



Community DualCare Aligned (HMO D-SNP) Plan 005

2027 List of Covered Drugs (Drug List)

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION
ABOUT THE DRUGS WE COVER IN THIS PLAN**

HPMS Approved Formulary File Submission ID 27255, Version 7

This formulary was updated on **10/01/2026** For more recent information or other questions, please contact Community Health Choice Member Services, at 1-833-276-8306 or, for TTY users, 711, October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 5:00 pm, or visit www.CommunityHealthChoice.org/Medicare.

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If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm*. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



Last updated on 09/11/2026.

Introduction

This document is called the *List of Covered Drugs* (also known as the *Drug List*). It tells you which drugs and over-the-counter (OTC) drugs (OTC for STAR+PLUS only) are covered by Community DualCare Aligned (HMO D-SNP). The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by Community DualCare Aligned (HMO D-SNP). Key terms and their definitions appear in the last chapter of the *Member Handbook*.

Table of Contents

Disclaimers	4
Frequently Asked Questions (FAQ).....	8
B1. What drugs are on the <i>List of Covered Drugs</i> ? (We call the <i>List of Covered Drugs</i> the <i>Drug List</i> for short.).....	8
B2. Does the <i>Drug List</i> ever change?	9
B3. What happens when there's a change to the <i>Drug List</i> ?	10
B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?.....	11
B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?	12
B6. What happens if Community DualCare Aligned (HMO D-SNP) changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?	12
B7. How can I find a drug on the <i>Drug List</i> ?	12
B8. What if the drug I want to take isn't on the <i>Drug List</i> ?.....	12
B9. What if I'm a new Community DualCare Aligned (HMO D-SNP) member and can't find my drug on the <i>Drug List</i> or have a problem getting my drug?.....	12
B10. Can I ask for an exception to cover my drug?	14
B11. How can I ask for an exception?	14

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B12. How long does it take to get an exception?	14
B13. What are generic drugs?	14
B14. What are original biological products and how are they related to biosimilars?	15
B15. What are OTC drugs?	15
B16. Does Community DualCare Aligned (HMO D-SNP) cover non-drug OTC products?	15
B17. Does Community DualCare Aligned (HMO D-SNP) cover long-term supplies of prescriptions?	15
B18. Can I get prescriptions delivered to my home from my local pharmacy?	16
B19. What's my copay?	16
Overview of the <i>List of Covered Drugs</i>	16
Index of Covered Drugs	19

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Disclaimers

This is a list of drugs that members can get in Community DualCare Aligned (HMO D-SNP).

Community DualCare Aligned (HMO D-SNP) is a health plan that contracts with both Medicare and STAR+PLUS to provide benefits of both programs to members. Enrollment in Community DualCare Aligned (HMO D-SNP) depends on contract renewal.

- Our provider and pharmacy network may change during the year. An updated Provider and Pharmacy Directory is located on our website at www.communityhealthchoice.org/medicare. You may also call Member Services at the numbers at the bottom of the page for updated provider information.
- Our List of Covered Drugs, also called the Drug List, may change during the year. An updated Drug List is located on our website at www.communityhealthchoice.org/medicare. You may also call Member Services at the numbers at the bottom of the page to ask us to mail you a Drug List.
- ❖ You can always check Community DualCare Aligned (HMO D-SNP)'s up-to-date *List of Covered Drugs* online at www.communityhealthchoice.org/medicare or by calling Member Services at 1.833.276.8306 or TTY 711, October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm. This call is free.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at 1.833.276.8306 or TTY 711. This call is free.

❖ Non-Discrimination Statement

Community DualCare Aligned (HMO D-SNP) complies with applicable Federal civil rights laws and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. Community DualCare Aligned (HMO D-SNP) provides free aids and services to people with disabilities to communicate effectively with us, such as:

- *qualified sign language interpreters,*
- *written information in other formats (large print, audio, accessible electronic formats, other formats).*

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



Community DualCare Aligned (HMO D-SNP) provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Community DualCare Aligned (HMO D-SNP) Member Services at 1.833.276.8306 or TTY: 711.

If you believe that Community Health Choice Texas, Inc. has failed to provide these services and you need help understanding your Medicare rights and how to exercise them, including around Medicare appeals, there is free information and assistance available. You can reach out to your local SHIP, 1.800.MEDICARE, and the Medicare Rights free national helpline at 1.800.333.4114.

Arabic

نبيه: إذا كنت تتحدث العربية، تتوفر لك خدمات مساعدة لغوية مجانية. كما تتوفر مجانًا وسائل مساعدة وخدمات مناسبة لتقديم المعلومات 1.833.276.8306 بتنسيقات سهلة الوصول. اتصل على الرقم (117) أو تواصل مع مقدم الخدمة

中文 (Chinese)

注意: 如果您讲中文, 我们提供免费的语言协助服务。我们还提供免费的辅助工具和服务, 以无障碍的格式提供信息。请致电 1.833.276.8306 (TTY 711) 或联系您的服务提供商。

English

ATTENTION: If you speak another language, free language assistance services are available. We also have free auxiliary aids and services available to provide information in accessible formats. Call 1.833.276.8306 (TTY 711) or speak to your provider.

Español (Spanish)

ATENCIÓN: Si habla español, dispone de servicios gratuitos de asistencia lingüística. También disponemos de ayudas y servicios auxiliares gratuitos para proporcionar información en formatos accesibles. Llame al **1.833.276.8306 (TTY 711)** o hable con su proveedor.

Français (French)

ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir de l'information dans des formats accessibles sont également disponibles

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



gratuitement. Composez le 1.833.276.8306 (ATS 711) ou parlez-en à votre fournisseur.

Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen eine kostenlose Sprachunterstützung zur Verfügung. Wir bieten außerdem kostenlose Hilfsmittel und Dienste an, um Informationen in barrierefreien Formaten bereitzustellen. Rufen Sie 1.833.276.8306 (TTY 711) an oder wenden Sie sich an Ihren Anbieter.

ગુજરાતી (Gujarati)

ધ્યાન આપો: જો તમે ગુજરાતી બોલો છો, તો તમારા માટે મફત ભાષા સહાય સેવાઓ ઉપલબ્ધ છે. સુલભ ફોર્મેટમાં માહિતી પૂરી પાડવા માટે યોગ્ય સહાયક સહાય અને સેવાઓ પણ મફતમાં ઉપલબ્ધ છે. **1.833.276.8306 (TTY 711)** પર કોલ કરો અથવા તમારા પદાતી સાથે વાત કરો.

हिंदी (Hindi)

न दें: यद आप हिंदी बोलते हैं, तो नःशु भाषा सहायता सेवाएँ उपलब्ध हैं। हमारे पास सुलभ प्रारूप में जानकारी प्रदान करने के लिए नःशु सहायक उपकरण और सेवाएँ भी उपलब्ध हैं। 1.833.276.8306 (TTY 711) पर कॉल करें या अपने प्रदाता से बात करें।

本語 (Japanese)

ご注意: 日本語を話される方は、無料の言語支援サービスをご利用いただけます。また、アクセシブルな形式で情報を提供するための無料の補助機器やサービスもご用意しております。1.833.276.8306 (TTY 711) までお電話いただくか、プロバイダーにお問い合わせください

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 무료 언어 지원 서비스를 이용하실 수 있습니다. 또한, 접근 가능한 형식으로 정보를 제공하는 적절한 보조도구 및 서비스도 무료로 이용하실 수 있습니다. 1.833.276.8306(TTY 711) 번으로 전화하시거나 담당 의료 서비스 제공자에게 문의하세요.

Khonlav (Laotian)

kho khuan lavang thathan vaophasalav mi bolikan suanyheu danphasa fri phuak hao nyang mi kan suany heu lae kan bo li kan fri thi mi hai pheu hai kho mun nai hub aebb thi sa mad khao thoeng dai othha 18332768306 TTY 711 ru lomkab phuhaibolikan khongthan.

فارسی (Persian)

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



کنید، خدمات کمک زبانی رایگا نتوجھ: اگر بھ زبان فارسی صحبت می
های کمکی رایگان و خدماتی برا یدر دسترس است. ما همچنین کمک
دهیم. با شمار ههای قابل دسترس ارائه می ارائه اطلاعات در قالب
1.833.276.8306 (TTY 711) (ارائه یا با ارائه)
خدمات خود صحبت کنید.

Русский (Russian)

ВНИМАНИЕ: Если вы говорите по-русски, мы предлагаем бесплатную языковую поддержку. Мы также предлагаем бесплатные вспомогательные средства и услуги для предоставления информации в доступных форматах. Позвоните по номеру 1.833.276.8306 (TTY 711) или обратитесь к своему оператору.

Tagalog (Tagalog)

PAUNAWA: Kung nagsasalita ka ng Tagalog, magagamit ang mga libreng serbisyo sa tulong sa wika. Mayroon din kaming mga libreng pantulong na tulong at serbisyong magagamit upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1.833.276.8306 (TTY 711) o makipag-usap sa iyong provider.

اردو (Urdu)

دھیان دیں: اگر آپ اردو بولتے ہیں تو مفت زبان کی مدد کی خدمات
دستیاب ہیں۔ ہمارے پاس قابل رسائی فارمیٹس میں معلومات فراہم
کرنے کے لیے مفت معاون امداد اور خدمات بھی دستیاب ہیں۔
1.833.276.8306 (TTY 711) (فراہم کنندہ)
سے بات کریں۔

Tiếng Việt (Vietnamese)

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi có dịch vụ hỗ trợ ngôn ngữ miễn phí. Chúng tôi cũng có các thiết bị hỗ trợ và dịch vụ miễn phí để cung cấp thông tin ở các định dạng dễ tiếp cận. Hãy gọi số 1.833.276.8306 (TTY 711) hoặc liên hệ với nhà cung cấp dịch vụ của bạn.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



- ❖ This document is available for free in Spanish.
- ❖ Community DualCare Aligned (HMO D-SNP) will:
 - *request a member's preferred language other than English and/or alternate format,*
 - *keep the member's information as a standing request for future mailings and communications so the member doesn't need to make a separate request each time, and*
 - *provide member's a way to change a standing request for preferred language and/or format by calling Member Services at 1.833.276.8306 or TTY 711.*

Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs (Drug List)*. You can read all of the FAQ to learn more or look for a question and answer.

B1. What drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the *Drug List* for short.)

The drugs on the *Drug List* that starts in **Section C** are the drugs covered by Community DualCare Aligned (HMO D-SNP). The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

Other drugs, such as some over-the-counter (OTC) medications and certain vitamins, may be covered by STAR+PLUS. Please visit the STAR+PLUS URL www.hhs.texas.gov/services/health/medicaid-chip/medicaid-chip-members/starplus for more information. You can also call the Texas Medicaid Member Service Center at 800-252-8263, Monday to Friday, 7 a.m. to 7 p.m. Please bring your Member ID Card when getting prescriptions through STAR+PLUS.

- Community DualCare Aligned (HMO D-SNP) will cover all medically necessary drugs on the *Drug List* if:
 - Your doctor or other prescriber says you need them to get better or stay healthy,
 - Community DualCare Aligned (HMO D-SNP) agrees that the drug is medically necessary for you, **and**

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



- You fill the prescription at a Community DualCare Aligned (HMO D-SNP) network pharmacy.
- In some cases, you must do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at www.communityhealthchoice.org/medicare or call Member Services at the numbers listed at the bottom of this page.

B2. Does the *Drug List* ever change?

Yes, and Community DualCare Aligned (HMO D-SNP) must follow Medicare and Texas Medicaid rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from Community DualCare Aligned (HMO D-SNP) before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we'll cover another drug.)

For more information on these drug rules, refer to question B4.

If you're taking a drug that was covered at the **beginning** of the year, we'll generally not remove or change coverage of that drug **during the rest of the year** unless:

- A new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, **or**
- We learn that a drug isn't safe, **or**
- A drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

- You can always check Community DualCare Aligned (HMO D-SNP)'s up-to-date *Drug List* online at www.communityhealthchoice.org/medicare. Updates to the *Drug List* are posted on the website monthly.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



- You can also call Member Services at the numbers listed at the bottom of this page to check the current *Drug List*.

B3. What happens when there's a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Remove unsafe drugs and other drugs that are taken off the market.**
Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice after we make the change. Please contact your doctor immediately if you receive the notice.

We may make other changes that affect the drugs you take. We'll tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug and replace a brand name drug currently on the *Drug List*, or
- We add a new biosimilar to replace an original biological product currently on the *Drug List*, or
- We change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- Tell you at least 30 days before we make the change to the *Drug List* **or**
- Let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the *Drug List* you can take instead **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10-B12.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm*. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases, you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from Community DualCare Aligned (HMO D-SNP) based on specific criteria before you fill your prescription. Prior authorization (PA) is different from a referral. Community DualCare Aligned (HMO D-SNP) may not cover the drug if you don't get prior authorization. PA criteria assess requirements such as appropriateness of indication, age, dose, lab values, and others for that specific prescription drug.
- **Quantity limits:** Community Health Choice's Community DualCare Aligned (HMO D-SNP) plan limits the quantity and dosing of certain drugs to be consistent with recommended doses approved by the U.S. Food & Drug Administration (FDA). The quantity limit can include limits on the number of doses per day, maximum daily dose based on labeled dosing, and quantity over time. This may include the number of prescription fills per month or year.
- **Step therapy:** Community Health Choice's Community DualCare Aligned (HMO D-SNP) can require you to do step therapy. Step Therapy promotes the appropriate use of effective but lower-cost drugs first. Prerequisite drugs are FDA-approved to treat the same condition as the corresponding step-therapy drugs. This means you may have to try one drug before we'll cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll review coverage for the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C1**. You can also get more information by visiting our website at www.communityhealthchoice.org/medicare. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10-B12 for more information about exceptions.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm*. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the section titled “List of Drugs by Drug Type has a column labeled “Necessary actions, restrictions, or limits on use.”

B6. What happens if Community DualCare Aligned (HMO D-SNP) changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we’ll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.

B7. How can I find a drug on the *Drug List*?

There are two ways to find a drug:

You can search alphabetically. To search **alphabetically**, look for your drug in the Index of Covered Drugs section. The Index of Covered Drugs is an alphabetical list of all the drugs included in the *Drug List*. Brand name drugs, generic drugs, and over-the-counter (OTC) drugs (OTC listed for *STAR+PLUS only*) are listed in the index.

B8. What if the drug I want to take isn’t on the *Drug List*?

If you don’t find your drug on the *Drug List*, call Member Services at the numbers listed at the bottom of this page and ask about it. If you learn that Community DualCare Aligned (HMO D-SNP) won’t cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that’s like the one you want to take. **Or**
- Ask Community DualCare Aligned (HMO D-SNP) to make an exception to cover your drug. Refer to questions B10-B12 for more information about exceptions.

B9. What if I’m a new Community DualCare Aligned (HMO D-SNP) member and can’t find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you’re a member of Community DualCare Aligned (HMO D-SNP). This will give you time to

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talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we'll allow multiple refills to provide up to a maximum of 30 days of medication.

We'll cover a 30-day supply of your drug if:

- You're taking a drug that isn't on our *Drug List*, **or**
- Our plan rules don't let you get the amount ordered by your prescriber, **or**
- The drug requires prior authorization byCare Aligned (HMO D-SNP), **or**
- You're taking a drug that's part of a step therapy restriction.

If you're taking a drug that Community DualCare Aligned (HMO D-SNP) doesn't consider to be a Part D drug, you have the right to get a one-time, 72-hour supply of the drug.

If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you can't easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days, whether or not you're a new Community DualCare Aligned (HMO D-SNP) member.
- This is in addition to the temporary supply during the first 90 days you're a member of Community DualCare Aligned (HMO D-SNP).

If you are new to Community DualCare Aligned (HMO D-SNP) and are taking a non-formulary drug, you are eligible for a temporary supply of your non-formulary drug. A non-formulary drug includes a drug that is not on Community's formulary or a drug on the formulary that has special requirements. Our transition policy ensures that you can get a one-time temporary fill of at least one month's supply* of the drug anytime during the first 90 days of your membership in Community DualCare Aligned (HMO D-SNP). The prescription must be filled at a network pharmacy.

You and your doctor will receive a transition notice from us. This will allow you time to talk to your doctor or other prescriber about pursuing other options available to you within our formulary. Community DualCare Aligned (HMO D-SNP) cannot continue to pay for these medications under the transition policy, even if you have been a member for less than 90 days following your one month transition supply.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



*If your prescription is written for fewer days, you will be allowed to fill your drug multiple times to provide at least one month's supply of medication. If you receive a transition supply, you will receive a letter from Community DualCare Aligned (HMO D-SNP) notifying you that you have received a temporary supply of your prescription drug.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask Community DualCare Aligned (HMO D-SNP) to make an exception to cover a drug that's not on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, Community DualCare Aligned (HMO D-SNP) may limit the amount of a drug we'll cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call *Member Services*. A Member Services representative will work with you and your prescriber to help you ask for an exception. You can also read **Chapter 9 Section G2: Medicare Part D exceptions** of the *Member Handbook* to learn more about exceptions.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we'll give you a decision within 72 hours.

If you or your prescriber think your health may be harmed if you must wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we'll give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription—depending on state laws.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm*. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



Community DualCare Aligned (HMO D-SNP) covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Member Handbook*.

B15. What are OTC drugs?

OTC stands for “over-the-counter”. Community DualCare Aligned (HMO D-SNP) covers some OTC drugs when they’re written as prescriptions by your provider. If applicable, OTC medications will only be covered through the plans STAR+PLUS coverage.

You can read the Community DualCare Aligned (HMO D-SNP) *Drug List* to find out what OTC drugs are covered.

B16. Does Community DualCare Aligned (HMO D-SNP) cover non-drug OTC products?

Community DualCare Aligned (HMO D-SNP) covers some non-drug OTC products when they’re written as prescriptions by your provider. Examples of non-drug OTC products include diabetes test strips glucose test strips, DME products, etc. You can read the Community DualCare Aligned (HMO D-SNP) *Drug List* to find out what non-drug OTC products are covered.

B17. Does Community DualCare Aligned (HMO D-SNP) cover long-term supplies of prescriptions?

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 90-day supply of your drugs sent directly to your home. A 30-day supply has the same copay as a one-month supply.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



- **90-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 90-day supply of covered drugs. A 30-day supply has the same copay as a one-month supply.

B18. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery. Please see your Provider & Pharmacy Directory at www.communityhealthchoice.org/Medicare for more information.

B19. What's my copay?

Community DualCare Aligned (HMO D-SNP) members have *copays* for prescription, OTC drugs, and non-drug products as long as the member follows the plan's rules. Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

Tiers are groups of drugs on our *Drug List*.

- *Tier 1 Generic drugs have \$0 copay.*
- *Tier 2 Generic drugs have \$0 copay.*
- Tier 3 Preferred Brand drugs have between a \$0 – \$14.40 copay or 25% coinsurance
- Tier 4 Non-Preferred Brand drugs have between a \$0 - \$14.40 copay or 25% coinsurance
- Tier 5 Select Care drugs have between a \$0 – \$14.40 copay or a 25% coinsurance
- Tier 6 Specialty Care drugs have a \$0 copay
- *OTCs have a \$0 copay*

If you have questions, call Member Services at the numbers listed at the bottom of this page.

Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by Community DualCare Aligned (HMO D-SNP). If you have trouble finding your drug in the list, turn to the

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



Index of Covered Drugs that begins in **Section D**. The index alphabetically lists all drugs covered by Community DualCare Aligned (HMO D-SNP).

