<i>nafrinse dro 0.125mg</i>	124
<i>naftifine hcl cream 1%</i>	141
<i>naftifine hcl cream 2%</i>	141
<i>nalbuphine hcl inj 10 mg/ml</i>	7
<i>nalbuphine hcl inj 20 mg/ml</i>	7
<i>naloxone hcl inj 0.4 mg/ml</i>	78
<i>naloxone hcl inj 4 mg/10ml</i>	78
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	78
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	78
<i>naloxone hcl soln prefilled syringe 2</i> <i>mg/2ml</i>	78
<i>naltrexone hcl tab 50 mg</i>	78
NANOVM T/F POW	122
NAPHCN-A SOL OP	130
<i>naproxen sod tab 220mg</i>	2
<i>naproxen tab 250 mg</i>	2
<i>naproxen tab 375 mg</i>	2
<i>naproxen tab 500 mg</i>	2
<i>naratriptan hcl tab 1 mg (base equiv)</i>	74
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	74
NASALCROM SPR 5.2/ACT	136
<i>nasal relief tab night</i>	79
<i>nasoflow spr 50mcg</i>	136
NATACYN SUS 5% OP	127
NATAZIA TAB	87
<i>nateglinide tab 120 mg</i>	84
<i>nateglinide tab 60 mg</i>	84
<i>naturl fiber pow 58.6%</i>	119
NAYZILAM SPR 5MG	67
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	45
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	45
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	45
<i>nebivolol hcl tab 5 mg (base equivalent)</i> ..	45
<i>necon tab 0.5/35</i>	87
<i>nefazodone hcl tab 100 mg</i>	58
<i>nefazodone hcl tab 150 mg</i>	58
<i>nefazodone hcl tab 200 mg</i>	58

<i>nefazodone hcl tab 250 mg</i>	58	<i>niacin tab er 500 mg (antihyperlipidemic)</i>	43
<i>nefazodone hcl tab 50 mg</i>	58	<i>niacin tab er 750 mg (antihyperlipidemic)</i>	43
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	127	NIACIN TR TAB 1000MG.....	148
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	127	<i>nicardipine hcl cap 20 mg</i>	47
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	127	<i>nicardipine hcl cap 30 mg</i>	47
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	127	<i>nicotine dis 7mg/24hr</i>	130
<i>neomycin-polymyxin-hc ophth susp</i>	127	<i>nicotine gum 4mg</i>	79
<i>neomycin-polymyxin-hc otic soln 1%</i>	148	<i>nicotine polacrilex gum 2 mg</i>	79
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	148	<i>nicotine polacrilex gum 4 mg</i>	79
<i>neomycin sulfate tab 500 mg</i>	12	<i>nicotine polacrilex lozenge 2 mg</i>	79
NEORAL CAP 100MG.....	116	<i>nicotine pol loz 4mg mint</i>	130
NEORAL CAP 25MG.....	116	<i>nicotine td patch 24hr 14 mg/24hr</i>	130
NEORAL SOL 100MG/ML.....	116	<i>nicotine td patch 24hr 21 mg/24hr</i>	130
<i>neosporin+pn oin relf max</i>	141	<i>nicotine td patch 24hr 7 mg/24hr</i>	130
NEOSPORIN CRE PLUS.....	141	NICOTROL INH.....	130
NEOSPORIN OIN ORIGINAL.....	141	NICOTROL NS SPR 10MG/ML.....	130
NEO-SYNEPHRI SPR 0.05%.....	138	<i>nifedipine tab er 24hr 30 mg</i>	47
NEO-SYNEPHRI SPR 0.5%.....	138	<i>nifedipine tab er 24hr 60 mg</i>	47
NEUPRO DIS 1MG/24HR.....	61	<i>nifedipine tab er 24hr 90 mg</i>	47
NEUPRO DIS 2MG/24HR.....	61	<i>nifedipine tab er 24hr osmotic release 30 mg</i>	47
NEUPRO DIS 3MG/24HR.....	61	<i>nifedipine tab er 24hr osmotic release 60 mg</i>	47
NEUPRO DIS 4MG/24HR.....	61	<i>nifedipine tab er 24hr osmotic release 90 mg</i>	47
NEUPRO DIS 6MG/24HR.....	61	<i>nikki tab 3-0.02mg</i>	87
NEUPRO DIS 8MG/24HR.....	61	<i>nilutamide tab 150 mg</i>	30
NEVANAC SUS 0.1% OP.....	128	<i>nimodipine cap 30 mg</i>	47
<i>nevirapine susp 50 mg/5ml</i>	15	NIPENT INJ 10MG.....	34
<i>nevirapine tab 200 mg</i>	15	<i>nisoldipine tab er 24hr 17 mg</i>	47
<i>nevirapine tab er 24hr 100 mg</i>	15	<i>nisoldipine tab er 24hr 20 mg</i>	47
<i>nevirapine tab er 24hr 400 mg</i>	15	<i>nisoldipine tab er 24hr 25.5 mg</i>	47
NEXIUM GRA 2.5MG DR.....	103	<i>nisoldipine tab er 24hr 30 mg</i>	47
NEXIUM GRA 5MG DR.....	103	<i>nisoldipine tab er 24hr 34 mg</i>	47
NEXPLANON IMP 68MG.....	87	<i>nisoldipine tab er 24hr 40 mg</i>	47
NEXTSTELLIS TAB 3-14.2MG.....	87	<i>nisoldipine tab er 24hr 8.5 mg</i>	47
<i>niacin cap er 250 mg</i>	148	<i>nitazoxanide tab 500 mg</i>	22
<i>niacin tab 100 mg</i>	148	<i>nitisinone cap 10 mg</i>	95
<i>niacin tab 250 mg</i>	148	<i>nitisinone cap 2 mg</i>	95
<i>niacin tab 500mg</i>	148	<i>nitisinone cap 5 mg</i>	95
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	43	NITRO-BID OIN 2%.....	50
		NITRO-DUR DIS 0.3MG/HR.....	50
		NITRO-DUR DIS 0.8MG/HR.....	50

<i>nitrofurantoin macrocrystalline cap 100 mg</i>	22	<i>norethindrone acetate-ethinyl estradiol tab</i> 0.5 mg-2.5 mcg	92
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	22	<i>norethindrone acetate tab 5 mg</i>	97
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	22	<i>norethindrone tab 0.35 mg</i>	88
<i>nitrofurantoin monohydrate</i>		<i>norgestimate & ethinyl estradiol tab 0.25</i> mg-35 mcg.....	88
<i>macrocrystalline cap 100 mg</i>	22	<i>norgestimate-eth estrad tab 0.18-25/0.215-</i> <i>25/0.25-25 mg-mcg</i>	88
<i>nitrofurantoin susp 25 mg/5ml</i>	22	<i>norgestimate-eth estrad tab 0.18-35/0.215-</i> <i>35/0.25-35 mg-mcg</i>	88
<i>nitroglycerin sl tab 0.3 mg</i>	50	NORPACE CAP 100MG CR.....	40
<i>nitroglycerin sl tab 0.4 mg</i>	50	NORPACE CAP 150MG CR.....	40
<i>nitroglycerin sl tab 0.6 mg</i>	50	<i>nortrel tab 0.5/35</i>	88
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	50	<i>nortrel tab 1/35</i>	88
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	50	<i>nortrel tab 7/7/7</i>	88
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	50	<i>nortriptyline hcl cap 10 mg</i>	58
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	50	<i>nortriptyline hcl cap 25 mg</i>	58
<i>nitroglycerin tl soln 0.4 mg/spray (400</i> <i>mcg/spray)</i>	50	<i>nortriptyline hcl cap 50 mg</i>	58
NIVESTYM INJ 300/0.5	108	<i>nortriptyline hcl cap 75 mg</i>	59
NIVESTYM INJ 300MCG.....	108	<i>nortriptyline hcl soln 10 mg/5ml</i>	59
NIVESTYM INJ 480/0.8.....	108	NORVIR POW 100MG.....	15
NIVESTYM INJ 480MCG.....	108	NORVIR SOL 80MG/ML.....	15
<i>nizatidine cap 150 mg</i>	101	NOVAVAX VAC INJ COVID-19	118
<i>nizatidine cap 300 mg</i>	101	NOVOLIN INJ 70/30.....	83
NIZORAL A-D SHA 1%	141	NOVOLIN INJ 70/30 FP	83
<i>non-aspirin chw 80mg</i>	10	NOVOLIN N INJ 100 UNIT	83
<i>nora-be tab 0.35mg</i>	87	NOVOLIN N INJ U-100	83
NORDIPEN 5 MIS DEVICE	120	NOVOLIN R INJ 100 UNIT	83
NORDIPEN DEL MIS SYSTEM.....	120	NOVOLIN R INJ U-100.....	83
NORDITROPIN INJ 10/1.5ML.....	95	NOVOLOG INJ 100/ML	83
NORDITROPIN INJ 15/1.5ML.....	95	NOVOLOG INJ FLEXPEN	83
NORDITROPIN INJ 30/3ML	96	NOVOLOG INJ PENFILL.....	83
NORDITROPIN INJ 5/1.5ML	95	NOVOLOG MIX INJ 70/30	83
<i>norethindrone & ethinyl estradiol-fe chew</i> <i>tab 0.4 mg-35 mcg</i>	88	NOVOLOG MIX INJ FLEXPEN	83
<i>norethindrone & ethinyl estradiol-fe chew</i> <i>tab 0.8 mg-25 mcg</i>	88	NUBEQA TAB 300MG	30
<i>norethindrone ace & ethinyl estradiol tab 1</i> <i>mg-20 mcg</i>	88	NUCYNTA ER TAB 100MG	7
<i>norethindrone ace-eth estradiol-fe chew</i> <i>tab 1 mg-20 mcg (24)</i>	88	NUCYNTA ER TAB 150MG	7
<i>norethindrone ace-ethinyl estradiol-fe cap 1</i> <i>mg-20 mcg (24)</i>	88	NUCYNTA ER TAB 200MG	7
		NUCYNTA ER TAB 250MG.....	7
		NUCYNTA ER TAB 50MG.....	7
		NUCYNTA TAB 100MG.....	7
		NUCYNTA TAB 50MG.....	7
		NUCYNTA TAB 75MG.....	7
		NUDEXTA CAP 20-10MG.....	78

<i>nu-iron 150 cap 150mg</i>	110	<i>ofloxacin tab 300 mg</i>	21
NULOJIX INJ 250MG	116	<i>ofloxacin tab 400 mg</i>	21
NUPREP 5% SOL POV-IODI	139	<i>olanzapine for im inj 10 mg</i>	63
NUTRICION TAB PORVIDA	123	<i>olanzapine orally disintegrating tab 10 mg</i>	63
NUTRIENTS TAB PRENATAL	123	<i>olanzapine orally disintegrating tab 15 mg</i>	63
<i>nyamyc pow 100000</i>	141	<i>olanzapine orally disintegrating tab 20 mg</i>	63
<i>nylia tab 1/35</i>	88	<i>olanzapine orally disintegrating tab 5 mg</i> ..	63
<i>nystatin cream 100000 unit/gm</i>	141	<i>olanzapine tab 10 mg</i>	63
<i>nystatin oint 100000 unit/gm</i>	141	<i>olanzapine tab 15 mg</i>	63
<i>nystatin susp 100000 unit/ml</i>	147	<i>olanzapine tab 2.5 mg</i>	63
<i>nystatin tab 500000 unit</i>	13	<i>olanzapine tab 20 mg</i>	64
<i>nystatin topical powder 100000 unit/gm</i> ..	141	<i>olanzapine tab 5 mg</i>	63
<i>nystatin-triamcinolone cream 100000-0.1</i> <i>unit/gm-%</i>	141	<i>olanzapine tab 7.5 mg</i>	63
<i>nystatin-triamcinolone oint 100000-0.1</i> <i>unit/gm-%</i>	141	<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 20-5-12.5 mg</i> ..	39
<i>nystop pow 100000</i>	141	<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-12.5 mg</i> 39	
NYVEPRIA INJ 6/0.6ML	108	<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-25 mg</i> ...39	
○		<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-12.5 mg</i> ..39	
OBTREX DHA PAK	123	<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-25 mg</i> ....39	
OBTREX TAB	123	<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 20-12.5 mg</i>.....39	
<i>ocella tab 3-0.03mg</i>	88	<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-12.5 mg</i>.....39	
<i>octreotide acetate inj 1000 mcg/ml (1</i> <i>mg/ml)</i>	81	<i>olmesartan medoxomil tab 20 mg</i>	40
<i>octreotide acetate inj 100 mcg/ml (0.1</i> <i>mg/ml)</i>	81	<i>olmesartan medoxomil tab 40 mg</i>	40
<i>octreotide acetate inj 200 mcg/ml (0.2</i> <i>mg/ml)</i>	81	<i>olmesartan medoxomil tab 5 mg</i>	40
<i>octreotide acetate inj 500 mcg/ml (0.5</i> <i>mg/ml)</i>	81	<i>olopatadine hcl nasal soln 0.6%</i>	133
<i>octreotide acetate inj 50 mcg/ml (0.05</i> <i>mg/ml)</i>	81	<i>olopatadine hcl ophth soln 0.1% (base</i> <i>equivalent)</i>	128
<i>octreotide acetate subcutaneous soln pref</i> <i> syr 100 mcg/ml</i>	81	<i>olopatadine hcl ophth soln 0.2% (base</i> <i>equivalent)</i>	128
<i>octreotide acetate subcutaneous soln pref</i> <i> syr 500 mcg/ml</i>	81	<i>omega-3-acid ethyl esters cap 1 gm</i>	43
<i>octreotide acetate subcutaneous soln pref</i> <i> syr 50 mcg/ml</i>	81	<i>omega-3 fish cap 1200mg</i>	125
ODEFSEY TAB	17	<i>omeprazole cap delayed release 10 mg</i> ..	103
ODOMZO CAP 200MG	34	<i>omeprazole cap delayed release 20 mg</i> .	103
OFEV CAP 100MG	136		
OFEV CAP 150MG	136		
<i>ofloxacin ophth soln 0.3%</i>	127		
<i>ofloxacin otic soln 0.3%</i>	148		

<i>omeprazole cap delayed release 40 mg</i>	103	ORENITRAM TAB MONTH 1.....	51
<i>omeprazole delayed release tab 20 mg</i>	103	ORENITRAM TAB MONTH 2.....	51
<i>omeprazole-sodium bicarbonate powd</i>		ORENITRAM TAB MONTH 3.....	51
<i>pack for susp 20-1680 mg</i>	103	ORFADIN CAP 20MG.....	95
<i>omeprazole-sodium bicarbonate powd</i>		ORFADIN SUS 4MG/ML.....	95
<i>pack for susp 40-1680 mg</i>	103	ORLISSA TAB 150MG.....	90
OMNARIS SPR.....	136	ORLISSA TAB 200MG.....	90
OMNIFLEX DPR.....	120	ORKAMBI GRA 100-125.....	135
OMNIPOD 5 G6 KIT INTRO.....	89	ORKAMBI GRA 150-188.....	135
OMNIPOD 5 G6 MIS PODS.....	89	ORKAMBI GRA 75-94MG.....	135
OMNIPOD DASH KIT INTRO.....	89	ORKAMBI TAB 100-125.....	135
OMNIPOD DASH KIT PDM.....	89	ORKAMBI TAB 200-125.....	135
OMNIPOD DASH MIS PODS.....	89	<i>orphenadrine citrate inj 30 mg/ml</i>	76
OMNIPOD MIS CLASSIC.....	89	<i>orphenadrine citrate tab er 12hr 100 mg</i> ...	76
OMNIPOD PDM KIT CLASSIC.....	89	<i>os-cal + d3 tab 500-200</i>	121
ONCASPAR INJ 750/ML.....	35	<i>oseltamivir phosphate cap 30 mg (base</i>	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>		<i>equiv)</i>	18
.....	99	<i>oseltamivir phosphate cap 45 mg (base</i>	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i> ..	99	<i>equiv)</i>	18
<i>ondansetron hcl inj soln pref syr 4 mg/2ml</i>		<i>oseltamivir phosphate cap 75 mg (base</i>	
.....	99	<i>equiv)</i>	18
<i>ondansetron hcl oral soln 4 mg/5ml</i>	100	<i>oseltamivir phosphate for susp 6 mg/ml</i>	
<i>ondansetron hcl tab 24 mg</i>	100	<i>(base equiv)</i>	18
<i>ondansetron hcl tab 4 mg</i>	100	<i>osmitrol inj 10%</i>	49
<i>ondansetron hcl tab 8 mg</i>	100	<i>osmitrol inj 15%</i>	49
<i>ondansetron orally disintegrating tab 4 mg</i>		OSMOPREP TAB 1.5GM.....	119
.....	100	OSPHENA TAB 60MG.....	96
<i>ondansetron orally disintegrating tab 8 mg</i>		OTEZLA TAB 10/20/30.....	113
.....	100	OTEZLA TAB 30MG.....	113
ONE A DAY CAP PRENATAL.....	123	OVIDREL INJ.....	93
ONE A DAY MIS PRENATAL.....	123	<i>oxaliplatin for iv inj 100 mg</i>	35
ONGENTYS CAP 25MG.....	61	<i>oxaliplatin for iv inj 50 mg</i>	35
ONGENTYS CAP 50MG.....	61	<i>oxaliplatin iv soln 100 mg/20ml</i>	35
OPCON-A SOL OP.....	130	<i>oxaliplatin iv soln 50 mg/10ml</i>	35
OPSUMIT TAB 10MG.....	51	<i>oxandrolone tab 10 mg</i>	81
ORAL GLUCOSE REPLACEMENT.....	95	<i>oxandrolone tab 2.5 mg</i>	81
<i>oralone dent pst 0.1%</i>	147	<i>oxaprozin tab 600 mg</i>	2
ORAVIG TAB 50MG.....	147	<i>oxazepam cap 10 mg</i>	53
<i>orazinc cap 220mg</i>	126	<i>oxazepam cap 15 mg</i>	53
ORENITRAM TAB 0.125MG.....	51	<i>oxazepam cap 30 mg</i>	53
ORENITRAM TAB 0.25MG.....	51	<i>oxcarbazepine susp 300 mg/5ml (60</i>	
ORENITRAM TAB 1MG.....	51	<i>mg/ml)</i>	67
ORENITRAM TAB 2.5MG.....	51	<i>oxcarbazepine tab 150 mg</i>	67
ORENITRAM TAB 5MG.....	51	<i>oxcarbazepine tab 300 mg</i>	67

oxcarbazepine tab 600 mg.....	67	pacerone tab 200mg.....	40
oxiconazole nitrate cream 1%	141	paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)	
oxybutynin chloride solution 5 mg/5ml...105		.....	27
oxybutynin chloride tab 5 mg	105	paclitaxel iv conc 150 mg/25ml (6 mg/ml)	
oxybutynin chloride tab er 24hr 10 mg ....105		.....	27
oxybutynin chloride tab er 24hr 15 mg ....105		paclitaxel iv conc 300 mg/50ml (6 mg/ml)	
oxybutynin chloride tab er 24hr 5 mg.....105		.....	28
oxycodone hcl cap 5 mg	7	paclitaxel iv conc 30 mg/5ml (6 mg/ml)...27	
oxycodone hcl conc 100 mg/5ml (20		paclitaxel protein-bound particles for iv	
mg/ml)	7	susp 100 mg	28
oxycodone hcl soln 5 mg/5ml	7	pain/fever sup 120mg	10
oxycodone hcl tab 10 mg	8	paliperidone tab er 24hr 1.5 mg	64
oxycodone hcl tab 15 mg.....	8	paliperidone tab er 24hr 3 mg	64
oxycodone hcl tab 20 mg.....	8	paliperidone tab er 24hr 6 mg	64
oxycodone hcl tab 30 mg.....	8	paliperidone tab er 24hr 9 mg	64
oxycodone hcl tab 5 mg	7	pamidronate disodium iv soln 3 mg/ml ....85	
oxycodone hcl tab er 12hr deter 10 mg	8	PANOXYL-4 LIQ CREM WSH	140
oxycodone hcl tab er 12hr deter 20 mg.....8		panoxyl wash liq 10%.....	140
oxycodone hcl tab er 12hr deter 40 mg.....8		pantoprazole sodium ec tab 20 mg (base	
oxycodone hcl tab er 12hr deter 80 mg.....8		equiv).....	103
oxycodone w/ acetaminophen tab 10-325		pantoprazole sodium ec tab 40 mg (base	
mg.....	8	equiv).....	103
oxycodone w/ acetaminophen tab 2.5-325		PARAGARD IUD T380A.....	88
mg.....	8	paraplatin inj 1000mg	35
oxycodone w/ acetaminophen tab 5-325		paricalcitol cap 1 mcg.....	126
mg.....	8	paricalcitol cap 2 mcg	126
oxycodone w/ acetaminophen tab 7.5-325		paricalcitol cap 4 mcg	126
mg.....	8	paromomycin sulfate cap 250 mg	12
oxymorphone hcl tab 10 mg	8	paroxetine hcl tab 10 mg	59
oxymorphone hcl tab 5 mg	8	paroxetine hcl tab 20 mg	59
oxymorphone hcl tab er 12hr 10 mg.....8		paroxetine hcl tab 30 mg	59
oxymorphone hcl tab er 12hr 15 mg	9	paroxetine hcl tab 40 mg	59
oxymorphone hcl tab er 12hr 20 mg	9	paroxetine hcl tab er 24hr 12.5 mg	59
oxymorphone hcl tab er 12hr 30 mg	9	paroxetine hcl tab er 24hr 25 mg	59
oxymorphone hcl tab er 12hr 40 mg	9	paroxetine hcl tab er 24hr 37.5 mg.....59	
oxymorphone hcl tab er 12hr 5 mg	8	PASER GRA 4GM	17
oxymorphone hcl tab er 12hr 7.5 mg	8	PAXLOVID TAB 150-100.....	36
oyst shell/d tab 500mg.....	122	PAXLOVID TAB 300-100.....	36
OZEMPIC INJ 2/1.5ML.....	82	PEDIATRIC RESPIRATORY MASK ....120, 137	
OZEMPIC INJ 2MG/3ML.....	83	pedi-boro pow soak pak	147
OZEMPIC INJ 4MG/3ML.....	83	peg 3350-kcl-na bicarb-nacl-na sulfate for	
OZEMPIC INJ 8MG/3ML.....	83	soln 236 gm	102
P		peg 3350-kcl-nacl-na sulfate-na ascorbate-	
pacerone tab 100mg	40	c for soln 100 gm.....	102