Note: The * next to a drug means the drug isn't a "Part D drug." These drugs have different rules for appeals.

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want isn't covered or is no longer covered by Medicare or STAR+PLUS.
- If you or your prescriber disagrees with our decision, you can appeal. If you ever have a question, call Member Services [*plans insert reference:* at 1.833.276.8306 or TTY 711 *or* at the numbers listed at the bottom of this page *or* at the numbers in the footer of this document].
- You can also read **Chapter 9** of the *Member Handbook* to learn how to appeal a decision.

C1. List of Drugs by Drug Type

The drugs in this section are grouped into categories by type. For example, if you're taking a medicine for migraines, you should look in the migraine products category. That's where you'll find drugs that treat migraines.]

Here are the meanings of the codes used in the "Necessary actions, restrictions, or limits on use" column:

(g) = Only the generic version of this drug is covered. The brand name version isn't covered.

M = The brand name version of this drug is in Tier 3. The generic version is in Tier 1.

PA= Prior authorization: you must have authorization from the plan before you can get this drug.

ST= Step therapy: you must try another drug before you can get this one.

QL = Quantity Limit: the maximum amount of drug you can fill.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *theophylline*), brand name drugs are capitalized (for example, TRIKAFTA), . The information in the “Necessary actions, restrictions, or limits on use” column tells you if Community DualCare Aligned (HMO D-SNP) has any rules for covering your drug.

MIGRAINE PRODUCTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AIMOVIG 140MG/ML AUTO-INJECTOR	3	PA QL=1 ML/30 Days

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm.* The call is free. **For more information**, visit www.communityhealthchoice.org/medicare.



Index of Covered Drugs

In this section, you can find a drug by searching for its name alphabetically. This will tell you the page number where you can find additional coverage information for your drug.

If you have questions, please call Community DualCare Aligned (HMO D-SNP) at 1.833.276.8306 or TTY 711, *October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm*. The call is free. **For more information**, visit www.communityhealthchoice.org/medicare. 19



DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine/dextroamphetamine 10mg er cap</i>	\$0 (Tier 2)	
<i>amphetamine/dextroamphetamine 10mg tab</i>	\$0 (Tier 1)	
<i>amphetamine/dextroamphetamine 12.5mg tab</i>	\$0 (Tier 1)	
<i>amphetamine/dextroamphetamine 15mg er cap</i>	\$0 (Tier 2)	
<i>amphetamine/dextroamphetamine 15mg tab</i>	\$0 (Tier 1)	
<i>amphetamine/dextroamphetamine 20mg er cap</i>	\$0 (Tier 2)	
<i>amphetamine/dextroamphetamine 20mg tab</i>	\$0 (Tier 1)	
<i>amphetamine/dextroamphetamine 25mg er cap</i>	\$0 (Tier 2)	
<i>amphetamine/dextroamphetamine 30mg er cap</i>	\$0 (Tier 2)	
<i>amphetamine/dextroamphetamine 30mg tab</i>	\$0 (Tier 1)	
<i>amphetamine/dextroamphetamine 5mg er cap</i>	\$0 (Tier 2)	
<i>amphetamine/dextroamphetamine 5mg tab</i>	\$0 (Tier 1)	
<i>amphetamine/dextroamphetamine 7.5mg tab</i>	\$0 (Tier 1)	
<i>dextroamphetamine sulfate 10mg tab</i>	\$0 (Tier 2)	
<i>dextroamphetamine sulfate 5mg tab</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 10mg cap</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 20mg cap</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 30mg cap</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 40mg cap</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 50mg cap</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 60mg cap</i>	\$0 (Tier 2)	
<i>lisdexamfetamine dimesylate 70mg cap</i>	\$0 (Tier 2)	
ANALEPTICS		
CAFFEINE TAB 200MG*	\$0 (Tier 1*)	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine 100mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>atomoxetine 10mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atomoxetine 18mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atomoxetine 25mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atomoxetine 40mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atomoxetine 60mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atomoxetine 80mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>clonidine 0.1mg er tab</i>	\$0 (Tier 2)	
<i>guanfacine 1mg er tab</i>	\$0 (Tier 1)	
<i>guanfacine 2mg er tab</i>	\$0 (Tier 1)	
<i>guanfacine 3mg er tab</i>	\$0 (Tier 1)	
<i>guanfacine 4mg er tab</i>	\$0 (Tier 1)	
STIMULANTS - MISC.		
<i>armodafinil 150mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>armodafinil 200mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>armodafinil 250mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>armodafinil 50mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>dexmethylphenidate 10mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>dexmethylphenidate 2.5mg tab</i>	\$0 (Tier 1)	
<i>dexmethylphenidate 5mg tab</i>	\$0 (Tier 1)	
<i>methylphenidate 10mg er tab</i>	\$0 (Tier 2)	
<i>methylphenidate 10mg tab</i>	\$0 (Tier 1)	
<i>methylphenidate 18mg er osmotic tab</i>	\$0 (Tier 2)	
<i>methylphenidate 1mg/ml oral soln</i>	\$0 (Tier 2)	QL=1800 ML/30 Days
<i>methylphenidate 20mg er tab</i>	\$0 (Tier 2)	
<i>methylphenidate 20mg tab</i>	\$0 (Tier 1)	
<i>methylphenidate 27mg er osmotic tab</i>	\$0 (Tier 2)	
<i>methylphenidate 2mg/ml oral soln</i>	\$0 (Tier 2)	QL=900 ML/30 Days
<i>methylphenidate 36mg er osmotic tab</i>	\$0 (Tier 2)	
<i>methylphenidate 54mg er osmotic tab</i>	\$0 (Tier 2)	
<i>methylphenidate 5mg tab</i>	\$0 (Tier 1)	
<i>modafinil 100mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>modafinil 200mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
BETHKIS NEB SOLN 300/4ML*	\$0 (Tier 2*)	
TOBRAMYCIN INJ 1.2GM/30ML*	\$0 (Tier 1*)	
TOBRAMYCIN NEB SOLN 300/4ML*	\$0 (Tier 1*)	
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
<i>leflunomide 10mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>leflunomide 20mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
OLUMIANT 1MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
OLUMIANT 2MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
OLUMIANT 4MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
RINVOQ 15MG ER TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
RINVOQ 1MG/ML ORAL SOLN	25% (Tier 5)	NDS PA QL=360 ML/30 Days
RINVOQ 30MG ER TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
RINVOQ 45MG ER TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>tofacitinib 10mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>tofacitinib 11mg er tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>tofacitinib 1mg/ml oral soln</i>	25% (Tier 5)	NDS PA QL=300 ML/30 Days
<i>tofacitinib 22mg er tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>tofacitinib 5mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
ALL DAY PAIN RELIEF TAB 220MG*	\$0 (Tier 1*)	
ALL DAY PAIN TAB 220MG*	\$0 (Tier 1*)	
<i>celecoxib 100mg cap</i>	\$0 (Tier 1)	
<i>celecoxib 200mg cap</i>	\$0 (Tier 1)	
<i>celecoxib 400mg cap</i>	\$0 (Tier 1)	
<i>celecoxib 50mg cap</i>	\$0 (Tier 1)	
<i>diclofenac potassium 50mg tab</i>	\$0 (Tier 1)	
<i>diclofenac sodium 1.5% topical soln</i>	\$0 (Tier 2)	QL=300 ML/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>diclofenac sodium 100mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>diclofenac sodium 25mg dr tab</i>	\$0 (Tier 1)	QL=240 EA/30 Days
<i>diclofenac sodium 50mg dr tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>diclofenac sodium 75mg dr tab</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>diflunisal 500mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>etodolac 200mg cap</i>	\$0 (Tier 2)	QL=150 EA/30 Days
<i>etodolac 300mg cap</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>etodolac 400mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>etodolac 500mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>ibu 600mg tab</i>	\$0 (Tier 1)	
<i>ibu 800mg tab</i>	\$0 (Tier 1)	
<i>ibuprofen 400mg tab</i>	\$0 (Tier 1)	
<i>ibuprofen 600mg tab</i>	\$0 (Tier 1)	
<i>ibuprofen 800mg tab</i>	\$0 (Tier 1)	
IBUPROFEN CAP 200MG*	\$0 (Tier 1*)	
IBUPROFEN CHEW TAB 100MG*	\$0 (Tier 1*)	
IBUPROFEN SUSP 100/5ML*	\$0 (Tier 1*)	
IBUPROFEN SUSP 100MG/5ML*	\$0 (Tier 1*)	
IBUPROFEN SUSP 40MG/ML*	\$0 (Tier 1*)	
IBUPROFEN TAB 200 MG*	\$0 (Tier 1*)	
IBUPROFEN TAB 200MG*	\$0 (Tier 1*)	
<i>indomethacin 25mg cap</i>	\$0 (Tier 1)	
<i>indomethacin 50mg cap</i>	\$0 (Tier 1)	
<i>indomethacin 75mg er cap</i>	\$0 (Tier 1)	
<i>ketorolac tromethamine 10mg tab</i>	\$0 (Tier 2)	QL=20 EA/5 Days
<i>meloxicam 15mg tab</i>	\$0 (Tier 1)	
<i>meloxicam 7.5mg tab</i>	\$0 (Tier 1)	
<i>nabumetone 500mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>nabumetone 750mg tab</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>naproxen 250mg tab</i>	\$0 (Tier 1)	
<i>naproxen 375mg dr tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>naproxen 375mg tab</i>	\$0 (Tier 1)	
<i>naproxen 500mg tab</i>	\$0 (Tier 1)	
NAPROXEN SODIUM TAB 220MG*	\$0 (Tier 1*)	
NAPROXEN TAB 220MG*	\$0 (Tier 1*)	
<i>piroxicam 10mg cap</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>piroxicam 20mg cap</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>sulindac 150mg tab</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>sulindac 200mg tab</i>	\$0 (Tier 1)	QL=60 EA/30 Days
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
MENSTRUAL TAB PAIN RLF*	\$0 (Tier 1*)	
MIGRAINE RELIEF TAB*	\$0 (Tier 1*)	
ANALGESICS OTHER		
8HR ARTHRITS ER TAB 650MG*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ACETAMINOPHEN ER TAB 650MG*	\$0 (Tier 1*)	
ACETAMINOPHEN LIQ 160/5ML*	\$0 (Tier 1*)	
ACETAMINOPHEN LIQUID 160MG/5ML*	\$0 (Tier 1*)	
ACETAMINOPHEN LIQUID 500MG/15ML*	\$0 (Tier 1*)	
ACETAMINOPHEN RAPID TAB 80MG*	\$0 (Tier 1*)	
ACETAMINOPHEN SOLN 160/5ML*	\$0 (Tier 1*)	
ACETAMINOPHEN SUPP 120MG*	\$0 (Tier 1*)	
ACETAMINOPHEN SUPP 650MG*	\$0 (Tier 1*)	
ACETAMINOPHEN SUSP 160MG/5ML*	\$0 (Tier 1*)	
ACETAMINOPHEN SUSP 650MG*	\$0 (Tier 1*)	
ACETAMINOPHEN TAB 325MG*	\$0 (Tier 1*)	
ACETAMINOPHEN TAB 500MG*	\$0 (Tier 1*)	
ACETAMINOPHEN TAB 650MG*	\$0 (Tier 1*)	
ACETAMINOPHN LIQUID 1000MG*	\$0 (Tier 1*)	
ACETAMINOPHN TAB 500MG*	\$0 (Tier 1*)	
CHILD PAIN CHEW 160MG*	\$0 (Tier 1*)	
MAPAP CAP 500MG*	\$0 (Tier 1*)	
MAPAP LIQUID*	\$0 (Tier 1*)	
M-PAP LIQUID 160/5ML*	\$0 (Tier 1*)	
SALICYLATES		
ASPIRIN ADULT TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN CHEW TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN EC TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN LOW TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN LOW DOSE CHEW TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN LOW DOSE EC TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN LOW TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN REGIMEN TAB 81MG*	\$0 (Tier 1*)	
ASPIRIN TAB 325MG*	\$0 (Tier 1*)	
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>buprenorphine 10mcg/hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>buprenorphine 15mcg/hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>buprenorphine 20mcg/hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>buprenorphine 5mcg/hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>buprenorphine 7.5mcg/hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>fentanyl 100mcg/hr patch</i>	\$0 (Tier 2)	QL=10 EA/30 Days
<i>fentanyl 12mcg/hr patch</i>	\$0 (Tier 2)	QL=10 EA/30 Days
<i>fentanyl 25mcg/hr patch</i>	\$0 (Tier 2)	QL=10 EA/30 Days
<i>fentanyl 50mcg/hr patch</i>	\$0 (Tier 2)	QL=10 EA/30 Days
<i>fentanyl 75mcg/hr patch</i>	\$0 (Tier 2)	QL=10 EA/30 Days
<i>hydromorphone 2mg tab</i>	\$0 (Tier 1)	QL=450 EA/30 Days
<i>hydromorphone 4mg tab</i>	\$0 (Tier 1)	QL=240 EA/30 Days
<i>hydromorphone 8mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>methadone 10mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
METHADONE 1MG/ML ORAL SOLN	\$0 (Tier 1)	QL=3600 ML/30 Days
METHADONE 2MG/ML ORAL SOLN	\$0 (Tier 2)	QL=1800 ML/30 Days
<i>methadone 5mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>morphine sulfate 100mg er tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>morphine sulfate 15mg er tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>morphine sulfate 15mg tab</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>morphine sulfate 200mg er tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
MORPHINE SULFATE 20MG/5ML ORAL SOLN	\$0 (Tier 1)	QL=900 ML/30 Days
<i>morphine sulfate 20mg/ml oral soln</i>	\$0 (Tier 1)	QL=180 ML/30 Days
<i>morphine sulfate 2mg/ml oral soln</i>	\$0 (Tier 1)	QL=1800 ML/30 Days
<i>morphine sulfate 30mg er tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>morphine sulfate 30mg tab</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>morphine sulfate 60mg er tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>oxycodone 10mg tab</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>oxycodone 15mg tab</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>oxycodone 1mg/ml oral soln</i>	\$0 (Tier 2)	QL=5400 ML/30 Days
<i>oxycodone 20mg tab</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>oxycodone 30mg tab</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>oxycodone 5mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>tramadol 100mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>tramadol 200mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>tramadol 300mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>tramadol 50mg tab</i>	\$0 (Tier 1)	QL=240 EA/30 Days
OPIOID COMBINATIONS		
ACETAMINOPHEN/CODEINE PHOSPHATE 120-12MG/5ML ORAL SOLN	\$0 (Tier 2)	QL=4980 ML/30 Days
<i>codeine phosphate/acetaminophen 15-300mg tab</i>	\$0 (Tier 1)	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 30-300mg tab</i>	\$0 (Tier 1)	QL=390 EA/30 Days
<i>codeine phosphate/acetaminophen 60-300mg tab</i>	\$0 (Tier 1)	QL=390 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	\$0 (Tier 2)	QL=5400 ML/30 Days
<i>hydrocodone bitartrate/acetaminophen 10-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 5-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>hydrocodone bitartrate/acetaminophen 7.5-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>hydrocodone bitartrate/ibuprofen 7.5-200mg tab</i>	\$0 (Tier 2)	QL=480 EA/30 Days
<i>oxycodone/acetaminophen 10-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 2.5-325mg tab</i>	\$0 (Tier 2)	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 5-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>oxycodone/acetaminophen 7.5-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>tramadol/acetaminophen 37.5-325mg tab</i>	\$0 (Tier 1)	QL=360 EA/30 Days
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol 100mg cap</i>	\$0 (Tier 2)	
<i>danazol 200mg cap</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>danazol 50mg cap</i>	\$0 (Tier 2)	
<i>testosterone 1% (12.5mg/act) topical gel pump</i>	\$0 (Tier 2)	PA QL=300 GM/30 Days
<i>testosterone 1% (25mg/2.5gm) topical gel packet</i>	\$0 (Tier 2)	PA QL=300 GM/30 Days
<i>testosterone 1% (50mg/5gm) topical gel packet</i>	\$0 (Tier 2)	PA QL=300 GM/30 Days
<i>testosterone 1.62% (20.25mg/act) topical gel pump</i>	\$0 (Tier 2)	PA QL=150 GM/30 Days
<i>testosterone 30mg/act topical soln</i>	\$0 (Tier 2)	PA QL=180 ML/30 Days
<i>testosterone cypionate 100mg/ml inj</i>	\$0 (Tier 2)	
<i>testosterone cypionate 200mg/ml (1ml) inj</i>	\$0 (Tier 2)	
<i>testosterone cypionate 200mg/ml inj</i>	\$0 (Tier 2)	
TESTOSTERONE ENANTHATE 200MG/ML INJ	\$0 (Tier 2)	QL=5 ML/28 Days
ANORECTAL AGENTS		
RECTAL COMBINATIONS		
HEMORRHOIDAL CREAM*	\$0 (Tier 1*)	
HEMORRHOIDAL SUPP*	\$0 (Tier 1*)	
ANORECTAL AND RELATED PRODUCTS		
RECTAL COMBINATIONS		
HEMORRHOIDAL OINT*	\$0 (Tier 1*)	
HEMORRHOIDAL OINTMENT*	\$0 (Tier 1*)	
HEMORRHOIDAL SUPP*	\$0 (Tier 1*)	
RECTAL LOCAL ANESTHETICS		
LIDOCAINE CREAM 5%*	\$0 (Tier 1*)	
RECTAL PRODUCTS - MISC.		
<i>hydrocortisone 1.67mg/ml enema</i>	\$0 (Tier 2)	
<i>hydrocortisone 2.5% perianal cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>nitroglycerin 0.4% rectal ointment</i>	\$0 (Tier 2)	QL=30 GM/30 Days
<i>procto-med hc 2.5% perianal cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>proctosol 2.5% perianal cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>proctozone hc 2.5% perianal cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
ANTACIDS		
ANTACID COMBINATIONS		
ACID GONE SUSP*	\$0 (Tier 2*)	
ALUMINUM/MAGNESIUM/SIMETHICONE*	\$0 (Tier 1*)	
ANTACID CHEW*	\$0 (Tier 1*)	
ANTACID MAXIMUM STRENGTH SUSP*	\$0 (Tier 1*)	
ANTACID MINT SUSP*	\$0 (Tier 1*)	
ANTACID REGULAR STRENGTH SUSP*	\$0 (Tier 1*)	
ANTACID/ANTIGAS SUSP*	\$0 (Tier 1*)	
ANTACIDE/SIMETHICONE SUSP*	\$0 (Tier 1*)	
HEARTBRN REL SUSP CHERRY*	\$0 (Tier 1*)	
MINTOX PLUS CHEW TAB*	\$0 (Tier 1*)	
ANTACIDS - ALUMINUM SALTS		
ALUMINUM HYDROXIDE GEL SUSP*	\$0 (Tier 2*)	
ANTACIDS - BICARBONATE		
SODIUM BICARBONATE 650MG*	\$0 (Tier 1*)	
SODIUM BICARBONATE TAB 325MG*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SODIUM BICARBONATE TAB 650MG*	\$0 (Tier 1*)	
ANTACIDS - CALCIUM SALTS		
ANTACID CHEW 500MG*	\$0 (Tier 1*)	
ANTACID CHEW 750MG*	\$0 (Tier 1*)	
ANTACID CHEW TAB 1000MG*	\$0 (Tier 1*)	
ANTACID CHEW TAB 750MG*	\$0 (Tier 1*)	
CALCIUM ANTACID CHEW 750MG*	\$0 (Tier 1*)	
CALCIUM CARBONATE CHEW TAB 500MG*	\$0 (Tier 1*)	
CALCIUM CARBONATE SUSP*	\$0 (Tier 2*)	
CALCIUM CARBONATE TAB 648MG*	\$0 (Tier 2*)	PA
SMOOTH ANTACID CHEW FRUIT*	\$0 (Tier 1*)	
ANTACIDS - MAGNESIUM SALTS		
MAG 440 TAB 440MG*	\$0 (Tier 2*)	
MAG OXIDE TAB 400MG*	\$0 (Tier 1*)	
MAGNESIUM OXIDE TAB 400MG*	\$0 (Tier 1*)	
MAGNESIUM OXIDE TAB 420MG*	\$0 (Tier 1*)	PA
ANTHELMINTICS		
ANTHELMINTICS		
FT PINWORM SUSP 144MG/ML*	\$0 (Tier 1*)	
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS		
ALCOHOL DETERRENTS/ANTI-CRAVING		
<i>acamprosate calcium 333mg dr tab</i>	\$0 (Tier 2)	
<i>disulfiram 250mg tab</i>	\$0 (Tier 2)	
<i>naltrexone 50mg tab</i>	\$0 (Tier 2)	
VIVITROL 380MG INJ	25% (Tier 5)	NDS
OPIOID DEPENDENCE TREATMENTS		
<i>buprenorphine 2mg sl tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>buprenorphine 8mg sl tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>buprenorphine/naloxone 12-3mg sl film</i>	\$0 (Tier 1)	QL=90 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl film</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>buprenorphine/naloxone 2-0.5mg sl tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>buprenorphine/naloxone 4-1mg sl film</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl film</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>buprenorphine/naloxone 8-2mg sl tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
OPIOID REVERSAL AGENTS		
KLOXXADO 8MG/0.1ML NASAL SPRAY	25% (Tier 3)	
NALOXONE 0.4MG/ML CARTRIDGE	\$0 (Tier 2)	
<i>naloxone 0.4mg/ml inj</i>	\$0 (Tier 1)	
<i>naloxone 0.4mg/ml syringe</i>	\$0 (Tier 1)	
<i>naloxone 2mg/2ml syringe</i>	\$0 (Tier 1)	
OPVEE 2.7MG/0.1ML NASAL SPRAY	25% (Tier 3)	
ZURNAI 1.5MG/0.5ML AUTO-INJECTOR	25% (Tier 3)	
SMOKING CESSATION AGENTS		
<i>bupropion (12hr) 150mg er tab</i>	\$0 (Tier 1)	
NICOTROL 10MG/ML NASAL INHALER	25% (Tier 3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>varenicline tab 0.5mg/1mg first month pack (53)</i>	\$0 (Tier 2)	QL=53 EA/28 Days
<i>varenicline tartrate 0.5mg tab</i>	\$0 (Tier 2)	QL=56 EA/28 Days
<i>varenicline tartrate 1mg tab</i>	\$0 (Tier 2)	QL=56 EA/28 Days
<i>varenicline tartrate 1mg tab pack (56)</i>	\$0 (Tier 2)	QL=56 EA/28 Days
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone 10mg tab</i>	\$0 (Tier 1)	
<i>buspirone 15mg tab</i>	\$0 (Tier 1)	
<i>buspirone 30mg tab</i>	\$0 (Tier 1)	
<i>buspirone 5mg tab</i>	\$0 (Tier 1)	
<i>buspirone 7.5mg tab</i>	\$0 (Tier 1)	
<i>hydroxyzine 10mg tab</i>	\$0 (Tier 1)	
<i>hydroxyzine 25mg tab</i>	\$0 (Tier 1)	
<i>hydroxyzine 2mg/ml oral soln</i>	\$0 (Tier 2)	
<i>hydroxyzine 50mg tab</i>	\$0 (Tier 1)	
<i>hydroxyzine pamoate 25mg cap</i>	\$0 (Tier 1)	
<i>hydroxyzine pamoate 50mg cap</i>	\$0 (Tier 1)	
BENZODIAZEPINES		
<i>alprazolam 0.25mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>alprazolam 0.5mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>alprazolam 1mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>alprazolam 2mg tab</i>	\$0 (Tier 1)	QL=150 EA/30 Days
<i>chlordiazepoxide 10mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>chlordiazepoxide 25mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>chlordiazepoxide 5mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>clorazepate dipotassium 15mg tab</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>clorazepate dipotassium 3.75mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>clorazepate dipotassium 7.5mg tab</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>diazepam 10mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>diazepam 1mg/ml oral soln</i>	\$0 (Tier 2)	QL=1200 ML/30 Days
<i>diazepam 2mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>diazepam 5mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>diazepam 5mg/ml oral soln</i>	\$0 (Tier 2)	QL=240 ML/30 Days
<i>lorazepam 0.5mg tab</i>	\$0 (Tier 1)	QL=150 EA/30 Days
<i>lorazepam 1mg tab</i>	\$0 (Tier 1)	QL=150 EA/30 Days
<i>lorazepam 2mg tab</i>	\$0 (Tier 1)	QL=150 EA/30 Days
<i>lorazepam 2mg/ml oral soln</i>	\$0 (Tier 1)	QL=150 ML/30 Days
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
BRONCHODILATORS - ANTICHOLINERGICS		
<i>YUPELRI SOLN*</i>	\$0 (Tier 2*)	
SYMPATHOMIMETICS		
<i>FORMOTEROL NEB SOLN 20/2ML*</i>	\$0 (Tier 1*)	
<i>FORMOTEROL NEB SOLN 20MCG/2ML*</i>	\$0 (Tier 1*)	
<i>LEVALBUTEROL NEB SOLN 0.31MG*</i>	\$0 (Tier 1*)	
<i>LEVALBUTEROL NEB SOLN 0.63MG*</i>	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LEVALBUTEROL NEB SOLN 1.25MG*	\$0 (Tier 1*)	
LEVALBUTEROL NEB SOLN 1.25MG/0.5ML*	\$0 (Tier 1*)	
PERFOROMIST NEB SOLN 20MCG*	\$0 (Tier 2*)	
S2 NEB SOLN 2.2.5%*	\$0 (Tier 2*)	
ANTIBACTERIALS		
AMINOGLYCOSIDES		
<i>amikacin 250mg/ml inj</i>	\$0 (Tier 2)	
ARIKAYCE 590MG/8.4ML INH SUSP	25% (Tier 5)	NDS PA QL=235.20 ML/28 Days
GENTAMICIN 0.8MG/ML INJ	\$0 (Tier 2)	
GENTAMICIN 1.2MG/ML INJ	\$0 (Tier 2)	
GENTAMICIN 1.6MG/ML INJ	\$0 (Tier 2)	
GENTAMICIN 1MG/ML INJ	\$0 (Tier 2)	
<i>gentamicin 40mg/ml inj</i>	\$0 (Tier 2)	
<i>neomycin sulfate 500mg tab</i>	\$0 (Tier 1)	
STREPTOMYCIN 1GM INJ	25% (Tier 5)	NDS
TOBI PODHALER 28MG PACK (224)	25% (Tier 5)	NDS PA QL=224 EA/28 Days
TOBRAMYCIN 10MG/ML INJ	\$0 (Tier 2)	
<i>tobramycin 300mg/5ml neb soln</i>	\$0 (Tier 2)	PA QL=280 ML/28 Days
<i>tobramycin 80mg/2ml inj</i>	\$0 (Tier 2)	
ANTIBACTERIALS, OTHER		
<i>aztreonam 1gm inj</i>	\$0 (Tier 2)	
<i>aztreonam 2gm inj</i>	\$0 (Tier 2)	
CAYSTON 75MG/ML NEB SOLN	25% (Tier 5)	PA QL=84 ML/56 Days
CILASTATIN/IMIPENEM 250-250MG INJ	\$0 (Tier 2)	
<i>cilastatin/imipenem 500-500mg inj</i>	\$0 (Tier 2)	
<i>ciprofloxacin 250mg tab</i>	\$0 (Tier 1)	
CIPROFLOXACIN 2MG/ML INJ	\$0 (Tier 2)	
<i>ciprofloxacin 500mg tab</i>	\$0 (Tier 1)	
<i>ciprofloxacin 750mg tab</i>	\$0 (Tier 1)	
<i>clindamycin 150mg cap</i>	\$0 (Tier 1)	
<i>clindamycin 2% vaginal cream</i>	\$0 (Tier 2)	
<i>clindamycin 300mg cap</i>	\$0 (Tier 1)	
<i>clindamycin 300mg/2ml inj</i>	\$0 (Tier 2)	
<i>clindamycin 300mg/50ml inj</i>	\$0 (Tier 2)	
<i>clindamycin 600mg/4ml inj</i>	\$0 (Tier 2)	
<i>clindamycin 600mg/50ml inj</i>	\$0 (Tier 2)	
<i>clindamycin 75mg cap</i>	\$0 (Tier 1)	
<i>clindamycin 75mg/5ml oral soln</i>	\$0 (Tier 2)	
<i>clindamycin 900mg/50ml inj</i>	\$0 (Tier 2)	
<i>clindamycin 900mg/6ml inj</i>	\$0 (Tier 2)	
<i>colistin 75mg/ml inj</i>	\$0 (Tier 2)	
<i>daptomycin 500mg inj</i>	\$0 (Tier 2)	
<i>doxy 100mg inj</i>	\$0 (Tier 2)	
<i>doxycycline hyclate 100mg cap</i>	\$0 (Tier 1)	
<i>doxycycline hyclate 100mg inj</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>doxycycline hyclate 100mg tab</i>	\$0 (Tier 1)	
<i>doxycycline hyclate 20mg tab</i>	\$0 (Tier 1)	
<i>doxycycline hyclate 50mg cap</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate 100mg cap</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate 100mg tab</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate 50mg cap</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate 50mg tab</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate 5mg/ml oral susp</i>	\$0 (Tier 2)	
<i>doxycycline monohydrate 75mg tab</i>	\$0 (Tier 1)	
<i>ertapenem 1gm inj</i>	\$0 (Tier 2)	
<i>fosfomycin 3gm powder for oral soln</i>	\$0 (Tier 2)	
<i>levofloxacin 250mg tab</i>	\$0 (Tier 1)	
<i>levofloxacin 25mg/ml oral soln</i>	\$0 (Tier 2)	
<i>levofloxacin 500mg tab</i>	\$0 (Tier 1)	
<i>levofloxacin 500mg/100ml inj</i>	\$0 (Tier 2)	
<i>levofloxacin 750mg tab</i>	\$0 (Tier 1)	
<i>levofloxacin 750mg/150ml inj</i>	\$0 (Tier 2)	
<i>linezolid 100mg/5ml oral susp</i>	\$0 (Tier 2)	QL=1800 ML/30 Days
<i>linezolid 600mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>linezolid 600mg/300ml inj</i>	\$0 (Tier 2)	
<i>meropenem 1gm inj</i>	\$0 (Tier 2)	
<i>meropenem 500mg inj</i>	\$0 (Tier 2)	
<i>methenamine hippurate 1gm tab</i>	\$0 (Tier 2)	
<i>metronidazole 0.75% vaginal gel</i>	\$0 (Tier 1)	
<i>metronidazole 250mg tab</i>	\$0 (Tier 1)	
<i>metronidazole 500mg tab</i>	\$0 (Tier 1)	
<i>metronidazole 5mg/ml inj</i>	\$0 (Tier 2)	
<i>minocycline 100mg cap</i>	\$0 (Tier 1)	
<i>minocycline 50mg cap</i>	\$0 (Tier 1)	
<i>minocycline 75mg cap</i>	\$0 (Tier 1)	
MOXIFLOXACIN 1.6MG/ML INJ	\$0 (Tier 2)	
<i>moxifloxacin 400mg tab</i>	\$0 (Tier 2)	
<i>nitrofurantoin macro/nitrofurantoin mono 100mg cap</i>	\$0 (Tier 1)	
<i>nitrofurantoin macrocrystals 100mg cap</i>	\$0 (Tier 1)	
<i>nitrofurantoin macrocrystals 50mg cap</i>	\$0 (Tier 1)	
<i>sulfadiazine 500mg tab</i>	\$0 (Tier 2)	
<i>sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp</i>	\$0 (Tier 2)	
<i>sulfamethoxazole/trimethoprim 400-80mg tab</i>	\$0 (Tier 1)	
<i>sulfamethoxazole/trimethoprim 800-160mg tab</i>	\$0 (Tier 1)	
<i>tetracycline 250mg cap</i>	\$0 (Tier 2)	
<i>tetracycline 500mg cap</i>	\$0 (Tier 2)	
<i>tigecycline 50mg inj</i>	\$0 (Tier 2)	
<i>tinidazole 250mg tab</i>	\$0 (Tier 2)	
<i>tinidazole 500mg tab</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>trimethoprim 100mg tab</i>	\$0 (Tier 2)	
<i>vancomycin 100mg/ml inj</i>	\$0 (Tier 2)	
<i>vancomycin 125mg cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>vancomycin 1gm inj</i>	\$0 (Tier 2)	
<i>vancomycin 250mg cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>vancomycin 500mg inj</i>	\$0 (Tier 2)	
<i>vancomycin 750mg inj</i>	\$0 (Tier 2)	
XIFAXAN 200MG TAB	25% (Tier 3)	QL=9 EA/3 Days
XIFAXAN 550MG TAB	25% (Tier 3)	PA QL=60 EA/30 Days
BETA-LACTAM, CEPHALOSPORINS		
CEFACLOR 250MG CAP	\$0 (Tier 2)	
CEFACLOR 500MG CAP	\$0 (Tier 2)	
<i>cefadroxil 100mg/ml oral susp</i>	\$0 (Tier 2)	
<i>cefadroxil 500mg cap</i>	\$0 (Tier 1)	
<i>cefadroxil 50mg/ml oral susp</i>	\$0 (Tier 2)	
<i>cefazolin 1gm inj</i>	\$0 (Tier 2)	
<i>cefazolin 200mg/ml inj</i>	\$0 (Tier 2)	
<i>cefazolin 500mg inj</i>	\$0 (Tier 2)	
<i>cefdinir 25mg/ml oral susp</i>	\$0 (Tier 2)	
<i>cefdinir 300mg cap</i>	\$0 (Tier 1)	
<i>cefdinir 50mg/ml oral susp</i>	\$0 (Tier 2)	
<i>cefepime 1gm inj</i>	\$0 (Tier 2)	
<i>cefepime 2gm inj</i>	\$0 (Tier 2)	
<i>cefixime 400mg cap</i>	\$0 (Tier 2)	
<i>cefoxitin 1gm inj</i>	\$0 (Tier 2)	
<i>cefoxitin 200mg/ml inj</i>	\$0 (Tier 2)	
<i>cefoxitin 2gm inj</i>	\$0 (Tier 2)	
<i>cefpodoxime 100mg tab</i>	\$0 (Tier 2)	
CEFPODOXIME 10MG/ML ORAL SUSP	\$0 (Tier 2)	
<i>cefpodoxime 200mg tab</i>	\$0 (Tier 2)	
CEFPODOXIME 20MG/ML ORAL SUSP	\$0 (Tier 2)	
<i>cefprozil 250mg tab</i>	\$0 (Tier 1)	
<i>cefprozil 25mg/ml oral susp</i>	\$0 (Tier 2)	
<i>cefprozil 500mg tab</i>	\$0 (Tier 1)	
<i>cefprozil 50mg/ml oral susp</i>	\$0 (Tier 2)	
<i>ceftaroline fosamil 400mg inj</i>	25% (Tier 5)	NDS
<i>ceftaroline fosamil 600mg inj</i>	25% (Tier 5)	NDS
<i>ceftazidime 1gm inj</i>	\$0 (Tier 2)	
CEFTAZIDIME 200MG/ML INJ	\$0 (Tier 2)	
<i>ceftazidime 2gm inj</i>	\$0 (Tier 2)	
<i>ceftriaxone 10gm inj</i>	\$0 (Tier 2)	
<i>ceftriaxone 1gm inj</i>	\$0 (Tier 2)	
<i>ceftriaxone 250mg inj</i>	\$0 (Tier 2)	
<i>ceftriaxone 2gm inj</i>	\$0 (Tier 2)	
<i>ceftriaxone 500mg inj</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cefuroxime 1500mg inj</i>	\$0 (Tier 2)	
<i>cefuroxime 250mg tab</i>	\$0 (Tier 1)	
<i>cefuroxime 500mg tab</i>	\$0 (Tier 1)	
<i>cefuroxime 750mg inj</i>	\$0 (Tier 2)	
<i>cephalexin 250mg cap</i>	\$0 (Tier 1)	
<i>cephalexin 25mg/ml oral susp</i>	\$0 (Tier 1)	
<i>cephalexin 500mg cap</i>	\$0 (Tier 1)	
<i>cephalexin 50mg/ml oral susp</i>	\$0 (Tier 1)	
<i>tazicef 1gm inj</i>	\$0 (Tier 2)	
<i>tazicef 2gm inj</i>	\$0 (Tier 2)	
TAZICEF 6GM INJ	\$0 (Tier 2)	
BETA-LACTAM, PENICILLINS		
AMOXICILLIN 125MG CHEW TAB	\$0 (Tier 1)	
<i>amoxicillin 250mg cap</i>	\$0 (Tier 1)	
AMOXICILLIN 250MG CHEW TAB	\$0 (Tier 1)	
<i>amoxicillin 25mg/ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin 40mg/ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin 500mg cap</i>	\$0 (Tier 1)	
<i>amoxicillin 500mg tab</i>	\$0 (Tier 1)	
<i>amoxicillin 50mg/ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin 80mg/ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin 875mg tab</i>	\$0 (Tier 1)	
<i>amoxicillin/clavulanate 250-125mg tab</i>	\$0 (Tier 1)	
<i>amoxicillin/clavulanate 500-125mg tab</i>	\$0 (Tier 1)	
<i>amoxicillin/clavulanate 875-125mg tab</i>	\$0 (Tier 1)	
<i>amoxicillin/k clavulanate 200-28.5mg/5ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin/k clavulanate 250-62.5mg/5ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin/k clavulanate 400-57mg/5ml oral susp</i>	\$0 (Tier 1)	
<i>amoxicillin/k clavulanate 600-42.9mg/5ml oral susp</i>	\$0 (Tier 1)	
<i>ampicillin 100mg/ml inj</i>	\$0 (Tier 2)	
<i>ampicillin 1gm inj</i>	\$0 (Tier 2)	
<i>ampicillin 2gm inj</i>	\$0 (Tier 2)	
<i>ampicillin 500mg cap</i>	\$0 (Tier 1)	
<i>ampicillin/sulbactam 1000-500mg inj</i>	\$0 (Tier 2)	
<i>ampicillin/sulbactam 100-50mg/ml inj</i>	\$0 (Tier 2)	
<i>ampicillin/sulbactam 2000-1000mg inj</i>	\$0 (Tier 2)	
BICILLIN L-A 1200000UNIT/2ML SYRINGE	25% (Tier 4)	
BICILLIN L-A 2400000UNIT/4ML SYRINGE	25% (Tier 4)	
BICILLIN L-A 600000UNIT/ML SYRINGE	25% (Tier 4)	
<i>dicloxacillin 250mg cap</i>	\$0 (Tier 2)	
<i>dicloxacillin 500mg cap</i>	\$0 (Tier 2)	
<i>nafcillin 100mg/ml inj</i>	\$0 (Tier 2)	
<i>nafcillin 1gm inj</i>	\$0 (Tier 2)	
<i>nafcillin 2gm inj</i>	\$0 (Tier 2)	
<i>oxacillin 100mg/ml inj</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>oxacillin 1gm inj</i>	\$0 (Tier 2)	
<i>oxacillin 2gm inj</i>	\$0 (Tier 2)	
<i>penicillin g potassium 1000000unit/ml inj</i>	\$0 (Tier 2)	
PENICILLIN G SODIUM 100000UNIT/ML INJ	\$0 (Tier 2)	
<i>penicillin v potassium 250mg tab</i>	\$0 (Tier 1)	
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN	\$0 (Tier 1)	
<i>penicillin v potassium 500mg tab</i>	\$0 (Tier 1)	
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN	\$0 (Tier 1)	
<i>piperacillin/tazobactam 2000-250mg inj</i>	\$0 (Tier 2)	
<i>piperacillin/tazobactam 3000-375mg inj</i>	\$0 (Tier 2)	
<i>piperacillin/tazobactam 36-4.5gm inj</i>	\$0 (Tier 2)	
<i>piperacillin/tazobactam 4000-500mg inj</i>	\$0 (Tier 2)	
MACROLIDES		
<i>azithromycin 20mg/ml oral susp</i>	\$0 (Tier 2)	
<i>azithromycin 250mg tab</i>	\$0 (Tier 1)	
<i>azithromycin 250mg tab pack (6)</i>	\$0 (Tier 1)	
<i>azithromycin 40mg/ml oral susp</i>	\$0 (Tier 2)	
<i>azithromycin 500mg inj</i>	\$0 (Tier 2)	
<i>azithromycin 500mg tab</i>	\$0 (Tier 1)	
<i>azithromycin 500mg tab pack (3)</i>	\$0 (Tier 1)	
<i>azithromycin 600mg tab</i>	\$0 (Tier 1)	
<i>clarithromycin 250mg tab</i>	\$0 (Tier 1)	
CLARITHROMYCIN 25MG/ML ORAL SUSP	\$0 (Tier 2)	
<i>clarithromycin 500mg tab</i>	\$0 (Tier 1)	
CLARITHROMYCIN 50MG/ML ORAL SUSP	\$0 (Tier 2)	
<i>erythromycin 250mg dr tab</i>	\$0 (Tier 2)	
<i>erythromycin 250mg tab</i>	\$0 (Tier 2)	
<i>erythromycin 333mg dr tab</i>	\$0 (Tier 2)	
<i>erythromycin 500mg dr tab</i>	\$0 (Tier 2)	
<i>erythromycin 500mg tab</i>	\$0 (Tier 2)	
<i>fidaxomicin 200mg tab</i>	\$0 (Tier 2)	PA QL=20 EA/10 Days
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
<i>anagrelide 0.5mg cap</i>	\$0 (Tier 2)	
<i>anagrelide 1mg cap</i>	\$0 (Tier 2)	
<i>aspirin/dipyridamole 25-200mg er cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>cilostazol 100mg tab</i>	\$0 (Tier 1)	
<i>cilostazol 50mg tab</i>	\$0 (Tier 1)	
<i>clopidogrel 75mg tab</i>	\$0 (Tier 1)	
<i>dabigatran etexilate mesylate 110mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>dabigatran etexilate mesylate 150mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>dabigatran etexilate mesylate 75mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>dipyridamole 25mg tab</i>	\$0 (Tier 2)	
<i>dipyridamole 50mg tab</i>	\$0 (Tier 2)	
<i>dipyridamole 75mg tab</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ELIQUIS 0.15MG SPRINKLE CAP	25% (Tier 3)	QL=70 EA/28 Days
ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (112)	25% (Tier 3)	QL=560 EA/28 Days
ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (28)	25% (Tier 3)	QL=140 EA/28 Days
ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (84)	25% (Tier 3)	QL=420 EA/28 Days
ELIQUIS 2.5MG TAB	25% (Tier 3)	QL=60 EA/30 Days
ELIQUIS 5MG TAB	25% (Tier 3)	QL=74 EA/30 Days
ELIQUIS 5MG TAB 30-DAY STARTER PACK (74)	25% (Tier 3)	QL=74 EA/30 Days
<i>enoxaparin sodium 100mg/1ml syringe</i>	\$0 (Tier 2)	
<i>enoxaparin sodium 120mg/0.8ml syringe</i>	\$0 (Tier 2)	
<i>enoxaparin sodium 150mg/1ml syringe</i>	\$0 (Tier 2)	
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	\$0 (Tier 2)	
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	\$0 (Tier 2)	
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	\$0 (Tier 2)	
<i>enoxaparin sodium 80mg/0.8ml syringe</i>	\$0 (Tier 2)	
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	\$0 (Tier 2)	
<i>fondaparinux sodium 2.5mg/0.5ml syringe</i>	\$0 (Tier 2)	
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	\$0 (Tier 2)	
<i>fondaparinux sodium 7.5mg/0.6ml syringe</i>	\$0 (Tier 2)	
<i>heparin sodium porcine 10000unit/ml inj</i>	\$0 (Tier 2)	
<i>heparin sodium porcine 1000unit/ml inj</i>	\$0 (Tier 2)	
<i>heparin sodium porcine 20000unit/ml inj</i>	\$0 (Tier 2)	
<i>heparin sodium porcine 5000unit/ml inj</i>	\$0 (Tier 2)	
<i>jantoven 10mg tab</i>	\$0 (Tier 1)	
<i>jantoven 1mg tab</i>	\$0 (Tier 1)	
<i>jantoven 2.5mg tab</i>	\$0 (Tier 1)	
<i>jantoven 2mg tab</i>	\$0 (Tier 1)	
<i>jantoven 3mg tab</i>	\$0 (Tier 1)	
<i>jantoven 4mg tab</i>	\$0 (Tier 1)	
<i>jantoven 5mg tab</i>	\$0 (Tier 1)	
<i>jantoven 6mg tab</i>	\$0 (Tier 1)	
<i>jantoven 7.5mg tab</i>	\$0 (Tier 1)	
<i>prasugrel 10mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>prasugrel 5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>rivaroxaban 2.5mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>ticagrelor 60mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>ticagrelor 90mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>warfarin sodium 10mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 1mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 2.5mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 2mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 3mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 4mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>warfarin sodium 5mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 6mg tab</i>	\$0 (Tier 1)	
<i>warfarin sodium 7.5mg tab</i>	\$0 (Tier 1)	
XARELTO 10MG TAB	25% (Tier 4)	QL=30 EA/30 Days
XARELTO 15MG TAB	25% (Tier 4)	QL=60 EA/30 Days
XARELTO 20MG TAB	25% (Tier 4)	QL=30 EA/30 Days
ANTICONVULSANTS		
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam 10mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>clobazam 2.5mg/ml oral susp</i>	\$0 (Tier 2)	QL=480 ML/30 Days
<i>clobazam 20mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>clonazepam 0.125mg odt</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>clonazepam 0.25mg odt</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>clonazepam 0.5mg odt</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>clonazepam 0.5mg tab</i>	\$0 (Tier 1)	QL=90 EA/30 Days
<i>clonazepam 1mg odt</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>clonazepam 1mg tab</i>	\$0 (Tier 1)	QL=90 EA/30 Days
<i>clonazepam 2mg odt</i>	\$0 (Tier 2)	QL=300 EA/30 Days
<i>clonazepam 2mg tab</i>	\$0 (Tier 1)	QL=300 EA/30 Days
<i>diazepam 10mg/2ml rectal gel</i>	\$0 (Tier 2)	QL=10 EA/30 Days
<i>diazepam 2.5mg/0.5ml rectal gel</i>	25% (Tier 3)	QL=10 EA/30 Days
<i>diazepam 20mg/4ml rectal gel</i>	\$0 (Tier 2)	QL=10 EA/30 Days
NAYZILAM 5MG/0.1ML NASAL SPRAY	25% (Tier 4)	QL=10 EA/30 Days
SYMPAZAN 10MG ORAL FILM	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
SYMPAZAN 20MG ORAL FILM	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
SYMPAZAN 5MG ORAL FILM	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	25% (Tier 4)	QL=10 EA/30 Days
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK	25% (Tier 4)	QL=10 EA/30 Days
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	25% (Tier 4)	QL=10 EA/30 Days
VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	25% (Tier 4)	QL=10 EA/30 Days
ANTICONVULSANTS - MISC.		
<i>brivaracetam 100mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 10mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 10mg/ml oral soln</i>	\$0 (Tier 2)	PA_NSO QL=600 ML/30 Days
<i>brivaracetam 25mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 50mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>brivaracetam 75mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>carbamazepine 100mg chew tab</i>	\$0 (Tier 2)	
<i>carbamazepine 100mg er cap</i>	\$0 (Tier 2)	
<i>carbamazepine 100mg er tab</i>	\$0 (Tier 2)	
<i>carbamazepine 200mg er cap</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>carbamazepine 200mg er tab</i>	\$0 (Tier 2)	
<i>carbamazepine 200mg tab</i>	\$0 (Tier 1)	
<i>carbamazepine 20mg/ml oral susp</i>	\$0 (Tier 2)	
<i>carbamazepine 300mg er cap</i>	\$0 (Tier 2)	
<i>carbamazepine 400mg er tab</i>	\$0 (Tier 2)	
DIACOMIT 250MG CAP	25% (Tier 5)	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 250MG POWDER FOR ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=360 EA/30 Days
DIACOMIT 500MG CAP	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
DIACOMIT 500MG POWDER FOR ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
DILANTIN 30MG ER CAP	\$0 (Tier 2)	
EPIDIOLEX 100MG/ML ORAL SOLN	25% (Tier 5)	NDS PA_NSO QL=600 ML/30 Days
<i>eslicarbazepine acetate 200mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 400mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>eslicarbazepine acetate 600mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>eslicarbazepine acetate 800mg tab</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
FINTEPLA 2.2MG/ML ORAL SOLN	25% (Tier 5)	NDS PA_NSO QL=360 ML/30 Days
<i>gabapentin 100mg cap</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>gabapentin 300mg cap</i>	\$0 (Tier 1)	QL=360 EA/30 Days
<i>gabapentin 400mg cap</i>	\$0 (Tier 1)	QL=270 EA/30 Days
<i>gabapentin 50mg/ml oral soln</i>	\$0 (Tier 2)	QL=2160 ML/30 Days
<i>gabapentin 600mg tab (neurontin equiv)</i>	\$0 (Tier 1)	QL=180 EA/30 Days
<i>gabapentin 800mg tab</i>	\$0 (Tier 1)	QL=135 EA/30 Days
<i>lacosamide 100mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>lacosamide 10mg/ml oral soln</i>	\$0 (Tier 2)	QL=1200 ML/30 Days
<i>lacosamide 150mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>lacosamide 200mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>lacosamide 50mg tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>lamotrigine 100mg tab</i>	\$0 (Tier 1)	
<i>lamotrigine 150mg tab</i>	\$0 (Tier 1)	
<i>lamotrigine 200mg tab</i>	\$0 (Tier 1)	
<i>lamotrigine 25mg chew tab</i>	\$0 (Tier 2)	