PEGASYS INJ.....	21	<i>pfizerpen inj 20000000.....</i>	24
PEGASYS INJ 180MCG/ML.....	21	PHAZYME CAP 180MG.....	100
PEG-PREP KIT.....	102	<i>phazyme chw 125mg.....</i>	100
<i>pemetrexed disodium for iv soln 100 mg</i>		<i>phenazopyridine tab 95mg.....</i>	105
<i>(base equiv).....</i>	27	<i>phenelzine sulfate tab 15 mg.....</i>	59
<i>pemetrexed disodium for iv soln 500 mg</i>		<i>phenobarbital elixir 20 mg/5ml.....</i>	67
<i>(base equiv).....</i>	27	<i>phenobarbital tab 100 mg.....</i>	68
<i>peniclovir cream 1%.....</i>	145	<i>phenobarbital tab 15 mg.....</i>	67
<i>penicillamine tab 250 mg.....</i>	85	<i>phenobarbital tab 16.2 mg.....</i>	67
<i>penicillin g potassium for inj 20000000 unit</i>		<i>phenobarbital tab 30 mg.....</i>	67
.....	24	<i>phenobarbital tab 32.4 mg.....</i>	67
<i>penicillin g potassium for inj 5000000 unit</i>		<i>phenobarbital tab 60 mg.....</i>	67
.....	24	<i>phenobarbital tab 64.8 mg.....</i>	67
<i>penicillin g sodium for inj 5000000 unit ...</i>	24	<i>phenobarbital tab 97.2 mg.....</i>	68
<i>penicillin v potassium for soln 125 mg/5ml</i>		<i>phenoxybenzamine hcl cap 10 mg.....</i>	50
.....	24	<i>phenylephrine hcl ophth soln 10%.....</i>	130
<i>penicillin v potassium for soln 250 mg/5ml</i>		<i>phenylephrine hcl ophth soln 2.5%.....</i>	130
.....	24	<i>phenytoin chw 50mg.....</i>	68
<i>penicillin v potassium tab 250 mg.....</i>	24	<i>phenytoin sodium extended cap 100 mg.....</i>	68
<i>penicillin v potassium tab 500 mg.....</i>	24	<i>phenytoin sodium extended cap 200 mg.....</i>	68
PENTACEL INJ.....	118	<i>phenytoin sodium extended cap 300 mg.....</i>	68
<i>pentamidine isethionate for inj soln 300 mg</i>		<i>phenytoin sodium inj 50 mg/ml.....</i>	68
.....	22	<i>phenytoin susp 125 mg/5ml.....</i>	68
<i>pentamidine isethionate for nebulization</i>		PHEXXI GEL.....	104
<i>soln 300 mg.....</i>	23	PHOS FLUR SOL 0.044%.....	147
<i>pentoxifylline tab er 400 mg.....</i>	108	PHOSLYRA SOL.....	96
<i>perindopril erbumine tab 2 mg.....</i>	37	PHOS-NAK POW CONCENTR.....	124
<i>perindopril erbumine tab 4 mg.....</i>	37	PHOSPHOLINE SOL 0.125%OP.....	129
<i>perindopril erbumine tab 8 mg.....</i>	37	PHOTOFRIN INJ 75MG.....	35
<i>perio gard sol 0.12%.....</i>	147	<i>physiolyte sol.....</i>	130
<i>permethrin cream 5%.....</i>	146	<i>physiosol sol irrigat.....</i>	130
PEROXYL SOL.....	147	<i>phytonadione tab 5 mg.....</i>	126
<i>perphenazine-amitriptyline tab 2-10 mg... </i>	78	<i>pilocarpine hcl ophth soln 1%.....</i>	129
<i>perphenazine-amitriptyline tab 2-25 mg .. </i>	78	<i>pilocarpine hcl tab 5 mg.....</i>	147
<i>perphenazine-amitriptyline tab 4-10 mg... </i>	78	<i>pilocarpine hcl tab 7.5 mg.....</i>	147
<i>perphenazine-amitriptyline tab 4-25 mg .. </i>	78	<i>pimecrolimus cream 1%.....</i>	142
<i>perphenazine-amitriptyline tab 4-50 mg.. </i>	78	<i>pimozide tab 1 mg.....</i>	78
<i>perphenazine tab 16 mg.....</i>	64	<i>pimozide tab 2 mg.....</i>	78
<i>perphenazine tab 2 mg.....</i>	64	<i>pindolol tab 10 mg.....</i>	45
<i>perphenazine tab 4 mg.....</i>	64	<i>pindolol tab 5 mg.....</i>	45
<i>perphenazine tab 8 mg.....</i>	64	<i>pinworm med sus 144mg/ml.....</i>	12
PERRY PRENAT CAP.....	123	<i>pioglitazone hcl-glimepiride tab 30-2 mg.....</i>	84
PFIZER 5-11Y INJ 2023-24.....	118	<i>pioglitazone hcl-glimepiride tab 30-4 mg.....</i>	84
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<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	84	<i>potassium chloride microencapsulated crys er tab 10 meq</i>	124
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	84	<i>potassium chloride microencapsulated crys er tab 20 meq</i>	124
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	84	<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	124
<i>pioglitazone hcl tab 30 mg (base equiv)</i> ...	84	<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	124
<i>pioglitazone hcl tab 45 mg (base equiv)</i> ...	84	<i>potassium chloride tab er 10 meq</i>	124
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	24	<i>potassium chloride tab er 20 meq (1500 mg)</i>	124
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	24	<i>potassium chloride tab er 8 meq (600 mg)</i>	124
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	24	<i>potassium citrate tab er 10 meq (1080 mg)</i>	105
<i>pirfenidone cap 267 mg</i>	136	<i>potassium citrate tab er 15 meq (1620 mg)</i>	105
<i>pirfenidone tab 267 mg</i>	137	<i>potassium citrate tab er 5 meq (540 mg)</i> 105	
<i>pirfenidone tab 801 mg</i>	137	<i>povidone-iodine oint 10%</i>	139
<i>piroxicam cap 10 mg</i>	2	<i>povidone-iodine soln 10%</i>	139
<i>piroxicam cap 20 mg</i>	2	POVIDONE-IOD SOL 0.75%	139
PLENVU SOL	119	POVIDONE-IOD SOL 1%	139
<i>pnv-dha cap</i>	125	<i>povidone-iod sol 7.5%</i>	139
<i>pnv-select tab</i>	125	PRADAXA CAP 110MG	107
<i>podofilox soln 0.5%</i>	145	PRADAXA CAP 75MG	107
POLIVY INJ 140MG	28	PRALUENT INJ 150MG/ML	44
POLIVY INJ 30MG	28	PRALUENT INJ 75MG/ML	44
<i>polycin oin op</i>	127	<i>pramipexole dihydrochloride tab 0.125 mg</i>	61
<i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>	102	<i>pramipexole dihydrochloride tab 0.25 mg</i> 61	
<i>polymyxin b sulfate for inj 500000 unit</i>	23	<i>pramipexole dihydrochloride tab 0.5 mg</i> ..61	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	128	<i>pramipexole dihydrochloride tab 0.75 mg</i> 61	
POLYSPORIN OIN	141	<i>pramipexole dihydrochloride tab 1.5 mg</i> ...61	
POLY-VI-SOL SOL 50MG/ML	122	<i>pramipexole dihydrochloride tab 1 mg</i>	61
POLY-VI-SOL SOL IRON	122	<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	61
POMALYST CAP 1MG	28	<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	61
POMALYST CAP 2MG	28	<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	61
POMALYST CAP 3MG	28	<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	61
POMALYST CAP 4MG	28	<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	61
<i>portia-28 tab</i>	88		
<i>posaconazole susp 40 mg/ml</i>	13		
<i>posaconazole tab delayed release 100 mg</i>	13		
<i>potassium chloride cap er 10 meq</i>	124		
<i>potassium chloride cap er 8 meq</i>	124		
<i>potassium chloride inj 2 meq/ml</i>	125		

<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	61	<i>pregabalin cap 150 mg</i>	68
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	62	<i>pregabalin cap 200 mg</i>	68
<i>prasugrel hcl tab 10 mg (base equiv)</i>	109	<i>pregabalin cap 225 mg</i>	68
<i>prasugrel hcl tab 5 mg (base equiv)</i>	109	<i>pregabalin cap 25 mg</i>	68
<i>pravastatin sodium tab 10 mg</i>	42	<i>pregabalin cap 300 mg</i>	68
<i>pravastatin sodium tab 20 mg</i>	42	<i>pregabalin cap 50 mg</i>	68
<i>pravastatin sodium tab 40 mg</i>	42	<i>pregabalin cap 75 mg</i>	68
<i>pravastatin sodium tab 80 mg</i>	42	<i>pregabalin soln 20 mg/ml</i>	68
<i>praziquantel tab 600 mg</i>	12	PREHEVBRIO SUS 10MCG/ML	118
<i>prazosin hcl cap 1 mg</i>	38	PREMARIN TAB 0.3MG	92
<i>prazosin hcl cap 2 mg</i>	38	PREMARIN TAB 0.45MG	92
<i>prazosin hcl cap 5 mg</i>	38	PREMARIN TAB 0.625MG	92
PRED-G SUS OP	127	PREMARIN TAB 0.9MG	92
<i>prednicarbate oint 0.1%</i>	144	PREMARIN TAB 1.25MG	93
<i>prednisolone acetate ophth susp 1%</i>	128	PREMARIN VAG CRE 0.625MG	93
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	94	PRENATAL+DHA MIS	123
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	94	<i>prenatal 19 chw tab</i>	125
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	94	PRENATAL 1 CAP	123
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	94	PRENATAL CAP FORMULA	123
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	94	PRENATAL CAP OMEGA-3	123
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	94	PRENATAL DHA PAK MULTI	123
<i>prednisolone soln 15 mg/5ml</i>	94	PRENATAL FRM TAB A-FREE	123
PREDNISON CON 5MG/ML	94	PRENATAL GUM CHW 0.4-32.5	123
<i>prednisone oral soln 5 mg/5ml</i>	95	PRENATAL MUL CAP +DHA	123
<i>prednisone tab 10 mg</i>	95	PRENATAL MUL CAP DHA	123
<i>prednisone tab 1 mg</i>	95	PRENATAL MULTIVITAMINS	123
<i>prednisone tab 2.5 mg</i>	95	PRENATAL TAB	123
<i>prednisone tab 20 mg</i>	95	PRENATAL TAB 27-0.8MG	123
<i>prednisone tab 50 mg</i>	95	PRENATAL TAB COMPLETE	123
<i>prednisone tab 5 mg</i>	95	PRENATAL TAB FORMULA	123
<i>prednisone tab therapy pack 10 mg (21)</i>	95	PRENATL MULT CAP + DHA	123
<i>prednisone tab therapy pack 10 mg (48)</i>	95	<i>preparation pad h</i>	147
<i>prednisone tab therapy pack 5 mg (21)</i>	95	<i>prevalite pow 4gm</i>	41
<i>prednisone tab therapy pack 5 mg (48)</i>	95	PREVNAR 20 INJ	118
PRED SOD PHO SOL 1% OP	128	PREZCOBIX TAB 800-150	17
<i>pregabalin cap 100 mg</i>	68	PREZISTA SUS 100MG/ML	15
		PREZISTA TAB 150MG	15
		PREZISTA TAB 600MG	15
		PREZISTA TAB 75MG	15
		PREZISTA TAB 800MG	15
		PRIFTIN TAB 150MG	17
		PRIOSEC OTC TAB 20MG	103
		<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	13