<i>lamotrigine 25mg tab</i>	\$0 (Tier 1)	
<i>lamotrigine 5mg chew tab</i>	\$0 (Tier 2)	
<i>levetiracetam 1000mg tab</i>	\$0 (Tier 1)	
<i>levetiracetam 100mg/ml oral soln</i>	\$0 (Tier 2)	
<i>levetiracetam 250mg tab</i>	\$0 (Tier 1)	
<i>levetiracetam 500mg er tab</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>levetiracetam 500mg tab</i>	\$0 (Tier 1)	
<i>levetiracetam 750mg er tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>levetiracetam 750mg tab</i>	\$0 (Tier 1)	
<i>oxcarbazepine 150mg tab</i>	\$0 (Tier 1)	
<i>oxcarbazepine 300mg tab</i>	\$0 (Tier 1)	
<i>oxcarbazepine 600mg tab</i>	\$0 (Tier 1)	
<i>oxcarbazepine 60mg/ml oral susp</i>	\$0 (Tier 2)	
<i>perampanel 0.5mg/ml oral susp</i>	\$0 (Tier 2)	PA_NSO QL=720 ML/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>perampanel 10mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>perampanel 12mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>perampanel 2mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>perampanel 4mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>perampanel 6mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>perampanel 8mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
PHENOBARBITAL 100MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 15MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 16.2MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 30MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 32.4MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 4MG/ML ORAL SOLN	\$0 (Tier 2)	QL=1500 ML/30 Days
PHENOBARBITAL 60MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 64.8MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
PHENOBARBITAL 97.2MG TAB	\$0 (Tier 1)	QL=120 EA/30 Days
<i>phenytek 200mg er cap</i>	\$0 (Tier 2)	
<i>phenytek 300mg er cap</i>	\$0 (Tier 2)	
<i>phenytoin 25mg/ml oral susp</i>	\$0 (Tier 1)	
<i>phenytoin 50mg chew tab</i>	\$0 (Tier 2)	
<i>phenytoin sodium 100mg er cap</i>	\$0 (Tier 2)	
<i>pregabalin 100mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>pregabalin 150mg cap</i>	\$0 (Tier 1)	QL=90 EA/30 Days
<i>pregabalin 200mg cap</i>	\$0 (Tier 1)	QL=90 EA/30 Days
<i>pregabalin 20mg/ml oral soln</i>	\$0 (Tier 2)	QL=900 ML/30 Days
<i>pregabalin 225mg cap</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>pregabalin 25mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>pregabalin 300mg cap</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>pregabalin 50mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>pregabalin 75mg cap</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>primidone 250mg tab</i>	\$0 (Tier 1)	
<i>primidone 50mg tab</i>	\$0 (Tier 1)	
<i>roweepra 500mg tab</i>	\$0 (Tier 1)	
<i>rufinamide 200mg tab</i>	\$0 (Tier 2)	PA_NSO QL=480 EA/30 Days
<i>rufinamide 400mg tab</i>	\$0 (Tier 2)	PA_NSO QL=240 EA/30 Days
<i>rufinamide 40mg/ml oral susp</i>	\$0 (Tier 2)	PA_NSO QL=2760 ML/30 Days
SPRITAM 250MG TAB FOR ORAL SUSP	25% (Tier 4)	PA_NSO QL=360 EA/30 Days
SPRITAM 500MG TAB FOR ORAL SUSP	25% (Tier 4)	PA_NSO QL=180 EA/30 Days
SUBVENITE 10MG/ML ORAL SUSP	25% (Tier 4)	PA_NSO QL=2160 ML/30 Days
<i>topiramate 100mg tab</i>	\$0 (Tier 1)	
<i>topiramate 15mg cap</i>	\$0 (Tier 2)	
<i>topiramate 200mg tab</i>	\$0 (Tier 1)	
<i>topiramate 25mg cap</i>	\$0 (Tier 2)	
<i>topiramate 25mg tab</i>	\$0 (Tier 1)	
<i>topiramate 25mg/ml oral soln</i>	\$0 (Tier 2)	PA_NSO QL=480 ML/30 Days
<i>topiramate 50mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ZONISADE 100MG/5ML ORAL SUSP	25% (Tier 4)	PA_NSO QL=900 ML/30 Days
<i>zonisamide 100mg cap</i>	\$0 (Tier 1)	
<i>zonisamide 25mg cap</i>	\$0 (Tier 1)	
<i>zonisamide 50mg cap</i>	\$0 (Tier 1)	
ZTALMY 50MG/ML ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=1100 ML/30 Days
CARBAMATES		
<i>felbamate 120mg/ml oral susp</i>	\$0 (Tier 2)	
<i>felbamate 400mg tab</i>	\$0 (Tier 2)	
<i>felbamate 600mg tab</i>	\$0 (Tier 2)	
XCOPRI 100MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
XCOPRI 150MG TAB	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
XCOPRI 200MG TAB	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
XCOPRI 25MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
XCOPRI 50MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
XCOPRI TAB 100/150MG MAINTENANCE PACK (56)	25% (Tier 4)	PA_NSO QL=56 EA/28 Days
XCOPRI TAB 12.5/25MG TITRATION PACK (28)	25% (Tier 4)	PA_NSO QL=28 EA/28 Days
XCOPRI TAB 150/200MG PACK (56)	25% (Tier 4)	PA_NSO QL=56 EA/28 Days
XCOPRI TAB 150/200MG TITRATION PACK (28)	25% (Tier 4)	PA_NSO QL=28 EA/28 Days
XCOPRI TAB 50/100MG TITRATION PACK (28)	25% (Tier 4)	PA_NSO QL=28 EA/28 Days
GABA MODULATORS		
TIAGABINE 12MG TAB	\$0 (Tier 2)	
TIAGABINE 16MG TAB	\$0 (Tier 2)	
<i>tiagabine 2mg tab</i>	\$0 (Tier 2)	
<i>tiagabine 4mg tab</i>	\$0 (Tier 2)	
<i>vigabatrin 500mg powder for oral soln</i>	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
<i>vigabatrin 500mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
SUCCINIMIDES		
<i>ethosuximide 250mg cap</i>	\$0 (Tier 2)	
<i>ethosuximide 50mg/ml oral soln</i>	\$0 (Tier 2)	
<i>methsuximide 300mg cap</i>	\$0 (Tier 2)	
VALPROIC ACID		
<i>divalproex sodium 125mg dr cap</i>	\$0 (Tier 2)	
<i>divalproex sodium 125mg dr tab</i>	\$0 (Tier 1)	
<i>divalproex sodium 250mg dr tab</i>	\$0 (Tier 1)	
<i>divalproex sodium 500mg dr tab</i>	\$0 (Tier 1)	
<i>valproic acid 250mg cap</i>	\$0 (Tier 2)	
<i>valproic acid 50mg/ml oral soln</i>	\$0 (Tier 2)	
ANTIDEPRESSANTS		
ANTIDEPRESSANTS - MISC.		
AUVELITY 105-45MG ER TAB	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
<i>bupropion 100mg tab</i>	\$0 (Tier 1)	
<i>bupropion 75mg tab</i>	\$0 (Tier 1)	
<i>bupropion sr (12hr) 100mg tab</i>	\$0 (Tier 1)	
<i>bupropion sr (12hr) 150mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>bupropion sr (12hr) 200mg tab</i>	\$0 (Tier 1)	
<i>bupropion xl (24hr) 150mg tab</i>	\$0 (Tier 1)	
<i>bupropion xl (24hr) 300mg tab</i>	\$0 (Tier 1)	
<i>mirtazapine 15mg odt</i>	\$0 (Tier 2)	
<i>mirtazapine 15mg tab</i>	\$0 (Tier 1)	
<i>mirtazapine 30mg odt</i>	\$0 (Tier 2)	
<i>mirtazapine 30mg tab</i>	\$0 (Tier 1)	
<i>mirtazapine 45mg odt</i>	\$0 (Tier 2)	
<i>mirtazapine 45mg tab</i>	\$0 (Tier 1)	
<i>mirtazapine 7.5mg tab</i>	\$0 (Tier 1)	
ZURZUVAE 20MG CAP	25% (Tier 5)	NDS PA_NSO QL=28 EA/14 Days
ZURZUVAE 25MG CAP	25% (Tier 5)	NDS PA_NSO QL=28 EA/14 Days
ZURZUVAE 30MG CAP	25% (Tier 5)	NDS PA_NSO QL=14 EA/14 Days
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12MG/24HR PATCH	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
EMSAM 6MG/24HR PATCH	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
EMSAM 9MG/24HR PATCH	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
MARPLAN 10MG TAB	25% (Tier 3)	QL=180 EA/30 Days
PHENELZINE 15MG TAB	25% (Tier 3)	
<i>tranylcypromine 10mg tab</i>	\$0 (Tier 2)	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram 10mg tab</i>	\$0 (Tier 1)	
<i>citalopram 20mg tab</i>	\$0 (Tier 1)	
<i>citalopram 2mg/ml oral soln</i>	\$0 (Tier 2)	QL=600 ML/30 Days
<i>citalopram 40mg tab</i>	\$0 (Tier 1)	
<i>escitalopram 10mg tab</i>	\$0 (Tier 1)	
<i>escitalopram 1mg/ml oral soln</i>	\$0 (Tier 2)	QL=600 ML/30 Days
<i>escitalopram 20mg tab</i>	\$0 (Tier 1)	
<i>escitalopram 5mg tab</i>	\$0 (Tier 1)	
<i>fluoxetine 10mg cap</i>	\$0 (Tier 1)	
<i>fluoxetine 20mg cap</i>	\$0 (Tier 1)	
<i>fluoxetine 40mg cap</i>	\$0 (Tier 1)	
<i>fluoxetine 4mg/ml oral soln</i>	\$0 (Tier 2)	QL=600 ML/30 Days
<i>fluoxetine 60mg tab</i>	\$0 (Tier 1)	
<i>fluvoxamine maleate 100mg tab</i>	\$0 (Tier 1)	
<i>fluvoxamine maleate 25mg tab</i>	\$0 (Tier 1)	
<i>fluvoxamine maleate 50mg tab</i>	\$0 (Tier 1)	
<i>paroxetine 10mg tab</i>	\$0 (Tier 1)	
PAROXETINE 10MG/5ML ORAL SUSP	\$0 (Tier 2)	QL=900 ML/30 Days
<i>paroxetine 12.5mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>paroxetine 20mg tab</i>	\$0 (Tier 1)	
<i>paroxetine 25mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>paroxetine 30mg tab</i>	\$0 (Tier 1)	
<i>paroxetine 37.5mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>paroxetine 40mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sertraline 100mg tab</i>	\$0 (Tier 1)	
<i>sertraline 20mg/ml oral soln</i>	\$0 (Tier 2)	QL=300 ML/30 Days
<i>sertraline 25mg tab</i>	\$0 (Tier 1)	
<i>sertraline 50mg tab</i>	\$0 (Tier 1)	
SEROTONIN MODULATORS		
EXXUA 18.2MG ER TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
EXXUA 18.2MG TAB TITRATION PACK (32)	25% (Tier 4)	PA_NSO QL=32 EA/180 Days
EXXUA 36.3MG ER TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
EXXUA 54.5MG ER TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
EXXUA 72.6MG ER TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
NEFAZODONE 100MG TAB	\$0 (Tier 2)	
NEFAZODONE 150MG TAB	\$0 (Tier 2)	
NEFAZODONE 200MG TAB	\$0 (Tier 2)	
NEFAZODONE 250MG TAB	\$0 (Tier 2)	
NEFAZODONE 50MG TAB	\$0 (Tier 2)	
RALDESY 10MG/ML ORAL SOLN	25% (Tier 4)	PA_NSO QL=1200 ML/30 Days
<i>trazodone 100mg tab</i>	\$0 (Tier 1)	
<i>trazodone 150mg tab</i>	\$0 (Tier 1)	
<i>trazodone 50mg tab</i>	\$0 (Tier 1)	
TRINTELLIX 10MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
TRINTELLIX 20MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
TRINTELLIX 5MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
<i>vilazodone 10mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>vilazodone 20mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>vilazodone 40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
<i>desvenlafaxine succinate 100mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>desvenlafaxine succinate 25mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>desvenlafaxine succinate 50mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
DRIZALMA 20MG DR SPRINKLE CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
DRIZALMA 30MG DR SPRINKLE CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
DRIZALMA 40MG DR SPRINKLE CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
DRIZALMA 60MG DR SPRINKLE CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
<i>duloxetine 20mg dr cap</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>duloxetine 30mg dr cap</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>duloxetine 60mg dr cap</i>	\$0 (Tier 1)	QL=60 EA/30 Days
FETZIMA 120MG ER CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
FETZIMA 20MG ER CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
FETZIMA 40MG ER CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
FETZIMA 80MG ER CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
FETZIMA ER CAP TITRATION PACK (28)	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
<i>venlafaxine 100mg tab</i>	\$0 (Tier 1)	
<i>venlafaxine 150mg er cap</i>	\$0 (Tier 1)	
<i>venlafaxine 25mg tab</i>	\$0 (Tier 1)	
<i>venlafaxine 37.5mg er cap</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>venlafaxine 37.5mg tab</i>	\$0 (Tier 1)	
<i>venlafaxine 50mg tab</i>	\$0 (Tier 1)	
<i>venlafaxine 75mg er cap</i>	\$0 (Tier 1)	
<i>venlafaxine 75mg tab</i>	\$0 (Tier 1)	
TRICYCLIC AGENTS		
<i>amitriptyline 100mg tab</i>	\$0 (Tier 1)	
<i>amitriptyline 10mg tab</i>	\$0 (Tier 1)	
<i>amitriptyline 150mg tab</i>	\$0 (Tier 1)	
<i>amitriptyline 25mg tab</i>	\$0 (Tier 1)	
<i>amitriptyline 50mg tab</i>	\$0 (Tier 1)	
<i>amitriptyline 75mg tab</i>	\$0 (Tier 1)	
<i>amoxapine 100mg tab</i>	\$0 (Tier 2)	
<i>amoxapine 150mg tab</i>	\$0 (Tier 2)	
<i>amoxapine 25mg tab</i>	\$0 (Tier 2)	
<i>amoxapine 50mg tab</i>	\$0 (Tier 2)	
<i>clomipramine 25mg cap</i>	\$0 (Tier 2)	
<i>clomipramine 50mg cap</i>	\$0 (Tier 2)	
<i>clomipramine 75mg cap</i>	\$0 (Tier 2)	
<i>desipramine 100mg tab</i>	\$0 (Tier 2)	
<i>desipramine 10mg tab</i>	\$0 (Tier 2)	
<i>desipramine 150mg tab</i>	\$0 (Tier 2)	
<i>desipramine 25mg tab</i>	\$0 (Tier 2)	
<i>desipramine 50mg tab</i>	\$0 (Tier 2)	
<i>desipramine 75mg tab</i>	\$0 (Tier 2)	
<i>doxepin 100mg cap</i>	\$0 (Tier 2)	
<i>doxepin 10mg cap</i>	\$0 (Tier 2)	
DOXEPIN 10MG/ML ORAL SOLN	\$0 (Tier 2)	
DOXEPIN 150MG CAP	\$0 (Tier 2)	
<i>doxepin 25mg cap</i>	\$0 (Tier 2)	
<i>doxepin 50mg cap</i>	\$0 (Tier 2)	
<i>doxepin 75mg cap</i>	\$0 (Tier 2)	
<i>imipramine 10mg tab</i>	\$0 (Tier 1)	
<i>imipramine 25mg tab</i>	\$0 (Tier 1)	
<i>imipramine 50mg tab</i>	\$0 (Tier 1)	
<i>nortriptyline 10mg cap</i>	\$0 (Tier 1)	
<i>nortriptyline 25mg cap</i>	\$0 (Tier 1)	
<i>nortriptyline 2mg/ml oral soln</i>	\$0 (Tier 2)	
<i>nortriptyline 50mg cap</i>	\$0 (Tier 1)	
<i>nortriptyline 75mg cap</i>	\$0 (Tier 1)	
<i>protriptyline 10mg tab</i>	\$0 (Tier 2)	
<i>protriptyline 5mg tab</i>	\$0 (Tier 2)	
<i>trimipramine 100mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>trimipramine 25mg cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>trimipramine 50mg cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
ANTIDIABETICS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIDIABETIC COMBINATIONS		
<i>dapagliflozin/metformin 10-1000mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>dapagliflozin/metformin 10-500mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>dapagliflozin/metformin 5-1000mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>dapagliflozin/metformin 5-500mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>glipizide/metformin 2.5-250mg tab</i>	\$0 (Tier 6)	QL=240 EA/30 Days
<i>glipizide/metformin 2.5-500mg tab</i>	\$0 (Tier 6)	QL=120 EA/30 Days
<i>glipizide/metformin 5-500mg tab</i>	\$0 (Tier 6)	QL=120 EA/30 Days
<i>glyburide/metformin 1.25-250mg tab</i>	\$0 (Tier 6)	
<i>glyburide/metformin 2.5-500mg tab</i>	\$0 (Tier 6)	
<i>glyburide/metformin 5-500mg tab</i>	\$0 (Tier 6)	
<i>metformin/pioglitazone 150-15mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>metformin/pioglitazone 850-15mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>metformin/sitagliptin phosphate 1000-100mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>metformin/sitagliptin phosphate 1000-50mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>metformin/sitagliptin phosphate 1000-50mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>metformin/sitagliptin phosphate 500-50mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>metformin/sitagliptin phosphate 500-50mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
DIABETIC OTHER		
<i>acarbose 100mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>acarbose 25mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>acarbose 50mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
BAQSIMI 3MG/DOSE NASAL POWDER	25% (Tier 3)	QL=2 EA/7 Days
<i>diazoxide 50mg/ml oral susp</i>	\$0 (Tier 2)	
GVOKE 1MG/0.2ML INJ	25% (Tier 3)	QL=.40 ML/7 Days
GVOKE 1MG/0.2ML SYRINGE	25% (Tier 3)	QL=.40 ML/7 Days
GVOKE HYPOPEN 0.5MG/0.1ML AUTO-INJECTOR	25% (Tier 3)	QL=.20 ML/7 Days
GVOKE HYPOPEN 1MG/0.2ML AUTO-INJECTOR	25% (Tier 3)	QL=.40 ML/7 Days
<i>metformin 1000mg tab</i>	\$0 (Tier 6)	
<i>metformin 500mg er tab</i>	\$0 (Tier 6)	
<i>metformin 500mg tab</i>	\$0 (Tier 6)	
<i>metformin 750mg er tab</i>	\$0 (Tier 6)	
<i>metformin 850mg tab</i>	\$0 (Tier 6)	
<i>mifepristone 300mg tab</i>	25% (Tier 5)	NDS PA QL=120 EA/30 Days
<i>nateglinide 120mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>nateglinide 60mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>pioglitazone 15mg tab</i>	\$0 (Tier 6)	
<i>pioglitazone 30mg tab</i>	\$0 (Tier 6)	
<i>pioglitazone 45mg tab</i>	\$0 (Tier 6)	
<i>repaglinide 0.5mg tab</i>	\$0 (Tier 6)	QL=120 EA/30 Days
<i>repaglinide 1mg tab</i>	\$0 (Tier 6)	QL=120 EA/30 Days
<i>repaglinide 2mg tab</i>	\$0 (Tier 6)	QL=240 EA/30 Days
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
<i>sitagliptin phosphate 100mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>sitagliptin phosphate 25mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sitagliptin phosphate 50mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
TRADJENTA 5MG TAB	25% (Tier 3)	QL=30 EA/30 Days
INCRETIN MIMETIC AGENTS		
MOUNJARO 10MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
MOUNJARO 15MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
MOUNJARO 5MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
OZEMPIC 1.5MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
OZEMPIC 2MG/3ML PEN INJ	\$0 (Tier 6)	PA QL=3 ML/28 Days
OZEMPIC 4MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
OZEMPIC 4MG/3ML PEN INJ	\$0 (Tier 6)	PA QL=3 ML/28 Days
OZEMPIC 8MG/3ML PEN INJ	\$0 (Tier 6)	PA QL=3 ML/28 Days
OZEMPIC 9MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
TRULICITY 3MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR	\$0 (Tier 6)	PA QL=2 ML/28 Days
INSULIN		
FIASP 100UNIT/ML INJ	25% (Tier 3)	INS PA_BvD
FIASP 100UNIT/ML PEN CARTRIDGE	25% (Tier 3)	INS
FIASP FLEXTOUCH 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMALOG 100UNIT/ML CARTRIDGE	25% (Tier 3)	INS
HUMALOG JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMALOG KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMALOG KWIKPEN 200UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMALOG MIX (50/50) KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMALOG MIX (75/25) 100UNIT/ML INJ	25% (Tier 3)	INS
HUMALOG MIX (75/25) KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMULIN (70/30) 100UNIT/ML INJ	25% (Tier 3)	INS
HUMULIN (70/30) KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMULIN N 100UNIT/ML INJ	25% (Tier 3)	INS
HUMULIN N KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
HUMULIN R 100UNIT/ML INJ	25% (Tier 3)	INS
HUMULIN R U-500 KWIKPEN 500UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
INSULIN GLARGINE MAX SOLOSTAR 300UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
INSULIN GLARGINE SOLOSTAR 300UNIT/ML PEN INJ (1.5ML)	25% (Tier 3)	INS
INSULIN LISPRO 100UNIT/ML INJ	25% (Tier 3)	INS PA BvD
INSULIN LISPRO JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
INSULIN LISPRO KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
INSULIN LISPRO PROTAMINE HUMAN (75/25) 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
LANTUS 100UNIT/ML INJ	25% (Tier 3)	INS
LANTUS SOLOSTAR 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
LYUMJEV 100UNIT/ML INJ	25% (Tier 3)	INS PA BvD
LYUMJEV KWIKPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
LYUMJEV KWIKPEN 200UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
NOVOLIN MIX (70/30) 100UNIT/ML INJ	25% (Tier 3)	INS
NOVOLIN MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
NOVOLIN N 100UNIT/ML INJ	25% (Tier 3)	INS
NOVOLIN N FLEXPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
NOVOLIN R 100UNIT/ML INJ	25% (Tier 3)	INS
NOVOLIN R FLEXPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
NOVOLOG 100UNIT/ML CARTRIDGE	25% (Tier 3)	INS
NOVOLOG 100UNIT/ML INJ	25% (Tier 3)	INS PA BvD
NOVOLOG FLEXPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