<i>primidone tab 250 mg</i>	68	<i>propranolol hcl cap er 24hr 160 mg</i>	45
<i>primidone tab 50 mg</i>	68	<i>propranolol hcl cap er 24hr 60 mg</i>	45
<i>PRIORIX INJ</i>	118	<i>propranolol hcl cap er 24hr 80 mg</i>	45
<i>probenecid tab 500 mg</i>	1	<i>propranolol hcl oral soln 20 mg/5ml</i>	45
<i>procainamide hcl inj 100 mg/ml</i>	40	<i>propranolol hcl oral soln 40 mg/5ml</i>	45
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	100	<i>propranolol hcl tab 10 mg</i>	45
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	100	<i>propranolol hcl tab 20 mg</i>	45
<i>prochlorperazine suppos 25 mg</i>	100	<i>propranolol hcl tab 40 mg</i>	45
<i>proctozone cre -hc 2.5%</i>	104	<i>propranolol hcl tab 60 mg</i>	45
<i>progesterone cap 100 mg</i>	97	<i>propranolol hcl tab 80 mg</i>	45
<i>progesterone cap 200 mg</i>	97	<i>propylthiouracil tab 50 mg</i>	97
<i>PROGRAF CAP 0.5MG</i>	116	<i>PROQUAD INJ</i>	118
<i>PROGRAF CAP 1MG</i>	116	<i>protriptyline hcl tab 10 mg</i>	59
<i>PROGRAF CAP 5MG</i>	116	<i>protriptyline hcl tab 5 mg</i>	59
<i>PROGRAF GRA 0.2MG</i>	116	<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	79
<i>PROGRAF GRA 1MG</i>	116	<i>pseudoephedrine hcl tab 60 mg</i>	138
<i>PROGRAF INJ 5MG/ML</i>	116	<i>PULMICORT INH 180MCG</i>	137
<i>PROLASTIN-C INJ 1000MG</i>	131	<i>PULMICORT INH 90MCG</i>	137
<i>PROLIA INJ 60MG/ML</i>	96	<i>pyrazinamide tab 500 mg</i>	17
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	134	<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	75
<i>promethazine hcl inj 25 mg/ml</i>	100	<i>pyridostigmine bromide tab 60 mg</i>	75
<i>promethazine hcl inj 50 mg/ml</i>	100	<i>pyridostigmine bromide tab er 180 mg</i>	75
<i>promethazine hcl suppos 12.5 mg</i>	100	<i>pyrimethamine tab 25 mg</i>	23
<i>promethazine hcl suppos 25 mg</i>	100	Q	
<i>promethazine hcl syrup 6.25 mg/5ml</i>	100	<i>QUADRACEL INJ</i>	118
<i>promethazine hcl tab 12.5 mg</i>	100	<i>QUADRACEL INJ 0.5ML</i>	118
<i>promethazine hcl tab 25 mg</i>	100	<i>quenalin syp 12.5/5ml</i>	133
<i>promethazine hcl tab 50 mg</i>	100	<i>quetiapine fumarate tab 100 mg</i>	64
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	134	<i>quetiapine fumarate tab 200 mg</i>	64
<i>promethegan sup 50mg</i>	100	<i>quetiapine fumarate tab 25 mg</i>	64
<i>prometh vc/ syp codeine</i>	134	<i>quetiapine fumarate tab 300 mg</i>	64
<i>prometh vc syp 6.25-5/5</i>	134	<i>quetiapine fumarate tab 400 mg</i>	64
<i>propafenone hcl cap er 12hr 225 mg</i>	40	<i>quetiapine fumarate tab 50 mg</i>	64
<i>propafenone hcl cap er 12hr 325 mg</i>	40	<i>quetiapine fumarate tab er 24hr 150 mg</i> ..	64
<i>propafenone hcl cap er 12hr 425 mg</i>	40	<i>quetiapine fumarate tab er 24hr 200 mg</i> ..	64
<i>propafenone hcl tab 150 mg</i>	40	<i>quetiapine fumarate tab er 24hr 300 mg</i> ..	64
<i>propafenone hcl tab 225 mg</i>	40	<i>quetiapine fumarate tab er 24hr 400 mg</i> .	64
<i>propafenone hcl tab 300 mg</i>	40	<i>quetiapine fumarate tab er 24hr 50 mg</i>	64
<i>proparacaine hcl ophth soln 0.5%</i>	130	<i>quinapril hcl tab 10 mg</i>	37
<i>propranolol hcl cap er 24hr 120 mg</i>	45	<i>quinapril hcl tab 20 mg</i>	37
		<i>quinapril hcl tab 40 mg</i>	37
		<i>quinapril hcl tab 5 mg</i>	37

<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	37	REMODULIN INJ 1MG/ML.....	51
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	37	REMODULIN INJ 2.5MG/ML.....	51
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	37	REMODULIN INJ 5MG/ML.....	51
<i>quinine sulfate cap 324 mg</i>	13	<i>reno cap</i>	122
QULIPTA TAB 10MG.....	74	<i>repaglinide tab 0.5 mg</i>	84
QULIPTA TAB 30MG.....	74	<i>repaglinide tab 1 mg</i>	84
QULIPTA TAB 60MG.....	74	<i>repaglinide tab 2 mg</i>	84
QVAR REDIIHA AER 80MCG.....	137	RESTASIS EMU 0.05% OP.....	129
QVAR REDIIHAL AER 40MCG.....	137	RESTASIS MUL EMU 0.05% OP.....	130
R		RETACRIT INJ 10000UNT.....	108
<i>rabeprazole sodium ec tab 20 mg</i>	103	RETACRIT INJ 20000UNI.....	108
<i>raloxifene hcl tab 60 mg</i>	96	RETACRIT INJ 2000UNIT.....	108
<i>ramelteon tab 8 mg</i>	73	RETACRIT INJ 3000UNIT.....	108
<i>ramipril cap 1.25 mg</i>	37	RETACRIT INJ 40000UNT.....	108
<i>ramipril cap 10 mg</i>	38	RETACRIT INJ 4000UNIT.....	108
<i>ramipril cap 2.5 mg</i>	37	RETROVIR INJ 10MG/ML.....	15
<i>ramipril cap 5 mg</i>	38	REVLIMID CAP 10MG.....	28
<i>ranolazine tab er 12hr 1000 mg</i>	50	REVLIMID CAP 15MG.....	29
<i>ranolazine tab er 12hr 500 mg</i>	50	REVLIMID CAP 2.5MG.....	28
RAPAMUNE SOL 1MG/ML.....	116	REVLIMID CAP 20MG.....	29
RAPAMUNE TAB 0.5MG.....	116	REVLIMID CAP 25MG.....	29
RAPAMUNE TAB 1MG.....	116	REVLIMID CAP 5MG.....	28
RAPAMUNE TAB 2MG.....	116	REYATAZ POW 50MG.....	15
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	62	<i>rhinocort sus allergy</i>	136
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	62	<i>ribavirin cap 200 mg</i>	21
<i>reclipsen tab</i>	88	<i>ribavirin for inhal soln 6 gm</i>	18
RECOMBIVA HB INJ 10MCG/ML.....	118	<i>ribavirin tab 200 mg</i>	21
RECOMBIVA HB INJ 5MCG/0.5.....	118	<i>rifabutin cap 150 mg</i>	17
RECTIV OIN 0.4%.....	145	<i>rifampin cap 150 mg</i>	17
REFRESH LIQU DRO 1% OP.....	129	<i>rifampin cap 300 mg</i>	17
REFRESH OPTI DRO 0.5-0.9%.....	129	<i>rifampin for inj 600 mg</i>	17
<i>refresh p.m. oin op</i>	129	<i>riluzole tab 50 mg</i>	75
REFRESH TEAR DRO 0.5% OP.....	129	<i>rimantadine hydrochloride tab 100 mg</i>	18
<i>regenecare gel ha 2%</i>	145	RINVOQ TAB 15MG ER.....	113
REGRANEX GEL 0.01%.....	146	RINVOQ TAB 30MG ER.....	113
<i>rehydralyte sol</i>	124	RINVOQ TAB 45MG ER.....	113
RELENZA MIS DISKHALE.....	18	<i>risedronate sodium tab 150 mg</i>	85
<i>relief eye sol drops</i>	130	<i>risedronate sodium tab 30 mg</i>	85
RELION KETON TES.....	120	<i>risedronate sodium tab 35 mg</i>	85
REMODULIN INJ 10MG/ML.....	51	<i>risedronate sodium tab 5 mg</i>	85
		<i>risedronate sodium tab delayed release 35 mg</i>	85
		<i>risperidone orally disintegrating tab 0.25 mg</i>	64

<i>risperidone orally disintegrating tab 0.5 mg</i>	64	<i>ropinirole hydrochloride tab 0.25 mg</i>	62
.....	64	<i>ropinirole hydrochloride tab 0.5 mg</i>	62
<i>risperidone orally disintegrating tab 1 mg</i>	64	<i>ropinirole hydrochloride tab 1 mg</i>	62
<i>risperidone orally disintegrating tab 2 mg</i>	64	<i>ropinirole hydrochloride tab 2 mg</i>	62
<i>risperidone orally disintegrating tab 3 mg</i>	64	<i>ropinirole hydrochloride tab 3 mg</i>	62
<i>risperidone orally disintegrating tab 4 mg</i>	64	<i>ropinirole hydrochloride tab 4 mg</i>	62
<i>risperidone soln 1 mg/ml</i>	64	<i>ropinirole hydrochloride tab 5 mg</i>	62
<i>risperidone tab 0.25 mg</i>	64	<i>rosuvastatin calcium tab 10 mg</i>	42
<i>risperidone tab 0.5 mg</i>	64	<i>rosuvastatin calcium tab 20 mg</i>	43
<i>risperidone tab 1 mg</i>	64	<i>rosuvastatin calcium tab 40 mg</i>	43
<i>risperidone tab 2 mg</i>	64	<i>rosuvastatin calcium tab 5 mg</i>	42
<i>risperidone tab 3 mg</i>	64	ROTARIX SUS	118
<i>risperidone tab 4 mg</i>	64	ROTATEQ SOL	118
<i>ritonavir tab 100 mg</i>	15	<i>rufinamide susp 40 mg/ml</i>	68
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	54	<i>rufinamide tab 200 mg</i>	68
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	54	<i>rufinamide tab 400 mg</i>	68
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	54	<i>ryclora sol 2mg/5ml</i>	133
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	54	RYDAPT CAP 25MG	33
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	54	S	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	54	<i>salactic fil sol 17%</i>	145
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	54	SANCUSO DIS 3.1MG	100
<i>rivelsa tab</i>	88	SANDIMMUNE CAP 100MG	117
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	74	SANDIMMUNE CAP 25MG	116
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	74	SANDIMMUNE INJ 50MG/ML	117
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	74	SANDIMMUNE SOL 100MG/ML	117
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	74	<i>sapropterin dihydrochloride powder packet 100 mg</i>	90
<i>robit cgh dm cap 10-200mg</i>	80	<i>sapropterin dihydrochloride powder packet 500 mg</i>	90
<i>robitussin cap cold+flu</i>	80	<i>sapropterin dihydrochloride tab 100 mg</i>	90
<i>robitussin liq</i>	80	SARNA LOT	145
ROBITUSSIN LIQ CGH/CONG	80	SAVELLA MIS TITR PAK	72
ROBITUSSIN LIQ TO GO CF	80	SAVELLA TAB 100MG	72
<i>robitussin sus 30mg/5ml</i>	79	SAVELLA TAB 12.5MG	72
ROBITUSSIN SYP 7.5/5ML	79	SAVELLA TAB 25MG	72
ROBITUSSN DM SYP	80	SAVELLA TAB 50MG	72
<i>roflumilast tab 250 mcg</i>	136	SAXENDA INJ 18MG/3ML	1
<i>roflumilast tab 500 mcg</i>	136	<i>sb itch relf spr 2%</i>	139
		<i>scopolamine td patch 72hr 1 mg/3days</i>	100
		SCOT-TUSSIN LIQ DM SF	80
		<i>sea-omega 50 cap 1000mg</i>	125
		SEBULEX SHA	139
		<i>selegiline hcl cap 5 mg</i>	62
		<i>selegiline hcl tab 5 mg</i>	62

<i>selenium sulfide lotion 2.5%</i>	142	SIRTURO TAB 20MG	17
<i>selenium tab 200 mcg</i>	126	SKYLA IUD 13.5MG	88
SELSUN BLUE SHA DEEP CLN	145	SKYRIZI INJ 150DOSE.....	113
SELZENTRY SOL 20MG/ML.....	15	SKYRIZI INJ 150MG/ML	114
SELZENTRY TAB 25MG	15	SKYRIZI INJ 180/1.2	114
SELZENTRY TAB 75MG	15	SKYRIZI INJ 360/2.4.....	114
<i>senexon liq 8.8mg/5</i>	119	SKYRIZI PEN INJ 150MG/ML.....	114
<i>senna tab 8.6mg</i>	119	SKYRIZI SOL 60MG/ML	110
SEREVENT DIS AER 50MCG	134	SLO-NIACIN TAB 500MG CR	148
<i>sertraline hcl oral concentrate for solution</i>		SLOW-MAG TAB	124
<i>20 mg/ml</i>	59	SLYND TAB 4MG	88
<i>sertraline hcl tab 100 mg</i>	59	SMART RINSE SOL BBL BLAS	147
<i>sertraline hcl tab 25 mg</i>	59	SM CALAMINE LOT.....	147
<i>sertraline hcl tab 50 mg</i>	59	<i>sm eye dro</i>	130
<i>sevelamer carbonate packet 0.8 gm</i>	96	<i>sm fluoride sol mint</i>	147
<i>sevelamer carbonate packet 2.4 gm</i>	96	<i>sm lice lot treatmnt</i>	146
<i>sevelamer carbonate tab 800 mg</i>	96	<i>sm nicotine dis 14mg/24h</i>	79
SHARPS CONTAINER.....	89	<i>sm nicotine dis 21mg/24h</i>	79
SHINGRIX INJ 50/0.5ML	118	<i>sm nicotine dis 7mg/24hr</i>	79
SIGNIFOR INJ 0.3MG/ML.....	96	SM ONE DAILY MIS PRENATAL	123
SIGNIFOR INJ 0.6MG/ML.....	96	<i>sm vit b1 tab 100mg</i>	149
SIGNIFOR INJ 0.9MG/ML.....	96	<i>sod chloride inj 0.9%</i>	124
<i>sildenafil citrate iv soln 10 mg/12.5ml (base</i>		<i>sodium bicarbonate tab 650 mg</i>	12
<i>equivalent)</i>	51	<i>sodium chloride hypertonic ophth oint 5%</i>	
<i>sildenafil citrate tab 20 mg</i>	51	.....	130
<i>silodosin cap 4 mg</i>	104	<i>sodium chloride hypertonic ophth soln 5%</i>	
<i>silodosin cap 8 mg</i>	104	.....	130
<i>silver sulfadiazine cream 1%</i>	141	<i>sodium chloride inj 2.5 meq/ml (14.6%)</i> ..	125
SIMBRINZA SUS 1-0.2%	129	<i>sodium chloride irrigation soln 0.9%</i>	146
<i>simethicone dro 20/0.3ml</i>	100	<i>sodium chloride iv soln 0.45%</i>	125
SIMPONI ARIA SOL 50MG/4ML	110	<i>sodium chloride iv soln 0.9%</i>	125
SIMPONI INJ 100MG/ML	113	<i>sodium chloride iv soln 3%</i>	125
SIMPONI INJ 50/0.5ML	113	<i>sodium chloride iv soln 5%</i>	125
<i>simvastatin tab 10 mg</i>	43	<i>sodium chloride preservative free (pf) inj</i>	
<i>simvastatin tab 20 mg</i>	43	<i>0.9%</i>	125
<i>simvastatin tab 40 mg</i>	43	<i>sodium chloride soln nebu 0.9%</i>	136
<i>simvastatin tab 5 mg</i>	43	<i>sodium chloride soln nebu 10%</i>	136
<i>simvastatin tab 80 mg</i>	43	<i>sodium chloride soln nebu 3%</i>	136
<i>sinus tab max-st</i>	80	<i>sodium chloride soln nebu 7%</i>	136
<i>sirolimus oral soln 1 mg/ml</i>	117	<i>sodium chloride tab 1 gm</i>	125
<i>sirolimus tab 0.5 mg</i>	117	<i>sodium fluoride chew tab 0.25 mg f (from</i>	
<i>sirolimus tab 1 mg</i>	117	<i>0.55 mg naf)</i>	125
<i>sirolimus tab 2 mg</i>	117	<i>sodium fluoride chew tab 0.5 mg f (from 1.1</i>	
SIRTURO TAB 100MG.....	17	<i>mg naf)</i>	125

<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	125	SOVALDI PAK 200MG.....	21
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	125	SOVALDI TAB 200MG.....	21
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	125	SOVALDI TAB 400MG.....	21
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	125	SPIKEVAX INJ 50/0.5ML	118
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	90	<i>spinosad susp 0.9%</i>	146
<i>sodium phenylbutyrate tab 500 mg</i>	90	SPIRIVA AER 1.25MCG	131
SOD OXYBATE SOL 500MG/ML.....	77	SPIRIVA CAP HANDIHLR	131
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	102	SPIRIVA SPR 2.5MCG	131
SOFTCLIX MIS LANCETS.....	89	<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	49
<i>solifenacin succinate tab 10 mg</i>	105	<i>spironolactone tab 100 mg</i>	49
<i>solifenacin succinate tab 5 mg</i>	105	<i>spironolactone tab 25 mg</i>	49
SOLIQUA INJ 100/33.....	83	<i>spironolactone tab 50 mg</i>	49
SOLU-CORTEF INJ 1000MG	95	<i>spot acne cre 2.5%</i>	140
SOLU-CORTEF INJ 100MG.....	95	<i>sprintec 28 tab 28 day</i>	88
SOLU-CORTEF INJ 250MG	95	SPRYCEL TAB 100MG	33
SOLU-CORTEF INJ 500MG	95	SPRYCEL TAB 140MG	33
SOLU-MEDROL INJ 2GM	95	SPRYCEL TAB 20MG	33
SOMATULINE INJ 120/.5ML	81	SPRYCEL TAB 50MG.....	33
SOMATULINE INJ 60/0.2ML	81	SPRYCEL TAB 70MG	33
SOMAVERT INJ 10MG.....	81	SPRYCEL TAB 80MG.....	33
SOMAVERT INJ 15MG.....	81	<i>sps sus 15gm/60</i>	85
SOMAVERT INJ 20MG	81	<i>sronyx tab</i>	88
SOMAVERT INJ 25MG	81	<i>ssd cre 1%</i>	141
SOMAVERT INJ 30MG	81	<i>stavudine cap 15 mg</i>	15
<i>soothe tab 262mg</i>	25	<i>stavudine cap 20 mg</i>	15
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	33	<i>stavudine cap 30 mg</i>	15
<i>sore throat loz cherry</i>	147	<i>stavudine cap 40 mg</i>	15
<i>sore throat spr 1.4%</i>	147	STELARA INJ 45MG/0.5	114
<i>sotalol hcl (afib/af) tab 120 mg</i>	40	STELARA INJ 90MG/ML	114
<i>sotalol hcl (afib/af) tab 160 mg</i>	40	STIVARGA TAB 40MG.....	33
<i>sotalol hcl (afib/af) tab 80 mg</i>	40	<i>stomach relf chw 262mg</i>	25
<i>sotalol hcl tab 120 mg</i>	41	<i>stomach relf sus 262/15ml</i>	25
<i>sotalol hcl tab 160 mg</i>	41	<i>stomach relf sus 525/15ml</i>	25
<i>sotalol hcl tab 240 mg</i>	41	<i>stool softnr cap 100mg</i>	119
<i>sotalol hcl tab 80 mg</i>	40	<i>stop lice kit complete</i>	146
SOVALDI PAK 150MG	21	STRIVERDI AER 2.5MCG	134
		STUART ONE CAP	123
		SUBLOCADE INJ 100/0.5	10
		SUBLOCADE INJ 300/1.5	10
		SUCRAID SOL 8500/ML.....	102
		<i>sucralfate tab 1 gm</i>	102
		<i>sudafed 12hr tab 120mg cr</i>	138
		SUDAFED CONG TAB 30MG.....	138