NOVOLOG MIX (70/30) 100UNIT/ML INJ	25% (Tier 3)	INS
NOVOLOG MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
TRESIBA 100UNIT/ML INJ	25% (Tier 3)	INS
TRESIBA FLEXTOUCH 100UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
TRESIBA FLEXTOUCH 200UNIT/ML PEN INJ (3ML)	25% (Tier 3)	INS
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
<i>dapagliflozin 10mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>dapagliflozin 5mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
FARXIGA 10MG TAB	25% (Tier 3)	QL=30 EA/30 Days
FARXIGA 5MG TAB	25% (Tier 3)	QL=30 EA/30 Days
JARDIANCE 10MG TAB	25% (Tier 3)	ST QL=30 EA/30 Days
JARDIANCE 25MG TAB	25% (Tier 3)	ST QL=30 EA/30 Days
SULFONYLUREAS		
<i>glimepiride 1mg tab</i>	\$0 (Tier 6)	
<i>glimepiride 2mg tab</i>	\$0 (Tier 6)	
<i>glimepiride 4mg tab</i>	\$0 (Tier 6)	
<i>glipizide 10mg er tab</i>	\$0 (Tier 6)	
<i>glipizide 10mg tab</i>	\$0 (Tier 6)	
<i>glipizide 2.5mg er tab</i>	\$0 (Tier 6)	
<i>glipizide 5mg er tab</i>	\$0 (Tier 6)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>glipizide 5mg tab</i>	\$0 (Tier 6)	
<i>glyburide 1.25mg tab</i>	\$0 (Tier 6)	
<i>glyburide 2.5mg tab</i>	\$0 (Tier 6)	
<i>glyburide 5mg tab</i>	\$0 (Tier 6)	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.		
BISMUTH CHEW 262MG*	\$0 (Tier 1*)	
STOMACH RELIEF CHEW 262MG*	\$0 (Tier 1*)	
STOMACH RELIEF SUSP 525/15ML*	\$0 (Tier 1*)	
STOMACH RELIEF SUSP 525/30ML*	\$0 (Tier 1*)	
STOMACH RELIEF TAB 262MG*	\$0 (Tier 1*)	
ANTIDIARRHEAL/PROBIOTIC COMBINATIONS		
LOPER/SIMETH TAB 2-125MG*	\$0 (Tier 1*)	
ANTIPERISTALTIC AGENTS		
ANTI-DIARRHEAL LIQUID 1MG/7.5*	\$0 (Tier 1*)	
ANTI-DIARRHEAL TAB 2MG*	\$0 (Tier 1*)	
LOPERAMIDE LIQUID 1MG/7.5ML*	\$0 (Tier 1*)	
ANTIDIARRHEALS		
ANTIPERISTALTIC AGENTS		
LOPERAMIDE TAB 2MG*	\$0 (Tier 1*)	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
<i>deferasirox 180mg tab</i>	\$0 (Tier 2)	PA
<i>deferasirox 360mg tab</i>	\$0 (Tier 2)	PA
<i>deferasirox 90mg tab</i>	\$0 (Tier 2)	PA
<i>penicillamine 250mg tab</i>	25% (Tier 5)	NDS
<i>trientine 250mg cap</i>	25% (Tier 5)	NDS PA QL=240 EA/30 Days
ANTIDOTES AND SPECIFIC ANTAGONISTS		
IOSAT TAB 130MG*	\$0 (Tier 2*)	PA
IOSAT TAB 65MG*	\$0 (Tier 2*)	PA
THYROSAFE TAB 65MG*	\$0 (Tier 2*)	PA
OPIOID ANTAGONISTS		
NALOXONE HCL SPRAY 4MG*	\$0 (Tier 1*)	
NALOXONE SPRAY 4MG*	\$0 (Tier 1*)	
NARCAN SPRAY 4MG*	\$0 (Tier 1*)	
RIVIVE SPRAY 3MG/0.1ML*	\$0 (Tier 2*)	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
SANCUSO PATCH 3.1MG*	\$0 (Tier 2*)	
ANTIEMETICS - ANTICHOLINERGIC		
DRIMINATE TAB 50MG*	\$0 (Tier 1*)	
MECLIZINE CHEW 25MG*	\$0 (Tier 1*)	
TRIMETHOBENZAMIDE CAP 300MG*	\$0 (Tier 1*)	
ANTIEMETICS - MISCELLANEOUS		
<i>aprepitant 125mg cap</i>	\$0 (Tier 2)	PA_BvD QL=3 EA/2 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	\$0 (Tier 2)	PA_BvD QL=6 EA/4 Days
<i>aprepitant 40mg cap</i>	\$0 (Tier 2)	PA_BvD QL=3 EA/2 Days
<i>aprepitant 80mg cap</i>	\$0 (Tier 2)	PA_BvD QL=6 EA/4 Days
<i>dronabinol 10mg cap</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>dronabinol 2.5mg cap</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>dronabinol 5mg cap</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>granisetron 1mg tab</i>	\$0 (Tier 2)	PA_BvD QL=60 EA/30 Days
<i>meclizine 12.5mg tab</i>	\$0 (Tier 1)	
<i>meclizine 25mg tab</i>	\$0 (Tier 1)	
<i>ondansetron 0.8mg/ml oral soln</i>	\$0 (Tier 2)	PA_BvD QL=900 ML/30 Days
<i>ondansetron 4mg odt</i>	\$0 (Tier 2)	PA_BvD
<i>ondansetron 4mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>ondansetron 8mg odt</i>	\$0 (Tier 2)	PA_BvD
<i>ondansetron 8mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>scopolamine 1mg/72hr patch</i>	\$0 (Tier 2)	QL=10 EA/30 Days
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
EMEND ORAL SUSP 125MG/5ML*	\$0 (Tier 2*)	
ANTIFUNGALS		
ANTIFUNGALS		
AMPHOTERICIN B 50MG INJ	\$0 (Tier 2)	PA_BvD
<i>amphotericin b liposomal 50mg inj</i>	\$0 (Tier 2)	PA_BvD
<i>caspofungin acetate 50mg inj</i>	\$0 (Tier 2)	
<i>caspofungin acetate 70mg inj</i>	\$0 (Tier 2)	
CRESEMBA 186MG CAP	25% (Tier 5)	NDS PA
CRESEMBA 74.5MG CAP	25% (Tier 5)	NDS PA
<i>fluconazole 100mg tab</i>	\$0 (Tier 1)	
<i>fluconazole 10mg/ml oral susp</i>	\$0 (Tier 2)	
<i>fluconazole 150mg tab</i>	\$0 (Tier 1)	
<i>fluconazole 200mg tab</i>	\$0 (Tier 1)	
<i>fluconazole 200mg/100ml inj</i>	\$0 (Tier 2)	
<i>fluconazole 400mg/200ml inj</i>	\$0 (Tier 2)	
<i>fluconazole 40mg/ml oral susp</i>	\$0 (Tier 2)	
<i>fluconazole 50mg tab</i>	\$0 (Tier 1)	
<i>flucytosine 250mg cap</i>	25% (Tier 5)	NDS
<i>flucytosine 500mg cap</i>	25% (Tier 5)	NDS
<i>griseofulvin 125mg tab</i>	\$0 (Tier 2)	
<i>griseofulvin 250mg tab</i>	\$0 (Tier 2)	
<i>griseofulvin 25mg/ml oral susp</i>	\$0 (Tier 2)	
<i>griseofulvin 500mg tab</i>	\$0 (Tier 2)	
<i>itraconazole 100mg cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>ketoconazole 200mg tab</i>	\$0 (Tier 2)	
<i>micafungin sodium 100mg inj</i>	\$0 (Tier 2)	
<i>micafungin sodium 50mg inj</i>	\$0 (Tier 2)	
<i>nystatin 500000unit tab</i>	\$0 (Tier 2)	
<i>posaconazole 100mg dr tab</i>	\$0 (Tier 2)	PA QL=96 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>posaconazole 40mg/ml oral susp</i>	25% (Tier 5)	NDS PA QL=630 ML/30 Days
<i>terbinafine 250mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>terconazole 0.4% vaginal cream</i>	\$0 (Tier 1)	
<i>terconazole 0.8% vaginal cream</i>	\$0 (Tier 1)	
<i>terconazole 80mg vaginal insert</i>	\$0 (Tier 2)	
<i>voriconazole 200mg inj</i>	\$0 (Tier 2)	PA
<i>voriconazole 200mg tab</i>	\$0 (Tier 2)	PA QL=120 EA/30 Days
<i>voriconazole 40mg/ml oral susp</i>	25% (Tier 5)	NDS PA QL=400 ML/30 Days
<i>voriconazole 50mg tab</i>	\$0 (Tier 2)	PA QL=480 EA/30 Days
ANTI-HISTAMINES		
ANTI-HISTAMINES - ALKYLAMINES		
ALA-HIST IR TAB 2MG*	\$0 (Tier 2*)	PA
ALLERGY TAB 4MG*	\$0 (Tier 1*)	
CHLORPHENIRAMINE TAB 4MG*	\$0 (Tier 1*)	
ED CHLORPED JR SYRUP*	\$0 (Tier 1*)	
HISTEX PD DROPS*	\$0 (Tier 1*)	
HISTEX PD DROPS 1.25MG*	\$0 (Tier 2*)	
HISTEX SYRUP*	\$0 (Tier 2*)	
PEDIACLEAR CHILDRENS LIQUID 0.625/ML*	\$0 (Tier 2*)	
TRIPROLIDINE DRO 0.938MG*	\$0 (Tier 1*)	
ANTI-HISTAMINES - ETHANOLAMINES		
ALLERGY CHILDRENS LIQUID 12.5/5ML*	\$0 (Tier 1*)	
ALLERGY RELIEF CAP 25MG*	\$0 (Tier 1*)	
ALLERGY RELIEF CHILDRENS 12.5MG/5ML*	\$0 (Tier 1*)	
ALLERGY RELIEF TAB 25MG*	\$0 (Tier 1*)	
BANOPHEN CAP 25MG*	\$0 (Tier 1*)	
BANOPHEN CAP 50MG*	\$0 (Tier 1*)	
DIMETANE CAP 25MG*	\$0 (Tier 1*)	
DIMETANE CAP 50MG*	\$0 (Tier 1*)	
DIPHENHYDRAM LIQ 12.5/5ML*	\$0 (Tier 1*)	
DIPHENHYDRAMINE CAP 25MG*	\$0 (Tier 1*)	
DIPHENHYDRAMINE CAP 50MG*	\$0 (Tier 1*)	
DIPHENHYDRAMINE LIQUID 12.5/5ML*	\$0 (Tier 1*)	
DIPHENHYDRAMINE LIQUID 25/10ML*	\$0 (Tier 1*)	
DIPHENHYDRAMINE TAB 25MG*	\$0 (Tier 1*)	
ANTI-HISTAMINES - ETHYLENEDIAMINES		
PEDIACLEAR 8 CHILDRENS LIQUID*	\$0 (Tier 2*)	
ANTI-HISTAMINES - NON-SEDATING		
ALL DAY ALLERGY CHILDRENS SOLN 1MG/ML*	\$0 (Tier 1*)	
ALL DAY ALLERGY SOLN 5MG/5ML*	\$0 (Tier 1*)	
ALL DAY ALLERGY TAB 10MG*	\$0 (Tier 1*)	
ALLERGY CHILD SOLN 5MG/5ML*	\$0 (Tier 1*)	
ALLERGY CHILDRENS SOLN 1MG/ML*	\$0 (Tier 1*)	
ALLERGY RELIEF SOLN 1MG/ML*	\$0 (Tier 1*)	
ALLERGY RELIEF SOLN 5MG/5ML*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ALLERGY RELIEF TAB 10MG*	\$0 (Tier 1*)	
ALLERGY RELIEF TAB 180MG*	\$0 (Tier 1*)	
CETIRIZINE SOLN 1MG/ML*	\$0 (Tier 1*)	
CETIRIZINE SYRUP 1MG/ML*	\$0 (Tier 1*)	
CETIRIZINE TAB 10MG*	\$0 (Tier 1*)	
CETIRIZINE TAB 5MG*	\$0 (Tier 1*)	
FEXOFENADINE TAB 180MG*	\$0 (Tier 1*)	
FEXOFENADINE TAB 60MG*	\$0 (Tier 1*)	
FT ALLERGY TAB 10MG*	\$0 (Tier 1*)	
LORATADINE ODT TAB 10MG*	\$0 (Tier 1*)	
LORATADINE SOLN 5MG/5ML*	\$0 (Tier 1*)	
LORATADINE SYRUP 5MG/5ML*	\$0 (Tier 1*)	
LORATADINE TAB 10MG*	\$0 (Tier 1*)	
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - MISC.		
<i>ezetimibe 10mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-10mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-20mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-40mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>ezetimibe/simvastatin 10-80mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>icosapent ethyl 0.5gm cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>icosapent ethyl 1gm cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
NEXLETOL 180MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
NEXLIZET 180-10MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
<i>niacin 1000mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>niacin 500mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>niacin 750mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>omega-3 acid ethyl esters (usp) 1gm cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
REPATHA 140MG/ML SYRINGE	25% (Tier 3)	PA QL=2 ML/28 Days
REPATHA SURECLICK 140MG/ML AUTO-INJECTOR	25% (Tier 3)	PA QL=2 ML/28 Days
BILE ACID SEQUESTRANTS		
<i>cholestyramine 4gm powder for oral susp</i>	\$0 (Tier 2)	
<i>cholestyramine light 4gm powder for oral susp</i>	\$0 (Tier 2)	
<i>colesevelam 625mg tab</i>	\$0 (Tier 2)	
<i>colestipol 1gm tab</i>	\$0 (Tier 2)	
<i>colestipol 5000mg granules for oral susp</i>	\$0 (Tier 2)	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate 134mg cap</i>	\$0 (Tier 1)	
<i>fenofibrate 145mg tab</i>	\$0 (Tier 1)	
<i>fenofibrate 160mg tab</i>	\$0 (Tier 1)	
<i>fenofibrate 200mg cap</i>	\$0 (Tier 1)	
<i>fenofibrate 43mg cap</i>	\$0 (Tier 1)	
<i>fenofibrate 48mg tab</i>	\$0 (Tier 1)	
<i>fenofibrate 54mg tab</i>	\$0 (Tier 1)	
<i>fenofibrate 67mg cap</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>fenofibric acid 135mg dr cap</i>	\$0 (Tier 1)	
<i>fenofibric acid 45mg dr cap</i>	\$0 (Tier 1)	
<i>gemfibrozil 600mg tab</i>	\$0 (Tier 1)	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin 10mg tab</i>	\$0 (Tier 6)	
<i>atorvastatin 20mg tab</i>	\$0 (Tier 6)	
<i>atorvastatin 40mg tab</i>	\$0 (Tier 6)	
<i>atorvastatin 80mg tab</i>	\$0 (Tier 6)	
<i>lovastatin 10mg tab</i>	\$0 (Tier 6)	
<i>lovastatin 20mg tab</i>	\$0 (Tier 6)	
<i>lovastatin 40mg tab</i>	\$0 (Tier 6)	
<i>pravastatin sodium 10mg tab</i>	\$0 (Tier 6)	
<i>pravastatin sodium 20mg tab</i>	\$0 (Tier 6)	
<i>pravastatin sodium 40mg tab</i>	\$0 (Tier 6)	
<i>pravastatin sodium 80mg tab</i>	\$0 (Tier 6)	
<i>rosuvastatin calcium 10mg tab</i>	\$0 (Tier 6)	
<i>rosuvastatin calcium 20mg tab</i>	\$0 (Tier 6)	
<i>rosuvastatin calcium 40mg tab</i>	\$0 (Tier 6)	
<i>rosuvastatin calcium 5mg tab</i>	\$0 (Tier 6)	
<i>simvastatin 10mg tab</i>	\$0 (Tier 6)	
<i>simvastatin 20mg tab</i>	\$0 (Tier 6)	
<i>simvastatin 40mg tab</i>	\$0 (Tier 6)	
<i>simvastatin 5mg tab</i>	\$0 (Tier 6)	
<i>simvastatin 80mg tab</i>	\$0 (Tier 6)	
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril 10mg tab</i>	\$0 (Tier 6)	
<i>benazepril 20mg tab</i>	\$0 (Tier 6)	
<i>benazepril 40mg tab</i>	\$0 (Tier 6)	
<i>benazepril 5mg tab</i>	\$0 (Tier 6)	
<i>captopril 100mg tab</i>	\$0 (Tier 6)	QL=120 EA/30 Days
<i>captopril 12.5mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>captopril 25mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>captopril 50mg tab</i>	\$0 (Tier 6)	QL=90 EA/30 Days
<i>enalapril maleate 10mg tab</i>	\$0 (Tier 6)	
<i>enalapril maleate 2.5mg tab</i>	\$0 (Tier 6)	
<i>enalapril maleate 20mg tab</i>	\$0 (Tier 6)	
<i>enalapril maleate 5mg tab</i>	\$0 (Tier 6)	
<i>fosinopril sodium 10mg tab</i>	\$0 (Tier 6)	
<i>fosinopril sodium 20mg tab</i>	\$0 (Tier 6)	
<i>fosinopril sodium 40mg tab</i>	\$0 (Tier 6)	
<i>lisinopril 10mg tab</i>	\$0 (Tier 6)	
<i>lisinopril 2.5mg tab</i>	\$0 (Tier 6)	
<i>lisinopril 20mg tab</i>	\$0 (Tier 6)	
<i>lisinopril 30mg tab</i>	\$0 (Tier 6)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>lisinopril 40mg tab</i>	\$0 (Tier 6)	
<i>lisinopril 5mg tab</i>	\$0 (Tier 6)	
<i>moexipril 15mg tab</i>	\$0 (Tier 6)	
<i>moexipril 7.5mg tab</i>	\$0 (Tier 6)	
PERINDOPRIL ERBUMINE 2MG TAB	\$0 (Tier 6)	
<i>perindopril erbumine 4mg tab</i>	\$0 (Tier 6)	
PERINDOPRIL ERBUMINE 8MG TAB	\$0 (Tier 6)	
<i>quinapril 10mg tab</i>	\$0 (Tier 6)	
<i>quinapril 20mg tab</i>	\$0 (Tier 6)	
<i>quinapril 40mg tab</i>	\$0 (Tier 6)	
<i>quinapril 5mg tab</i>	\$0 (Tier 6)	
<i>ramipril 1.25mg cap</i>	\$0 (Tier 6)	
<i>ramipril 10mg cap</i>	\$0 (Tier 6)	
<i>ramipril 2.5mg cap</i>	\$0 (Tier 6)	
<i>ramipril 5mg cap</i>	\$0 (Tier 6)	
<i>trandolapril 1mg tab</i>	\$0 (Tier 6)	
<i>trandolapril 2mg tab</i>	\$0 (Tier 6)	
<i>trandolapril 4mg tab</i>	\$0 (Tier 6)	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil 16mg tab</i>	\$0 (Tier 6)	QL=60 EA/30 Days
<i>candesartan cilexetil 32mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>candesartan cilexetil 4mg tab</i>	\$0 (Tier 6)	QL=60 EA/30 Days
<i>candesartan cilexetil 8mg tab</i>	\$0 (Tier 6)	QL=60 EA/30 Days
<i>irbesartan 150mg tab</i>	\$0 (Tier 6)	
<i>irbesartan 300mg tab</i>	\$0 (Tier 6)	
<i>irbesartan 75mg tab</i>	\$0 (Tier 6)	
<i>losartan potassium 100mg tab</i>	\$0 (Tier 6)	
<i>losartan potassium 25mg tab</i>	\$0 (Tier 6)	
<i>losartan potassium 50mg tab</i>	\$0 (Tier 6)	
<i>olmesartan medoxomil 20mg tab</i>	\$0 (Tier 6)	
<i>olmesartan medoxomil 40mg tab</i>	\$0 (Tier 6)	
<i>olmesartan medoxomil 5mg tab</i>	\$0 (Tier 6)	
<i>telmisartan 20mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>telmisartan 40mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>telmisartan 80mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>valsartan 160mg tab</i>	\$0 (Tier 6)	
<i>valsartan 320mg tab</i>	\$0 (Tier 6)	
<i>valsartan 40mg tab</i>	\$0 (Tier 6)	
<i>valsartan 80mg tab</i>	\$0 (Tier 6)	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine 0.1mg tab</i>	\$0 (Tier 1)	
<i>clonidine 0.1mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>clonidine 0.2mg tab</i>	\$0 (Tier 1)	
<i>clonidine 0.2mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>clonidine 0.3mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>clonidine 0.3mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>doxazosin 1mg tab</i>	\$0 (Tier 1)	
<i>doxazosin 2mg tab</i>	\$0 (Tier 1)	
<i>doxazosin 4mg tab</i>	\$0 (Tier 1)	
<i>doxazosin 8mg tab</i>	\$0 (Tier 1)	
<i>guanfacine 1mg tab</i>	\$0 (Tier 2)	
<i>guanfacine 2mg tab</i>	\$0 (Tier 2)	
<i>prazosin 1mg cap</i>	\$0 (Tier 1)	
<i>prazosin 2mg cap</i>	\$0 (Tier 1)	
<i>prazosin 5mg cap</i>	\$0 (Tier 1)	
<i>terazosin 10mg cap</i>	\$0 (Tier 1)	
<i>terazosin 1mg cap</i>	\$0 (Tier 1)	
<i>terazosin 2mg cap</i>	\$0 (Tier 1)	
<i>terazosin 5mg cap</i>	\$0 (Tier 1)	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine/benazepril 10-20mg cap</i>	\$0 (Tier 6)	
<i>amlodipine/benazepril 10-40mg cap</i>	\$0 (Tier 6)	
<i>amlodipine/benazepril 2.5-10mg cap</i>	\$0 (Tier 6)	
<i>amlodipine/benazepril 5-10mg cap</i>	\$0 (Tier 6)	
<i>amlodipine/benazepril 5-20mg cap</i>	\$0 (Tier 6)	
<i>amlodipine/benazepril 5-40mg cap</i>	\$0 (Tier 6)	
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-20mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 10-40mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-20mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/olmesartan medoxomil 5-40mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-160mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/valsartan 10-320mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-160mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>amlodipine/valsartan 5-320mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>atenolol/chlorthalidone 100-25mg tab</i>	\$0 (Tier 1)	
<i>atenolol/chlorthalidone 50-25mg tab</i>	\$0 (Tier 1)	
<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab</i>	\$0 (Tier 2)	
<i>bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab</i>	\$0 (Tier 2)	
<i>bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab</i>	\$0 (Tier 2)	
<i>candesartan cilexetil/hydrochlorothiazide 16-12.5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>candesartan cilexetil/hydrochlorothiazide 32-12.5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>candesartan cilexetil/hydrochlorothiazide 32-25mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 10-25mg tab</i>	\$0 (Tier 6)	QL=60 EA/30 Days
<i>enalapril maleate/hydrochlorothiazide 5-12.5mg tab</i>	\$0 (Tier 6)	QL=120 EA/30 Days
<i>fosinopril sodium/hydrochlorothiazide 10-12.5mg tab</i>	\$0 (Tier 6)	
<i>fosinopril sodium/hydrochlorothiazide 20-12.5mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/irbesartan 12.5-150mg tab</i>	\$0 (Tier 6)	QL=60 EA/30 Days
<i>hydrochlorothiazide/irbesartan 12.5-300mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/lisinopril 12.5-10mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/lisinopril 12.5-20mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/lisinopril 25-20mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/losartan potassium 12.5-100mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/losartan potassium 12.5-50mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/losartan potassium 25-100mg tab</i>	\$0 (Tier 6)	
<i>hydrochlorothiazide/metoprolol tartrate 25-100mg tab</i>	\$0 (Tier 2)	
<i>hydrochlorothiazide/metoprolol tartrate 25-50mg tab</i>	\$0 (Tier 2)	
<i>hydrochlorothiazide/metoprolol tartrate 50-100mg tab</i>	\$0 (Tier 2)	
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/olmesartan medoxomil 25-40mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/telmisartan 12.5-40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>hydrochlorothiazide/telmisartan 12.5-80mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>hydrochlorothiazide/telmisartan 25-80mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-160mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-320mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 12.5-80mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>hydrochlorothiazide/valsartan 25-160mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydrochlorothiazide/valsartan 25-320mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
ANTIHYPERTENSIVES - MISC.		
<i>aliskiren 150mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>aliskiren 300mg tab</i>	\$0 (Tier 6)	QL=30 EA/30 Days
<i>eplerenone 25mg tab</i>	\$0 (Tier 2)	
<i>eplerenone 50mg tab</i>	\$0 (Tier 2)	
<i>metirosine 250mg cap</i>	25% (Tier 5)	NDS PA
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>dapsone 100mg tab</i>	\$0 (Tier 2)	
<i>dapsone 25mg tab</i>	\$0 (Tier 2)	
<i>ethambutol 100mg tab</i>	\$0 (Tier 2)	
<i>ethambutol 400mg tab</i>	\$0 (Tier 2)	
<i>isoniazid 100mg tab</i>	\$0 (Tier 1)	
<i>isoniazid 10mg/ml oral soln</i>	\$0 (Tier 2)	
<i>isoniazid 300mg tab</i>	\$0 (Tier 1)	
PRETOMANID 200MG TAB	25% (Tier 4)	QL=30 EA/30 Days
<i>pyrazinamide 500mg tab</i>	\$0 (Tier 2)	
<i>rifabutin 150mg cap</i>	\$0 (Tier 2)	
<i>rifampin 150mg cap</i>	\$0 (Tier 2)	
<i>rifampin 300mg cap</i>	\$0 (Tier 2)	
<i>rifampin 600mg inj</i>	\$0 (Tier 2)	
<i>rifapentine 150mg tab</i>	\$0 (Tier 2)	