<i>sudafed pe sol cold/cgh</i>	80	<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	33
SUDAFED PE TAB SIN CONG.....	138	<i>sunitinib malate cap 50 mg (base equivalent)</i>	33
SUFLAVE SOL	102	SUNOSI TAB 150MG	77
<i>sulconazole nitrate cream 1%</i>	142	SUNOSI TAB 75MG	77
<i>sulconazole nitrate solution 1%</i>	142	SUPPRELIN LA KIT 50MG.....	96
<i>sulfacetamide sodium lotion 10% (acne)</i>	140	SUPRAX CHW 100MG.....	19
<i>sulfacetamide sodium ophth oint 10%</i>	128	SUPRAX CHW 200MG	20
<i>sulfacetamide sodium ophth soln 10%</i>	128	SUPRAX SUS 500/5ML.....	20
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	127	SUTAB TAB.....	102
<i>sulfadiazine tab 500 mg</i>	12	<i>syeda tab 3-0.03mg</i>	88
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	12	SYMBICORT AER 160-4.5.....	138
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	12	SYMBICORT AER 80-4.5	138
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	12	SYMDEKO TAB 100-150	135
SULFAMYLON CRE 85MG/GM	141	SYMDEKO TAB 50-75MG	135
<i>sulfasalazine tab 500 mg</i>	101	SYMLINPEN 60 INJ 1000MCG.....	82
<i>sulfasalazine tab delayed release 500 mg</i>	101	SYMLNPEN 120 INJ 1000MCG	82
<i>sulindac tab 150 mg</i>	2	SYMTUZA TAB	17
<i>sulindac tab 200 mg</i>	2	SYNAREL SOL 2MG/ML.....	96
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	74	SYNERA DIS 70-70MG	145
<i>sumatriptan nasal spray 20 mg/act</i>	74	SYNJARDY TAB	84
<i>sumatriptan nasal spray 5 mg/act</i>	74	SYNJARDY TAB 12.5-500.....	84
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	74	SYNJARDY TAB 5-1000MG	84
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	74	SYNJARDY TAB 5-500MG	84
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	74	SYNJARDY XR TAB	84
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	74	SYNJARDY XR TAB 10-1000	84
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	74	SYNJARDY XR TAB 25-1000.....	84
<i>sumatriptan succinate tab 100 mg</i>	74	SYNJARDY XR TAB 5-1000MG	84
<i>sumatriptan succinate tab 25 mg</i>	74	SYNTHROID TAB 100MCG	98
<i>sumatriptan succinate tab 50 mg</i>	74	SYNTHROID TAB 112MCG	98
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	33	SYNTHROID TAB 125MCG.....	98
<i>sunitinib malate cap 25 mg (base equivalent)</i>	33	SYNTHROID TAB 137MCG.....	98
		SYNTHROID TAB 150MCG	98
		SYNTHROID TAB 175MCG.....	98
		SYNTHROID TAB 200MCG	98
		SYNTHROID TAB 25MCG	97
		SYNTHROID TAB 300MCG	98
		SYNTHROID TAB 50MCG	97
		SYNTHROID TAB 75MCG	97
		SYNTHROID TAB 88MCG.....	98
		<i>systeme dro contacts</i>	129
		SYSTANE SOL	129

T	
TABLOID TAB 40MG	27
<i>tacrolimus cap 0.5 mg</i>	117
<i>tacrolimus cap 1 mg</i>	117
<i>tacrolimus cap 5 mg</i>	117
<i>tacrolimus oint 0.03%</i>	142
<i>tacrolimus oint 0.1%</i>	142
<i>tadalafil tab 2.5 mg</i>	104
<i>tadalafil tab 20 mg (pah)</i>	51
<i>tadalafil tab 5 mg</i>	104
TAFINLAR CAP 50MG	33
TAFINLAR CAP 75MG	34
TAFINLAR TAB 10MG	34
<i>tafluprost preservative free (pf) ophth soln</i> <i>0.0015%</i>	129
<i>take action tab 1.5mg</i>	88
TALTZ INJ 80MG/ML	114
<i>tamoxifen citrate tab 10 mg (base</i> <i>equivalent)</i>	30
<i>tamoxifen citrate tab 20 mg (base</i> <i>equivalent)</i>	30
<i>tamsulosin hcl cap 0.4 mg</i>	104
<i>tasimelteon capsule 20 mg</i>	73
TAVIST TAB 1.34MG.....	133
<i>tazarotene cream 0.1%</i>	142
<i>tazarotene gel 0.05%</i>	142
<i>tazarotene gel 0.1%</i>	142
<i>tazicef inj 1gm</i>	20
TAZORAC CRE 0.05%	142
<i>taztia xt cap 120mg/24</i>	47
<i>taztia xt cap 180mg/24</i>	47
<i>taztia xt cap 240mg/24</i>	47
<i>taztia xt cap 300mg er</i>	47
<i>taztia xt cap 360mg/24</i>	47
TEARS NATURA OIN PM	129
<i>tears natura sol free op</i>	129
<i>telmisartan-amlodipine tab 40-10 mg</i>	39
<i>telmisartan-amlodipine tab 40-5 mg</i>	39
<i>telmisartan-amlodipine tab 80-10 mg</i>	39
<i>telmisartan-amlodipine tab 80-5 mg</i>	39
<i>telmisartan-hydrochlorothiazide tab 40-</i> <i>12.5 mg</i>	39
<i>telmisartan-hydrochlorothiazide tab 80-12.5</i> <i>mg</i>	39
<i>telmisartan-hydrochlorothiazide tab 80-25</i> <i>mg</i>	39
<i>telmisartan tab 20 mg</i>	40
<i>telmisartan tab 40 mg</i>	40
<i>telmisartan tab 80 mg</i>	40
<i>temazepam cap 15 mg</i>	73
<i>temazepam cap 22.5 mg</i>	73
<i>temazepam cap 30 mg</i>	73
<i>temazepam cap 7.5 mg</i>	73
TEMODAR INJ 100MG.....	26
<i>temozolomide cap 100 mg</i>	26
<i>temozolomide cap 140 mg</i>	26
<i>temozolomide cap 180 mg</i>	26
<i>temozolomide cap 20 mg</i>	26
<i>temozolomide cap 250 mg</i>	26
<i>temozolomide cap 5 mg</i>	26
<i>tenofovir disoproxil fumarate tab 300 mg</i> .15	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	104
<i>terazosin hcl cap 1 mg (base equivalent)</i> 104	
<i>terazosin hcl cap 2 mg (base equivalent)</i> 104	
<i>terazosin hcl cap 5 mg (base equivalent)</i> 104	
<i>terbinafine hcl tab 250 mg</i>	13
<i>terbutaline sulfate tab 2.5 mg</i>	134
<i>terbutaline sulfate tab 5 mg</i>	134
<i>terconazole vaginal cream 0.4%</i>	106
<i>terconazole vaginal cream 0.8%</i>	106
<i>terconazole vaginal suppos 80 mg</i>	106
<i>teriflunomide tab 14 mg</i>	76
<i>teriflunomide tab 7 mg</i>	76
<i>testosterone cypionate im inj in oil 100</i> <i>mg/ml</i>	81
<i>testosterone cypionate im inj in oil 200</i> <i>mg/ml</i>	81
<i>testosterone enanthate im inj in oil 200</i> <i>mg/ml</i>	81
<i>testosterone td gel 10mg/act (2%)</i>	81
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	81
<i>tetrabenazine tab 12.5 mg</i>	75
<i>tetrabenazine tab 25 mg</i>	75
<i>tetracycline hcl cap 250 mg</i>	25
<i>tetracycline hcl cap 500 mg</i>	25
<i>tgt apap dro infants</i>	10
THALOMID CAP 100MG	29

THALOMID CAP 150MG.....	29	<i>tiotropium bromide monohydrate inhal cap</i>	
THALOMID CAP 200MG.....	29	18 mcg (base equiv)	131
THALOMID CAP 50MG	29	TIVICAY PD TAB 5MG	15
<i>theophylline elixir 80 mg/15ml.....</i>	138	TIVICAY TAB 10MG	15
<i>theophylline soln 80 mg/15ml.....</i>	138	TIVICAY TAB 25MG	15
<i>theophylline tab er 12hr 300 mg</i>	138	TIVICAY TAB 50MG.....	15
<i>theophylline tab er 12hr 450 mg</i>	138	<i>tizanidine hcl tab 2 mg (base equivalent) .</i>	76
<i>theophylline tab er 24hr 400 mg</i>	138	<i>tizanidine hcl tab 4 mg (base equivalent) .</i>	76
<i>theophylline tab er 24hr 600 mg</i>	138	TOBRADEX OIN 0.3-0.1%.....	127
<i>theraflu sev tab cold/cgh.....</i>	80	TOBRADEX ST SUS 0.3-0.05	127
<i>thera-gesic cre.....</i>	145	<i>tobramycin-dexamethasone ophth susp</i>	
THERANATAL CAP ONE.....	123	0.3-0.1%	127
THERANATAL MIS COMPLETE	123	<i>tobramycin nebu soln 300 mg/4ml</i>	135
THERANATAL PAK OVAVITE.....	123	<i>tobramycin nebu soln 300 mg/5ml</i>	135
THERANATAL TAB 27-1.....	123	<i>tobramycin ophth soln 0.3%.....</i>	128
<i>therapeutic tab.....</i>	122	<i>tobramycin sulfate for inj 1.2 gm</i>	12
<i>thioridazine hcl tab 100 mg.....</i>	64	<i>tobramycin sulfate inj 2 gm/50ml (40</i>	
<i>thioridazine hcl tab 10 mg</i>	64	mg/ml) (base equiv)	13
<i>thioridazine hcl tab 25 mg.....</i>	64	<i>tobramycin sulfate inj 80 mg/2ml (40</i>	
<i>thioridazine hcl tab 50 mg</i>	64	mg/ml) (base equiv)	13
<i>thiothixene cap 10 mg</i>	64	TODAY SPONGE MIS.....	104
<i>thiothixene cap 1 mg.....</i>	64	<i>tolmetin sodium cap 400 mg.....</i>	2
<i>thiothixene cap 2 mg</i>	64	<i>tolmetin sodium tab 600 mg.....</i>	2
<i>thiothixene cap 5 mg</i>	64	<i>tolnaftate soln 1%</i>	142
<i>tiagabine hcl tab 12 mg.....</i>	68	<i>tolterodine tartrate cap er 24hr 2 mg</i>	105
<i>tiagabine hcl tab 16 mg</i>	68	<i>tolterodine tartrate cap er 24hr 4 mg</i>	105
<i>tiagabine hcl tab 2 mg</i>	68	<i>tolterodine tartrate tab 1 mg</i>	105
<i>tiagabine hcl tab 4 mg</i>	68	<i>tolterodine tartrate tab 2 mg.....</i>	105
TICE BCG INJ.....	29	<i>tolvaptan tab 15 mg.....</i>	96
<i>tilia fe tab</i>	88	<i>tolvaptan tab 30 mg.....</i>	96
<i>timolol maleate ophth gel forming soln</i>		<i>tooth sol shield.....</i>	147
0.25%	129	<i>topiramate sprinkle cap 15 mg</i>	68
<i>timolol maleate ophth gel forming soln</i>		<i>topiramate sprinkle cap 25 mg</i>	68
0.5%	129	<i>topiramate tab 100 mg</i>	68
<i>timolol maleate ophth soln 0.25%</i>	129	<i>topiramate tab 200 mg</i>	68
<i>timolol maleate ophth soln 0.5%.....</i>	129	<i>topiramate tab 25 mg</i>	68
<i>timolol maleate ophth soln 0.5% (once-</i>		<i>topiramate tab 50 mg.....</i>	68
<i>daily)</i>	129	<i>topotecan hcl for inj 4 mg (base equiv).....</i>	36
<i>timolol maleate tab 10 mg.....</i>	45	<i>toremifene citrate tab 60 mg (base</i>	
<i>timolol maleate tab 20 mg</i>	45	<i>equivalent)</i>	30
<i>timolol maleate tab 5 mg</i>	45	<i>toremide tab 100 mg</i>	49
TINACTIN CRE 1%	142	<i>toremide tab 10 mg.....</i>	49
<i>tinidazole tab 250 mg</i>	12	<i>toremide tab 20 mg</i>	49
<i>tinidazole tab 500 mg.....</i>	12	<i>toremide tab 5 mg.....</i>	49

<i>tramadol-acetaminophen tab 37.5-325 mg</i>	<i>triamcinolone acetonide cream 0.1%</i>	144
.....9	<i>triamcinolone acetonide cream 0.5%</i>	144
<i>tramadol hcl tab 50 mg</i>	<i>triamcinolone acetonide dental paste 0.1%</i>	
.....9	.....147	
<i>tramadol hcl tab er 24hr 100 mg</i>	<i>triamcinolone acetonide lotion 0.025% ..</i>	144
.....9	<i>triamcinolone acetonide lotion 0.1%</i>	144
<i>tramadol hcl tab er 24hr 200 mg</i>	<i>triamcinolone acetonide nasal aerosol</i>	
.....9	<i>suspension 55 mcg/act</i>	136
<i>tramadol hcl tab er 24hr 300 mg</i>	<i>triamcinolone acetonide oint 0.025%</i>	144
.....9	<i>triamcinolone acetonide oint 0.1%</i>	144
<i>trandolapril tab 1 mg</i>	<i>triamcinolone acetonide oint 0.5%</i>	144
.....38	TRIAMINIC SYP CGH/CNG	80
<i>trandolapril tab 2 mg</i>	TRIAMINIC SYP CHST/NSL.....	80
.....38	<i>triaminic tab 10mg</i>	133
<i>trandolapril tab 4 mg</i>	<i>triamterene & hydrochlorothiazide cap</i>	
.....38	<i>37.5-25 mg</i>	49
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	<i>triamterene & hydrochlorothiazide tab 37.5-</i>	
.....37	<i>25 mg</i>	49
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	<i>triamterene & hydrochlorothiazide tab 75-</i>	
.....37	<i>50 mg</i>	49
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	<i>triamterene cap 100 mg</i>	49
.....37	<i>triamterene cap 50 mg</i>	49
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	<i>triazolam tab 0.125 mg</i>	73
.....37	<i>triazolam tab 0.25 mg</i>	73
<i>tranexamic acid iv soln 1000 mg/10ml (100</i>	<i>trifluoperazine hcl tab 10 mg (base</i>	
<i>mg/ml)</i>	<i>equivalent)</i>	65
.....108	<i>trifluoperazine hcl tab 1 mg (base</i>	
<i>tranexamic acid tab 650 mg</i>	<i>equivalent)</i>	64
.....108	<i>trifluoperazine hcl tab 2 mg (base</i>	
<i>tranylcypromine sulfate tab 10 mg</i>	<i>equivalent)</i>	64
.....59	<i>trifluoperazine hcl tab 5 mg (base</i>	
<i>travoprost ophth soln 0.004%</i>	<i>equivalent)</i>	65
<i>(benzalkonium free) (bak free)</i>	<i>trifluridine ophth soln 1%</i>	128
.....129	<i>trihexyphenidyl hcl oral soln 0.4 mg/ml....</i>	62
<i>trazodone hcl tab 100 mg</i>	<i>trihexyphenidyl hcl tab 2 mg</i>	62
.....59	<i>trihexyphenidyl hcl tab 5 mg</i>	62
<i>trazodone hcl tab 150 mg</i>	TRIKAFTA PAK 59.5MG.....	135
.....59	TRIKAFTA PAK 75MG	135
<i>trazodone hcl tab 300 mg.....</i>	TRIKAFTA TAB	135
.....59	<i>tri-linyah tab</i>	88
<i>trazodone hcl tab 50 mg</i>	<i>trimethobenzamide hcl cap 300 mg</i>	100
.....59	<i>trimethoprim tab 100 mg.....</i>	23
TRECTOR TAB 250MG	<i>trimipramine maleate cap 100 mg</i>	59
.....17	<i>trimipramine maleate cap 25 mg</i>	59
TRELEGY AER 100MCG.....		
.....131		
TRELEGY AER 200MCG		
.....131		
TREMFYA INJ 100MG/ML		
.....114		
TRESIBA FLEX INJ 100UNIT		
.....84		
TRESIBA FLEX INJ 200UNIT		
.....84		
TRESIBA INJ 100UNIT		
.....84		
<i>tretinoin cap 10 mg</i>		
.....35		
<i>tretinoin cream 0.025%</i>		
.....140		
<i>tretinoin cream 0.05%.....</i>		
.....140		
<i>tretinoin cream 0.1%.....</i>		
.....140		
<i>tretinoin gel 0.01%</i>		
.....140		
<i>tretinoin gel 0.025%</i>		
.....140		
<i>tretinoin gel 0.05%</i>		
.....140		
<i>tretinoin microsphere gel 0.04%</i>		
.....140		
<i>tretinoin microsphere gel 0.1%</i>		
.....140		
<i>triamcinolone acetonide cream 0.025%</i>		
.....144		

<i>trimipramine maleate cap 50 mg</i>	59	TYMLOS INJ	96
<i>trinate tab</i>	125	TYSABRI INJ 300/15ML	76
TRINTELLIX TAB 10MG	59	TYVASO REFIL SOL 0.6MG/ML.....	51
TRINTELLIX TAB 20MG.....	59	TYVASO SOL 0.6MG/ML.....	51
TRINTELLIX TAB 5MG.....	59	TYVASO START SOL 0.6MG/ML.....	51
TRIPLE PASTE OIN 12.8%.....	147	U	
<i>triple paste oin af 2%</i>	142	UBRELVY TAB 100MG	74
TRIPTODUR SUS 22.5MG	96	UBRELVY TAB 50MG.....	74
<i>tri-sprintec tab</i>	88	<i>unithroid tab 100mcg</i>	98
TRIUMEQ PD TAB	17	<i>unithroid tab 112mcg</i>	98
TRIUMEQ TAB	17	<i>unithroid tab 125mcg</i>	98
TRI-VI-SOL SOL A/C/D.....	122	<i>unithroid tab 200mcg</i>	98
<i>tri-vit/fluo dro 0.25mg</i>	126	<i>unithroid tab 25mcg</i>	98
<i>tri-vit/fluo dro 0.5mg</i>	126	<i>unithroid tab 300mcg</i>	98
<i>tri-vitamin dro</i>	122	<i>unithroid tab 50mcg</i>	98
TRI-VITAMIN DRO	122	<i>unithroid tab 75mcg</i>	98
<i>trivora-28 tab</i>	88	<i>unithroid tab 88mcg</i>	98
TROGARZO INJ 150MG/ML	16	UPTRAVI INJ 1800MCG.....	51
<i>tropicamide ophth soln 0.5%</i>	130	UPTRAVI PACK TAB 200/800	51
<i>tropicamide ophth soln 1%</i>	130	UPTRAVI TAB 1000MCG.....	52
<i>trospium chloride cap er 24hr 60 mg</i>	105	UPTRAVI TAB 1200MCG	52
<i>trospium chloride tab 20 mg</i>	105	UPTRAVI TAB 1400MCG.....	52
TRULICITY INJ 0.75/0.5.....	83	UPTRAVI TAB 1600MCG.....	52
TRULICITY INJ 1.5/0.5.....	83	UPTRAVI TAB 200MCG	51
TRULICITY INJ 3/0.5	83	UPTRAVI TAB 400MCG	52
TRULICITY INJ 4.5/0.5.....	83	UPTRAVI TAB 600MCG	52
TRUSTEX/RIA MIS NON-LUB.....	88	UPTRAVI TAB 800MCG	52
TRUSTX NON-9 MIS RIB/STUD	88	<i>urea 20 intn cre 20%</i>	145
TUKYSA TAB 150MG	34	URINE GLUCOSE MONITORING SUPPLIES	
TUKYSA TAB 50MG.....	34	.....	120
<i>tussin chest liq 100/5ml</i>	80	URINE TEST STRIPS	120
TUZISTRA XR SUS	134	URIN-TEK KIT	120
TWINRIX INJ	118	<i>ursodiol cap 300 mg</i>	102
TWIRLA DIS 120-30	88	<i>ursodiol tab 250 mg</i>	102
TYBLUME CHW 0.1-0.02	88	<i>ursodiol tab 500 mg</i>	102
TYBOST TAB 150MG	16	V	
TYLENOL 8 HR TAB 650MG	10	VAGISTAT-1 OIN 6.5% VAG.....	106
TYLENOL CHLD SUS COLD FLU.....	80	<i>vagistat-3 kit combo pk</i>	106
TYLENOL COLD TAB SEVERE.....	80	<i>valacyclovir hcl tab 1 gm</i>	18
TYLENOL INFA SUS 160/5ML.....	11	<i>valacyclovir hcl tab 500 mg</i>	18
<i>tylenol sinu tab 5-325mg</i>	80	<i>valganciclovir hcl for soln 50 mg/ml (base</i> <i>equiv)</i>	18
TYLENOL SORE LIQ THROAT	11	<i>valganciclovir hcl tab 450 mg (base</i> <i>equivalent)</i>	18
TYLENOL TAB 325MG	11		
TYLENOL TAB 500MG.....	11		