SIRTURO 100MG TAB	25% (Tier 5)	NDS PA
SIRTURO 20MG TAB	25% (Tier 5)	NDS PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
<i>cyclophosphamide 25mg cap</i>	\$0 (Tier 2)	PA_BvD
<i>cyclophosphamide 50mg cap</i>	\$0 (Tier 2)	PA_BvD
CYCLOPHOSPHAMIDE 50MG TAB	25% (Tier 3)	PA_BvD
LEUKERAN 2MG TAB	25% (Tier 5)	NDS PA_NSO
<i>lomustine 100mg cap</i>	\$0 (Tier 2)	
<i>lomustine 10mg cap</i>	\$0 (Tier 2)	
<i>lomustine 40mg cap</i>	\$0 (Tier 2)	
TEMOZOLOMIDE CAP 100MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 140 MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 140MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 180 MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 180MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 20 MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 20MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 250 MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 250MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 5 MG*	\$0 (Tier 1*)	
TEMOZOLOMIDE CAP 5MG*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIMETABOLITES		
CAPECITABINE TAB 150MG*	\$0 (Tier 1*)	
CAPECITABINE TAB 500MG*	\$0 (Tier 1*)	
<i>mercaptopurine 2000mg/100ml oral susp</i>	\$0 (Tier 2)	PA_NSO QL=300 ML/30 Days
<i>mercaptopurine 50mg tab</i>	\$0 (Tier 2)	
<i>methotrexate 2.5mg tab</i>	\$0 (Tier 1)	
METHOTREXATE 25MG/ML INJ	\$0 (Tier 1)	
<i>methotrexate 50mg/2ml inj</i>	\$0 (Tier 1)	
ONUREG 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=14 EA/28 Days
ONUREG 300MG TAB	25% (Tier 5)	NDS PA_NSO QL=14 EA/28 Days
TABLOID 40MG TAB	25% (Tier 5)	NDS
TREXALL TAB 10MG*	\$0 (Tier 2*)	
TREXALL TAB 15MG*	\$0 (Tier 2*)	
TREXALL TAB 5MG*	\$0 (Tier 2*)	
TREXALL TAB 7.5MG*	\$0 (Tier 2*)	
XATMEP 2.5MG/ML ORAL SOLN	25% (Tier 4)	PA_BvD
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1MG CAP	25% (Tier 5)	NDS PA_NSO QL=84 EA/28 Days
FRUZAQLA 5MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
INLYTA 1MG TAB	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
INLYTA 5MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
LENVIMA 10MG DAILY DOSE PACK (30)	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 12MG DAILY DOSE PACK (90)	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 14MG DAILY DOSE PACK (60)	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 18MG DAILY DOSE PACK (90)	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 20MG DAILY DOSE PACK (60)	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
LENVIMA 24MG DAILY DOSE PACK (90)	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
LENVIMA 4MG DAILY DOSE PACK (30)	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LENVIMA 8MG DAILY DOSE PACK (60)	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib 100mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>erlotinib 150mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>erlotinib 25mg tab</i>	\$0 (Tier 2)	PA_NSO QL=90 EA/30 Days
<i>gefitinib 250mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
GILOTRIF 20MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 30MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
GILOTRIF 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 240MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LAZCLUZE 80MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
TAGRISSE 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TAGRISSE 80MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
DAURISMO 25MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
ERIVEDGE 150MG CAP	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ODOMZO 200MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>abirtega 250mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
AKEEGA 500-100MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
AKEEGA 500-50MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
<i>anastrozole 1mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>bicalutamide 50mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
ELIGARD 22.5MG SYRINGE	25% (Tier 4)	QL=1 EA/84 Days
ELIGARD 30MG SYRINGE	25% (Tier 4)	QL=1 EA/112 Days
ELIGARD 45MG SYRINGE	25% (Tier 4)	QL=1 EA/168 Days
ELIGARD 7.5MG SYRINGE	25% (Tier 4)	QL=1 EA/28 Days
ERLEADA 240MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ERLEADA 60MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
EULEXIN 125MG CAP	25% (Tier 5)	NDS QL=180 EA/30 Days
<i>exemestane 25mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
FIRMAGON 120MG INJ	25% (Tier 3)	PA_NSO QL=4 EA/365 Days
FIRMAGON 80MG INJ	25% (Tier 3)	PA_NSO QL=1 EA/28 Days
INLURIYO 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=84 EA/28 Days
<i>letrozole 2.5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
LIFYORLI CAP 125MG 1-DOSE SUPPLY PACK (2)	25% (Tier 5)	NDS PA_NSO QL=18 EA/28 Days
LIFYORLI CAP 125MG 3-DOSE SUPPLY PACK (6)	25% (Tier 5)	NDS PA_NSO QL=18 EA/28 Days
LIFYORLI CAP 125MG 9-DOSE SUPPLY PACK (18)	25% (Tier 5)	NDS PA_NSO QL=18 EA/28 Days
LIFYORLI CAP 150MG 1-DOSE SUPPLY PACK (3)	25% (Tier 5)	NDS PA_NSO QL=27 EA/28 Days
LIFYORLI CAP 150MG 3-DOSE SUPPLY PACK (9)	25% (Tier 5)	NDS PA_NSO QL=27 EA/28 Days
LIFYORLI CAP 150MG 9-DOSE SUPPLY PACK (27)	25% (Tier 5)	NDS PA_NSO QL=27 EA/28 Days
LUPRON 11.25MG SYRINGE (3 MONTH)	25% (Tier 5)	QL=1 EA/84 Days
LUPRON 3.75MG SYRINGE (1 MONTH)	25% (Tier 5)	NDS QL=1 EA/28 Days
LYSODREN 500MG TAB	25% (Tier 5)	NDS
<i>megestrol acetate 20mg tab</i>	\$0 (Tier 1)	PA_NSO
<i>megestrol acetate 40mg tab</i>	\$0 (Tier 1)	PA_NSO
<i>megestrol acetate 40mg/ml oral susp</i>	\$0 (Tier 2)	PA
NILUTAMIDE 150MG TAB	25% (Tier 5)	NDS QL=60 EA/30 Days
NUBEQA 300MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
ORGOVYX 120MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/28 Days
ORSERDU 345MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ORSERDU 86MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
SOLTAMOX 10MG/5ML ORAL SOLN	25% (Tier 4)	PA_NSO QL=600 ML/30 Days
<i>tamoxifen 10mg tab</i>	\$0 (Tier 1)	
<i>tamoxifen 20mg tab</i>	\$0 (Tier 1)	
<i>toremifene 60mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
TRELSTAR MIXJECT 11.25MG INJ	25% (Tier 4)	QL=1 EA/84 Days
TRELSTAR MIXJECT 22.5MG INJ	25% (Tier 4)	QL=1 EA/168 Days
TRELSTAR MIXJECT 3.75MG INJ	25% (Tier 4)	QL=1 EA/28 Days
XTANDI 40MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XTANDI 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
XTANDI 80MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
ANTINEOPLASTIC - IMMUNOMODULATORS		
<i>lenalidomide 10mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 15mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 2.5mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 20mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 25mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>lenalidomide 5mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>pomalidomide 1mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
<i>pomalidomide 2mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
<i>pomalidomide 3mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
<i>pomalidomide 4mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
POMALYST 1MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
POMALYST 2MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
POMALYST 3MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
POMALYST 4MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
THALOMID 100MG CAP	25% (Tier 5)	NDS QL=120 EA/30 Days
THALOMID 50MG CAP	25% (Tier 5)	NDS QL=240 EA/30 Days
ZENBEXUS 0.75MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
ZENBEXUS 1MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
ANTINEOPLASTIC COMBINATIONS		
AVMAPKI/FAKZYNJA CO-PACK (66)	25% (Tier 5)	NDS PA_NSO QL=66 EA/28 Days
INQOVI 35-100MG TAB PACK (5)	25% (Tier 5)	NDS PA_NSO QL=5 EA/28 Days
LONSURF 6.14-15MG TAB	25% (Tier 5)	NDS PA_NSO QL=100 EA/28 Days
LONSURF 8.19-20MG TAB	25% (Tier 5)	NDS PA_NSO QL=80 EA/28 Days
ANTINEOPLASTIC ENZYME INHIBITORS		
ALECENSA 150MG CAP	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
ALUNBRIG 180MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ALUNBRIG 30MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
ALUNBRIG 90MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ALUNBRIG TAB INITIATION PACK (30)	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
AUGTYRO 160MG CAP	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
AUGTYRO 40MG CAP	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
BALVERSA 3MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
BALVERSA 4MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
BALVERSA 5MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
BOSULIF 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
BOSULIF 50MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>bosutinib 100mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
<i>bosutinib 400mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>bosutinib 500mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
BRAFTOVI 75MG CAP	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
BRUKINSA 160MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
CABOMETYX 20MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CABOMETYX 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
CABOMETYX 60MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
CALQUENCE 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
CAPRELSA 300MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
COMETRIQ CAP 100MG DAILY DOSE PACK (56)	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
COMETRIQ CAP 140MG DAILY DOSE PACK (112)	25% (Tier 5)	NDS PA_NSO QL=112 EA/28 Days
COMETRIQ CAP 60MG DAILY DOSE PACK (84)	25% (Tier 5)	NDS PA_NSO QL=84 EA/28 Days
COPIKTRA 15MG CAP	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
COPIKTRA 25MG CAP	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
COTELLIC 20MG TAB	25% (Tier 5)	NDS PA_NSO QL=63 EA/28 Days
<i>dasatinib 100mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 140mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 20mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
<i>dasatinib 50mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 70mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>dasatinib 80mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ENSACOVE 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
ENSACOVE 25MG CAP	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
<i>everolimus 10mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 2.5mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 2mg tab for oral susp</i>	25% (Tier 5)	NDS PA_NSO QL=150 EA/30 Days
<i>everolimus 3mg tab for oral susp</i>	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
<i>everolimus 5mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>everolimus 5mg tab for oral susp</i>	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
<i>everolimus 7.5mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
FOTIVDA 0.89MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
FOTIVDA 1.34MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
GAVRETO 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
GOMEKLI 1MG CAP	25% (Tier 5)	NDS PA_NSO QL=42 EA/28 Days
GOMEKLI 1MG TAB FOR ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=168 EA/28 Days
GOMEKLI 2MG CAP	25% (Tier 5)	NDS PA_NSO QL=84 EA/28 Days
HYRNUO 10MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
IBRANCE 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG CAP	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 125MG TAB	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
IBRANCE 75MG TAB	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
IBTROZI 200MG CAP	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
ICLUSIG 10MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ICLUSIG 15MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ICLUSIG 30MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ICLUSIG 45MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
IDHIFA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
IDHIFA 50MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>imatinib 100mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>imatinib 400mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
IMBRUVICA 140MG CAP	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
IMBRUVICA 140MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 280MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 420MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
IMBRUVICA 70MG CAP	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
IMBRUVICA 70MG/ML ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=216 ML/27 Days
IMKELDI 80MG/ML ORAL SOLN	25% (Tier 5)	NDS PA_NSO QL=280 ML/28 Days
INREBIC 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
ITOVEBI 3MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
ITOVEBI 9MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
JAKAFI 10MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 15MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 20MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 25MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
JAKAFI 5MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
JAYPIRCA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
JAYPIRCA 50MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
JIDEYTRO 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
JIDEYTRO 25MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
KISQALI TAB 200MG DAILY DOSE PACK (21)	25% (Tier 5)	NDS PA_NSO QL=21 EA/28 Days
KISQALI TAB 400MG DAILY DOSE PACK (42)	25% (Tier 5)	NDS PA_NSO QL=42 EA/28 Days
KISQALI TAB 600MG DAILY DOSE PACK (63)	25% (Tier 5)	NDS PA_NSO QL=63 EA/28 Days
KOSELUGO 10MG CAP	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
KOSELUGO 25MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
KOSELUGO 5MG SPRINKLE CAP	25% (Tier 5)	NDS PA_NSO QL=600 EA/30 Days
KOSELUGO 7.5MG SPRINKLE CAP	25% (Tier 5)	NDS PA_NSO QL=360 EA/30 Days
KRAZATI 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
<i>lapatinib ditosylate 250mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
LORBRENA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LORBRENA 25MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
LUMAKRAS 120MG TAB	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
LUMAKRAS 240MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
LUMAKRAS 320MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
LYNPARZA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
LYNPARZA 150MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
LYTGOBI TAB 12MG DAILY DOSE PACK (21)	25% (Tier 5)	NDS PA_NSO QL=84 EA/28 Days
LYTGOBI TAB 16MG DAILY DOSE PACK (28)	25% (Tier 5)	NDS PA_NSO QL=112 EA/28 Days
LYTGOBI TAB 20MG DAILY DOSE PACK (35)	25% (Tier 5)	NDS PA_NSO QL=140 EA/28 Days
MEKINIST 0.05MG/ML ORAL SOLN	25% (Tier 5)	NDS PA_NSO QL=1260 ML/30 Days
MEKINIST 0.5MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
MEKINIST 2MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
MEKTOVI 15MG TAB	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
NERLYNX 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
<i>nilotinib 150mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=112 EA/28 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nilotinib 200mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=112 EA/28 Days
<i>nilotinib 50mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
NINLARO 2.3MG CAP	25% (Tier 5)	NDS PA_NSO QL=3 EA/28 Days
NINLARO 3MG CAP	25% (Tier 5)	NDS PA_NSO QL=3 EA/28 Days
NINLARO 4MG CAP	25% (Tier 5)	NDS PA_NSO QL=3 EA/28 Days
OGSIVEO 100MG TAB 7-DAY PACK (14)	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
OGSIVEO 150MG TAB 7-DAY PACK (14)	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16)	25% (Tier 5)	NDS PA_NSO QL=16 EA/28 Days
OJEMDA 100MG TAB PACK (500MG ONCE WEEKLY) (20)	25% (Tier 5)	NDS PA_NSO QL=20 EA/28 Days
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24)	25% (Tier 5)	NDS PA_NSO QL=24 EA/28 Days
OJEMDA 25MG/ML POWDER FOR ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=96 ML/28 Days
OJJAARA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
OJJAARA 150MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
OJJAARA 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>pazopanib 200mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
PEMAZYRE 13.5MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
PEMAZYRE 4.5MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
PEMAZYRE 9MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
PIQRAY TAB 200MG DAILY DOSE PACK (28)	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
PIQRAY TAB 250MG DAILY DOSE PACK (56)	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
PIQRAY TAB 300MG DAILY DOSE PACK (56)	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
QINLOCK 50MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
RETEVMO 120MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
RETEVMO 160MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
RETEVMO 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
RETEVMO 80MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
REZLIDHIA 150MG CAP	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
ROMVIMZA 14MG CAP	25% (Tier 5)	NDS PA_NSO QL=8 EA/28 Days
ROMVIMZA 20MG CAP	25% (Tier 5)	NDS PA_NSO QL=8 EA/28 Days
ROMVIMZA 30MG CAP	25% (Tier 5)	NDS PA_NSO QL=8 EA/28 Days
ROZLYTREK 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=150 EA/30 Days
ROZLYTREK 200MG CAP	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
ROZLYTREK 50MG ORAL PELLETT	25% (Tier 5)	NDS PA_NSO QL=336 EA/28 Days
RUBRACA 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
RUBRACA 250MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
RUBRACA 300MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
RYDAPT 25MG CAP	25% (Tier 5)	NDS PA_NSO QL=224 EA/28 Days
SCEMBLIX 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
SCEMBLIX 20MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
SCEMBLIX 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
<i>sorafenib 200mg tab</i>	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
STIVARGA 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=84 EA/28 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sunitinib malate 12.5mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib malate 25mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib malate 37.5mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
<i>sunitinib malate 50mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
TABRECTA 150MG TAB	25% (Tier 5)	NDS PA_NSO QL=112 EA/28 Days