<i>valproate sodium inj 100 mg/ml</i>	68	VELPHORO CHW 500MG.....	96
<i>valproate sodium oral soln 250 mg/5ml</i>		VEMLIDY TAB 25MG	18
<i>(base equiv)</i>	68	VENCLEXTA TAB 100MG.....	28
<i>valproic acid cap 250 mg</i>	68	VENCLEXTA TAB 10MG	28
<i>valsartan-hydrochlorothiazide tab 160-12.5</i>		VENCLEXTA TAB 50MG	28
<i>mg</i>	39	VENCLEXTA TAB START PK	28
<i>valsartan-hydrochlorothiazide tab 160-25</i>		<i>venlafaxine hcl cap er 24hr 150 mg (base</i>	
<i>mg</i>	39	<i>equivalent)</i>	60
<i>valsartan-hydrochlorothiazide tab 320-12.5</i>		<i>venlafaxine hcl cap er 24hr 37.5 mg (base</i>	
<i>mg</i>	39	<i>equivalent)</i>	60
<i>valsartan-hydrochlorothiazide tab 320-25</i>		<i>venlafaxine hcl cap er 24hr 75 mg (base</i>	
<i>mg</i>	39	<i>equivalent)</i>	60
<i>valsartan-hydrochlorothiazide tab 80-12.5</i>		<i>venlafaxine hcl tab 100 mg (base</i>	
<i>mg</i>	39	<i>equivalent)</i>	60
<i>valsartan tab 160 mg</i>	40	<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	
<i>valsartan tab 320 mg</i>	40	.....	60
<i>valsartan tab 40 mg</i>	40	<i>venlafaxine hcl tab 37.5 mg (base</i>	
<i>valsartan tab 80 mg</i>	40	<i>equivalent)</i>	60
<i>vancomycin hcl cap 125 mg (base</i>		<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	
<i>equivalent)</i>	23	.....	60
<i>vancomycin hcl cap 250 mg (base</i>		<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	
<i>equivalent)</i>	23	.....	60
<i>vancomycin hcl for iv soln 10 gm (base</i>		<i>venlafaxine hcl tab er 24hr 150 mg (base</i>	
<i>equivalent)</i>	23	<i>equivalent)</i>	60
<i>vancomycin hcl for iv soln 1 gm (base</i>		<i>venlafaxine hcl tab er 24hr 37.5 mg (base</i>	
<i>equivalent)</i>	23	<i>equivalent)</i>	60
<i>vancomycin hcl for iv soln 500 mg (base</i>		<i>venlafaxine hcl tab er 24hr 75 mg (base</i>	
<i>equivalent)</i>	23	<i>equivalent)</i>	60
<i>vancomycin hcl for iv soln 5 gm (base</i>		VENTAVIS SOL 10MCG/ML.....	52
<i>equivalent)</i>	23	VENTAVIS SOL 20MCG/ML	52
<i>vancomycin hcl for iv soln 750 mg (base</i>		<i>verapamil hcl cap er 24hr 100 mg</i>	47
<i>equivalent)</i>	23	<i>verapamil hcl cap er 24hr 120 mg</i>	47
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>		<i>verapamil hcl cap er 24hr 180 mg</i>	47
.....	79	<i>verapamil hcl cap er 24hr 200 mg</i>	47
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1</i>		<i>verapamil hcl cap er 24hr 240 mg</i>	47
<i>mg start pack</i>	79	<i>verapamil hcl cap er 24hr 300 mg</i>	48
<i>varenicline tartrate tab 1 mg (base equiv)</i>	79	<i>verapamil hcl cap er 24hr 360 mg</i>	48
VARUBI TAB 90MG	100	<i>verapamil hcl tab 120 mg</i>	48
VAXELIS INJ.....	118	<i>verapamil hcl tab 40 mg</i>	48
VAXNEUVANCE INJ.....	118	<i>verapamil hcl tab 80 mg</i>	48
VCF VAGINAL AER CONTRACP	104	<i>verapamil hcl tab er 120 mg</i>	48
VCF VAGINAL GEL CONTRACE	104	<i>verapamil hcl tab er 180 mg</i>	48
VCF VAGINAL MIS CONTRACP	104	<i>verapamil hcl tab er 240 mg</i>	48
<i>velivet pak</i>	89	V-GO 20 KIT	89

V-GO 30 KIT	89	<i>vitamin c tab 250mg</i>	149
V-GO 40 KIT	89	<i>vitamin d3 cap 1000unit</i>	148
VIBRAMYCIN SYP 50MG/5ML	25	<i>vitamin d3 cap 2000unit</i>	148
VICTOZA INJ 18MG/3ML	83	<i>vitamin d chw 1000unit</i>	148
<i>vigabatrin powd pack 500 mg</i>	68	<i>vitamin e cap 100unit</i>	148
<i>vigabatrin tab 500 mg</i>	68	<i>vitamin e cap 200 unit</i>	148
VIIIBRYD KIT STARTER	60	<i>vitamin e cap 450 mg (1000 unit)</i>	148
<i>vilazodone hcl tab 10 mg</i>	60	<i>vitamin e soln 15 unit/0.3ml (50 unit/ml)</i> 148	
<i>vilazodone hcl tab 20 mg</i>	60	<i>vitamins a & d oint</i>	145
<i>vilazodone hcl tab 40 mg</i>	60	<i>vita-plus e cap 400unit</i>	148
VINATE CARE CHW 40-1MG	123	<i>vite/iron chw children</i>	122
<i>vinblastine sulfate inj 1 mg/ml</i>	28	VITRAKVI CAP 100MG	34
<i>vincristine sulfate iv soln 1 mg/ml</i>	28	VITRAKVI CAP 25MG	34
<i>vinorelbine tartrate inj 10 mg/ml (base</i> <i>equiv)</i>	28	VITRAKVI SOL 20MG/ML	34
<i>vinorelbine tartrate inj 50 mg/5ml (10</i> <i>mg/ml) (base equiv)</i>	28	VOLTAREN GEL 1% ARTHR	146
VIOKACE TAB 10440	102	<i>voriconazole for susp 40 mg/ml</i>	13
VIOKACE TAB 20880.....	102	<i>voriconazole tab 200 mg</i>	13
<i>viorele tab</i>	89	<i>voriconazole tab 50 mg</i>	13
VIRACEPT TAB 250MG.....	16	VOSEVI TAB.....	21
VIRACEPT TAB 625MG	16	VOTRIENT TAB 200MG.....	34
VIREAD POW 40MG/GM	16	VRAYLAR CAP 1.5-3MG.....	65
VIREAD TAB 150MG	16	VRAYLAR CAP 1.5MG.....	65
VIREAD TAB 200MG	16	VRAYLAR CAP 3MG	65
VIREAD TAB 250MG	16	VRAYLAR CAP 4.5MG.....	65
VISTOGARD PAK 10GM	85	VRAYLAR CAP 6MG	65
<i>vit a/c/d/fl dro 0.25mg</i>	127	<i>vyfemla tab 0.4-35</i>	89
VIT A FISH CAP 7500UNIT	148	VYVANSE CAP 10MG.....	72
<i>vitamin a cap 2400 mcg (8000 unit)</i>	148	VYVANSE CAP 20MG	72
<i>vitamin a cap 3 mg (10000 unit)</i>	148	VYVANSE CAP 30MG	72
<i>vitamin b-12 injection</i>	127	VYVANSE CAP 40MG.....	72
<i>vitamin b-12 tab 1000mcg</i>	109	VYVANSE CAP 50MG.....	72
<i>vitamin b-12 tab 100mcg</i>	109	VYVANSE CAP 60MG.....	72
<i>vitamin b-12 tab 250mcg</i>	109	VYVANSE CAP 70MG	72
<i>vitamin b-12 tab 500mcg</i>	109	VYVANSE CHW 10MG	72
<i>vitamin b-1 tab 50mg</i>	149	VYVANSE CHW 20MG	72
<i>vitamin b-2 tab 100mg</i>	149	VYVANSE CHW 30MG	72
<i>vitamin b-2 tab 25mg</i>	149	VYVANSE CHW 40MG	72
<i>vitamin b-6 tab 100mg</i>	149	VYVANSE CHW 50MG	72
<i>vitamin b-6 tab 25mg</i>	149	VYVANSE CHW 60MG	72
<i>vitamin b-6 tab 50mg</i>	149	W	
<i>vitamin c liq 500/5ml</i>	149	<i>wal-fex chld sus 30mg/5ml</i>	133
<i>vitamin c tab 1000mg</i>	149	<i>wal-itin d tab 24 hour</i>	80
		<i>wal-itin sol 5mg/5ml</i>	133
		<i>wal-mucil pow 48.57%</i>	119

<i>wal-phed pe tab 4-10mg</i>	80	XCOPRI TAB 100MG.....	69
<i>wal-profen cap 200mg</i>	2	XCOPRI TAB 150MG.....	69
<i>wal-profen tab cold/sin</i>	80	XCOPRI TAB 200MG.....	69
<i>wal-tussin liq cf</i>	80	XCOPRI TAB 50MG.....	69
<i>wal-tussin syp 15mg/5ml</i>	79	XELJANZ SOL 1MG/ML.....	114
<i>wal-zyr chw 10mg</i>	133	XELJANZ TAB 10MG.....	114
<i>wal-zyr chw 5mg</i>	133	XELJANZ TAB 5MG.....	114
<i>warfarin sodium tab 10 mg</i>	107	XELJANZ XR TAB 11MG.....	115
<i>warfarin sodium tab 1 mg</i>	107	XELJANZ XR TAB 22MG.....	115
<i>warfarin sodium tab 2.5 mg</i>	107	XEPI CRE 1%.....	141
<i>warfarin sodium tab 2 mg</i>	107	XIFAXAN TAB 200MG.....	23
<i>warfarin sodium tab 3 mg</i>	107	XIFAXAN TAB 550MG.....	23
<i>warfarin sodium tab 4 mg</i>	107	XOLAIR INJ 150MG/ML.....	137
<i>warfarin sodium tab 5 mg</i>	107	XOLAIR INJ 75/0.5.....	137
<i>warfarin sodium tab 6 mg</i>	107	XOLAIR SOL 150MG.....	137
<i>warfarin sodium tab 7.5 mg</i>	107	XTAMPZA ER CAP 13.5MG.....	9
WEGOVY INJ 0.25MG.....	1	XTAMPZA ER CAP 18MG.....	9
WEGOVY INJ 0.5MG.....	1	XTAMPZA ER CAP 27MG.....	9
WEGOVY INJ 1.7MG.....	1	XTAMPZA ER CAP 36MG.....	9
WEGOVY INJ 1MG.....	1	XTAMPZA ER CAP 9MG.....	9
WEGOVY INJ 2.4MG.....	1	XTANDI CAP 40MG.....	30
<i>wera tab 0.5/35</i>	89	XTANDI TAB 40MG.....	30
<i>westab max tab 2.5-25-2</i>	127	XTANDI TAB 80MG.....	30
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XARELTO STAR TAB 15/20MG.....	107	<i>zaleplon cap 10 mg</i>	73
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XARELTO TAB 15MG.....	107	ZEJULA TAB 100MG.....	35
XARELTO TAB 2.5MG.....	107	ZEJULA TAB 200MG.....	35
XARELTO TAB 20MG.....	107	ZEJULA TAB 300MG.....	35
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ZENPEP CAP 5000UNIT.....	102	<i>zolpidem tartrate tab 5 mg</i>	73
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<i>zidovudine cap 100 mg</i>	16	<i>zonisamide cap 50 mg</i>	69
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