TABRECTA 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=112 EA/28 Days
TAFINLAR 10MG TAB FOR ORAL SUSP	25% (Tier 5)	NDS PA_NSO QL=840 EA/28 Days
TAFINLAR 50MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
TAFINLAR 75MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
TALZENNA 0.1MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.25MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.35MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.5MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 0.75MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TALZENNA 1MG CAP	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
TEPMETKO 225MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
TIBSOVO 250MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
TRUQAP 160MG TAB	25% (Tier 5)	NDS PA_NSO QL=64 EA/28 Days
TRUQAP 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=64 EA/28 Days
TURALIO 125MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
VANFLYTA 17.7MG TAB	25% (Tier 5)	NDS PA_NSO QL=28 EA/28 Days
VANFLYTA 26.5MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 150MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
VERZENIO 50MG TAB	25% (Tier 5)	NDS PA_NSO QL=56 EA/28 Days
VITRAKVI 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
VITRAKVI 20MG/ML ORAL SOLN	25% (Tier 5)	NDS PA_NSO QL=300 ML/30 Days
VITRAKVI 25MG CAP	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
VONJO 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
VORANIGO 10MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
VORANIGO 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
XALKORI 150MG ORAL PELLETT	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
XALKORI 200MG CAP	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
XALKORI 20MG ORAL PELLETT	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
XALKORI 250MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
XALKORI 50MG ORAL PELLETT	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
XOSPATA 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
<i>yulithira 10mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>yulithira 2.5mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>yulithira 5mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
<i>yulithira 7.5mg tab</i>	\$0 (Tier 2)	PA_NSO QL=30 EA/30 Days
ZEJULA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
ZEJULA 300MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ZELBORAF 240MG TAB	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
ZOLINZA 100MG CAP	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
ZYKADIA 150MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000UNIT/0.5ML INJ	25% (Tier 5)	NDS PA_NSO
AYVAKIT 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 200MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 25MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 300MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
AYVAKIT 50MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
BESREMI 500MCG/0.5ML PEN INJ	25% (Tier 5)	NDS PA_NSO QL=1 ML/28 Days
BESREMI 500MCG/ML SYRINGE	25% (Tier 5)	NDS PA_NSO QL=2 ML/28 Days
<i>bexarotene 75mg cap</i>	25% (Tier 5)	NDS PA_NSO QL=300 EA/30 Days
HERNEXEOS 60MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
<i>hydroxyurea 500mg cap</i>	\$0 (Tier 1)	
KOMZIFTI 200MG CAP	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
MATULANE 50MG CAP	25% (Tier 5)	NDS
MODEYSO 125MG CAP	25% (Tier 5)	NDS PA_NSO QL=20 EA/28 Days
REVUFORJ 110MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
REVUFORJ 160MG TAB	25% (Tier 5)	NDS PA_NSO QL=60 EA/30 Days
REVUFORJ 25MG TAB	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
<i>tretinoin 10mg cap</i>	25% (Tier 5)	NDS
TUKYSA 150MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
TUKYSA 50MG TAB	25% (Tier 5)	NDS PA_NSO QL=120 EA/30 Days
VENCLEXTA 100MG TAB	25% (Tier 5)	NDS PA_NSO QL=180 EA/30 Days
VENCLEXTA 10MG TAB	25% (Tier 3)	PA_NSO QL=60 EA/30 Days
VENCLEXTA 50MG TAB	25% (Tier 3)	PA_NSO QL=30 EA/30 Days
VENCLEXTA TAB STARTER PACK (42)	25% (Tier 5)	NDS PA_NSO QL=42 EA/28 Days
WELIREG 40MG TAB	25% (Tier 5)	NDS PA_NSO QL=90 EA/30 Days
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8)	25% (Tier 5)	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16)	25% (Tier 5)	NDS PA_NSO QL=16 EA/28 Days
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8)	25% (Tier 5)	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4)	25% (Tier 5)	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24)	25% (Tier 5)	NDS PA_NSO QL=24 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (4)	25% (Tier 5)	NDS PA_NSO QL=4 EA/28 Days
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	25% (Tier 5)	NDS PA_NSO QL=8 EA/28 Days
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	25% (Tier 5)	NDS PA_NSO QL=32 EA/28 Days
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
IWILFIN 192MG TAB	25% (Tier 5)	NDS PA_NSO QL=240 EA/30 Days
<i>leucovorin 10mg tab</i>	\$0 (Tier 2)	
<i>leucovorin 15mg tab</i>	\$0 (Tier 2)	
<i>leucovorin 25mg tab</i>	\$0 (Tier 2)	
<i>leucovorin 5mg tab</i>	\$0 (Tier 2)	
<i>mesna 400mg tab</i>	\$0 (Tier 2)	
MITOTIC INHIBITORS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ETOPOSID CAP 50MG*	\$0 (Tier 2*)	
ANTIPARASITICS		
ANTHELMINTICS		
<i>albendazole 200mg tab</i>	\$0 (Tier 2)	QL=672 EA/365 Days
<i>ivermectin 3mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/90 Days
<i>praziquantel 600mg tab</i>	\$0 (Tier 2)	
ANTIPROTOZOALS		
<i>atovaquone 750mg/5ml oral susp</i>	\$0 (Tier 2)	QL=300 ML/30 Days
<i>atovaquone/proguanil 250-100mg tab</i>	\$0 (Tier 2)	
<i>atovaquone/proguanil 62.5-25mg tab</i>	\$0 (Tier 2)	
CHLOROQUINE PHOSPHATE 250MG TAB	\$0 (Tier 2)	
<i>chloroquine phosphate 500mg tab</i>	\$0 (Tier 2)	
COARTEM 20-120MG TAB	25% (Tier 3)	QL=24 EA/3 Days
<i>hydroxychloroquine sulfate 200mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>mefloquine 250mg tab</i>	\$0 (Tier 2)	
<i>nitazoxanide 500mg tab</i>	25% (Tier 5)	NDS PA QL=6 EA/3 Days
<i>pentamidine isethionate 300mg inj</i>	\$0 (Tier 2)	
<i>pentamidine isethionate 300mg/6ml inh soln</i>	\$0 (Tier 2)	PA_BvD QL=1 EA/28 Days
PRIMAQUINE PHOSPHATE 26.3MG TAB	25% (Tier 4)	
<i>pyrimethamine 25mg tab</i>	25% (Tier 5)	NDS PA QL=90 EA/30 Days
<i>quinine sulfate 324mg cap</i>	\$0 (Tier 2)	PA QL=42 EA/7 Days
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa 25mg tab</i>	\$0 (Tier 2)	
<i>entacapone 200mg tab</i>	\$0 (Tier 2)	QL=300 EA/30 Days
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate 0.5mg tab</i>	\$0 (Tier 1)	
<i>benztropine mesylate 1mg tab</i>	\$0 (Tier 1)	
<i>benztropine mesylate 2mg tab</i>	\$0 (Tier 1)	
<i>trihexyphenidyl 2mg tab</i>	\$0 (Tier 1)	
<i>trihexyphenidyl 5mg tab</i>	\$0 (Tier 1)	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine 100mg cap</i>	\$0 (Tier 1)	
<i>amantadine 10mg/ml oral soln</i>	\$0 (Tier 2)	
<i>bromocriptine 2.5mg tab</i>	\$0 (Tier 2)	
<i>bromocriptine 5mg cap</i>	\$0 (Tier 2)	
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	\$0 (Tier 2)	
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	\$0 (Tier 2)	
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	\$0 (Tier 2)	
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	\$0 (Tier 2)	
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	\$0 (Tier 2)	
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	\$0 (Tier 2)	
<i>carbidopa/levodopa 10-100mg odt</i>	\$0 (Tier 2)	
<i>carbidopa/levodopa 10-100mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>carbidopa/levodopa 25-100mg er tab</i>	\$0 (Tier 2)	
<i>carbidopa/levodopa 25-100mg odt</i>	\$0 (Tier 2)	
<i>carbidopa/levodopa 25-100mg tab</i>	\$0 (Tier 1)	
<i>carbidopa/levodopa 25-250mg odt</i>	\$0 (Tier 2)	
<i>carbidopa/levodopa 25-250mg tab</i>	\$0 (Tier 1)	
<i>carbidopa/levodopa 50-200mg er tab</i>	\$0 (Tier 2)	
<i>pramipexole 0.125mg tab</i>	\$0 (Tier 1)	
<i>pramipexole 0.25mg tab</i>	\$0 (Tier 1)	
<i>pramipexole 0.5mg tab</i>	\$0 (Tier 1)	
<i>pramipexole 0.75mg tab</i>	\$0 (Tier 1)	
<i>pramipexole 1.5mg tab</i>	\$0 (Tier 1)	
<i>pramipexole 1mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 0.25mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 0.5mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 1mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 2mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 3mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 4mg tab</i>	\$0 (Tier 1)	
<i>ropinirole 5mg tab</i>	\$0 (Tier 1)	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline 0.5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>rasagiline 1mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>selegiline 5mg cap</i>	\$0 (Tier 2)	
<i>selegiline 5mg tab</i>	\$0 (Tier 2)	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>divalproex sodium 250mg er tab</i>	\$0 (Tier 1)	
<i>divalproex sodium 500mg er tab</i>	\$0 (Tier 1)	
<i>lithium carbonate 150mg cap</i>	\$0 (Tier 1)	
<i>lithium carbonate 300mg cap</i>	\$0 (Tier 1)	
<i>lithium carbonate 300mg er tab</i>	\$0 (Tier 1)	
<i>lithium carbonate 300mg tab</i>	\$0 (Tier 1)	
<i>lithium carbonate 450mg er tab</i>	\$0 (Tier 1)	
LITHIUM CARBONATE 600MG CAP	\$0 (Tier 1)	
<i>lithium citrate 60mg/ml oral soln</i>	\$0 (Tier 2)	
ANTIPSYCHOTICS - MISC.		
CAPLYTA 10.5MG CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
CAPLYTA 21MG CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
CAPLYTA 42MG CAP	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
COBENFY 100-20MG CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
COBENFY 125-30MG CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
COBENFY 50-20MG CAP	25% (Tier 4)	PA_NSO QL=60 EA/30 Days
COBENFY CAP 28-DAY STARTER PACK (56)	25% (Tier 4)	PA_NSO QL=56 EA/28 Days
<i>haloperidol 0.5mg tab</i>	\$0 (Tier 1)	
<i>haloperidol 10mg tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>haloperidol 1mg tab</i>	\$0 (Tier 1)	
<i>haloperidol 20mg tab</i>	\$0 (Tier 1)	
<i>haloperidol 2mg tab</i>	\$0 (Tier 1)	
<i>haloperidol 2mg/ml oral soln</i>	\$0 (Tier 2)	
<i>haloperidol 5mg tab</i>	\$0 (Tier 1)	
<i>haloperidol 5mg/ml inj</i>	\$0 (Tier 2)	
<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	\$0 (Tier 2)	
<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	\$0 (Tier 2)	
<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	\$0 (Tier 2)	
<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	\$0 (Tier 2)	
<i>lurasidone 120mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>lurasidone 20mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>lurasidone 40mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>lurasidone 60mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>lurasidone 80mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
MOLINDONE 10MG TAB	\$0 (Tier 2)	
MOLINDONE 25MG TAB	\$0 (Tier 2)	
MOLINDONE 5MG TAB	\$0 (Tier 2)	
NUPLAZID 10MG TAB	25% (Tier 4)	PA _ NSO QL=30 EA/30 Days
NUPLAZID 34MG CAP	25% (Tier 4)	PA _ NSO QL=30 EA/30 Days
<i>thiothixene 10mg cap</i>	\$0 (Tier 2)	
<i>thiothixene 1mg cap</i>	\$0 (Tier 2)	
<i>thiothixene 2mg cap</i>	\$0 (Tier 2)	
<i>thiothixene 5mg cap</i>	\$0 (Tier 2)	
VRAYLAR 0.5MG CAP	25% (Tier 3)	PA _ NSO QL=30 EA/30 Days
VRAYLAR 0.75MG CAP	25% (Tier 3)	PA _ NSO QL=30 EA/30 Days
VRAYLAR 1.5MG CAP	25% (Tier 3)	PA _ NSO QL=30 EA/30 Days
VRAYLAR 3MG CAP	25% (Tier 3)	PA _ NSO QL=30 EA/30 Days
VRAYLAR 4.5MG CAP	25% (Tier 3)	PA _ NSO QL=30 EA/30 Days
VRAYLAR 6MG CAP	25% (Tier 3)	PA _ NSO QL=30 EA/30 Days
<i>ziprasidone 20mg cap</i>	\$0 (Tier 2)	
<i>ziprasidone 20mg inj</i>	\$0 (Tier 2)	QL=6 EA/3 Days
<i>ziprasidone 40mg cap</i>	\$0 (Tier 2)	
<i>ziprasidone 60mg cap</i>	\$0 (Tier 2)	
<i>ziprasidone 80mg cap</i>	\$0 (Tier 2)	
BENZISOXAZOLES		
FANAPT 10MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT 12MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT 1MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT 2MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT 4MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT 6MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT 8MG TAB	25% (Tier 4)	PA _ NSO QL=60 EA/30 Days
FANAPT TAB TITRATION PACK (8)	25% (Tier 4)	PA _ NSO QL=8 EA/180 Days
FANAPT TAB TITRATION PACK B (12)	25% (Tier 4)	PA _ NSO QL=12 EA/180 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FANAPT TAB TITRATION PACK C (8)	25% (Tier 4)	PA_NSO QL=8 EA/180 Days
INVEGA SUSTENNA 117MG/0.75ML SYRINGE	25% (Tier 5)	NDS QL=.75 ML/28 Days
INVEGA SUSTENNA 156MG/ML SYRINGE	25% (Tier 5)	NDS QL=1 ML/28 Days
INVEGA SUSTENNA 234MG/1.5ML SYRINGE	25% (Tier 5)	NDS QL=1.50 ML/28 Days
INVEGA SUSTENNA 39MG/0.25ML SYRINGE	25% (Tier 4)	QL=.25 ML/28 Days
INVEGA SUSTENNA 78MG/0.5ML SYRINGE	25% (Tier 5)	NDS QL=.50 ML/28 Days
<i>paliperidone 1.5mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>paliperidone 3mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>paliperidone 6mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>paliperidone 9mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
RISPERIDONE 0.25MG ODT	\$0 (Tier 2)	QL=60 EA/30 Days
<i>risperidone 0.25mg tab</i>	\$0 (Tier 1)	
<i>risperidone 0.5mg odt</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>risperidone 0.5mg tab</i>	\$0 (Tier 1)	
<i>risperidone 1mg odt</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>risperidone 1mg tab</i>	\$0 (Tier 1)	
<i>risperidone 1mg/ml oral soln</i>	\$0 (Tier 2)	QL=240 ML/30 Days
<i>risperidone 2mg odt</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>risperidone 2mg tab</i>	\$0 (Tier 1)	
<i>risperidone 3mg odt</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>risperidone 3mg tab</i>	\$0 (Tier 1)	
<i>risperidone 4mg odt</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>risperidone 4mg tab</i>	\$0 (Tier 1)	
<i>risperidone microspheres 12.5mg inj</i>	\$0 (Tier 2)	QL=2 EA/28 Days
<i>risperidone microspheres 25mg inj</i>	\$0 (Tier 2)	QL=2 EA/28 Days
<i>risperidone microspheres 37.5mg inj</i>	25% (Tier 5)	NDS QL=2 EA/28 Days
<i>risperidone microspheres 50mg inj</i>	25% (Tier 5)	NDS QL=2 EA/28 Days
DIBENZAPINES		
<i>asenapine 10mg sl tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>asenapine 2.5mg sl tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>asenapine 5mg sl tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>clozapine 100mg odt</i>	\$0 (Tier 2)	QL=270 EA/30 Days
<i>clozapine 100mg tab</i>	\$0 (Tier 2)	
<i>clozapine 12.5mg odt</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>clozapine 150mg odt</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>clozapine 200mg odt</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>clozapine 200mg tab</i>	\$0 (Tier 2)	
<i>clozapine 25mg odt</i>	\$0 (Tier 2)	QL=270 EA/30 Days
<i>clozapine 25mg tab</i>	\$0 (Tier 2)	
<i>clozapine 50mg tab</i>	\$0 (Tier 2)	
<i>loxapine 10mg cap</i>	\$0 (Tier 2)	
<i>loxapine 25mg cap</i>	\$0 (Tier 2)	
<i>loxapine 50mg cap</i>	\$0 (Tier 2)	
<i>loxapine 5mg cap</i>	\$0 (Tier 2)	
<i>olanzapine 10mg inj</i>	\$0 (Tier 2)	QL=3 EA/1 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>olanzapine 10mg odt</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>olanzapine 10mg tab</i>	\$0 (Tier 2)	
<i>olanzapine 15mg odt</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>olanzapine 15mg tab</i>	\$0 (Tier 2)	
<i>olanzapine 2.5mg tab</i>	\$0 (Tier 2)	
<i>olanzapine 20mg odt</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>olanzapine 20mg tab</i>	\$0 (Tier 2)	
<i>olanzapine 5mg odt</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>olanzapine 5mg tab</i>	\$0 (Tier 2)	
<i>olanzapine 7.5mg tab</i>	\$0 (Tier 2)	
<i>quetiapine 100mg tab</i>	\$0 (Tier 1)	
<i>quetiapine 150mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>quetiapine 200mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>quetiapine 200mg tab</i>	\$0 (Tier 1)	
<i>quetiapine 25mg tab</i>	\$0 (Tier 1)	
<i>quetiapine 300mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>quetiapine 300mg tab</i>	\$0 (Tier 1)	
<i>quetiapine 400mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>quetiapine 400mg tab</i>	\$0 (Tier 1)	
<i>quetiapine 50mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>quetiapine 50mg tab</i>	\$0 (Tier 1)	
SECUADO 3.8MG/24HR PATCH	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
SECUADO 5.7MG/24HR PATCH	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
SECUADO 7.6MG/24HR PATCH	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
VERSACLOZ 50MG/ML ORAL SUSP	25% (Tier 4)	PA_NSO QL=600 ML/30 Days
PHENOTHIAZINES		
<i>chlorpromazine 100mg tab</i>	\$0 (Tier 2)	
<i>chlorpromazine 100mg/ml oral soln</i>	\$0 (Tier 2)	
<i>chlorpromazine 10mg tab</i>	\$0 (Tier 2)	
<i>chlorpromazine 200mg tab</i>	\$0 (Tier 2)	
<i>chlorpromazine 25mg tab</i>	\$0 (Tier 2)	
<i>chlorpromazine 30mg/ml oral soln</i>	\$0 (Tier 2)	
<i>chlorpromazine 50mg tab</i>	\$0 (Tier 2)	
<i>compro 25mg rectal supp</i>	\$0 (Tier 2)	
FLUPHENAZINE 0.5MG/ML ORAL SOLN	\$0 (Tier 2)	
<i>fluphenazine 10mg tab</i>	\$0 (Tier 2)	
<i>fluphenazine 1mg tab</i>	\$0 (Tier 2)	
<i>fluphenazine 2.5mg tab</i>	\$0 (Tier 2)	
FLUPHENAZINE 2.5MG/ML INJ	\$0 (Tier 2)	
<i>fluphenazine 5mg tab</i>	\$0 (Tier 2)	
FLUPHENAZINE 5MG/ML ORAL SOLN	\$0 (Tier 2)	
<i>fluphenazine decanoate 25mg/ml inj</i>	\$0 (Tier 2)	
<i>perphenazine 16mg tab</i>	\$0 (Tier 2)	
<i>perphenazine 2mg tab</i>	\$0 (Tier 2)	
<i>perphenazine 4mg tab</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>perphenazine 8mg tab</i>	\$0 (Tier 2)	
<i>prochlorperazine 10mg tab</i>	\$0 (Tier 1)	
<i>prochlorperazine 25mg rectal supp</i>	\$0 (Tier 2)	
<i>prochlorperazine 5mg tab</i>	\$0 (Tier 1)	
<i>thioridazine 100mg tab</i>	\$0 (Tier 2)	
<i>thioridazine 10mg tab</i>	\$0 (Tier 2)	
<i>thioridazine 25mg tab</i>	\$0 (Tier 2)	
<i>thioridazine 50mg tab</i>	\$0 (Tier 2)	
<i>trifluoperazine 10mg tab</i>	\$0 (Tier 2)	
<i>trifluoperazine 1mg tab</i>	\$0 (Tier 2)	
<i>trifluoperazine 2mg tab</i>	\$0 (Tier 2)	
<i>trifluoperazine 5mg tab</i>	\$0 (Tier 2)	
QUINOLINONE DERIVATIVES		
ABILIFY MAINTENA 300MG INJ	25% (Tier 5)	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 300MG/1.5ML SYRINGE	25% (Tier 5)	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG INJ	25% (Tier 5)	NDS QL=1 EA/28 Days
ABILIFY MAINTENA 400MG/2ML SYRINGE	25% (Tier 5)	NDS QL=1 EA/28 Days
<i>aripiprazole 10mg odt</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>aripiprazole 10mg tab</i>	\$0 (Tier 2)	
<i>aripiprazole 15mg odt</i>	\$0 (Tier 2)	PA_NSO QL=60 EA/30 Days
<i>aripiprazole 15mg tab</i>	\$0 (Tier 2)	
<i>aripiprazole 1mg/ml oral soln</i>	\$0 (Tier 2)	QL=900 ML/30 Days
<i>aripiprazole 20mg tab</i>	\$0 (Tier 2)	
<i>aripiprazole 2mg tab</i>	\$0 (Tier 2)	
<i>aripiprazole 30mg tab</i>	\$0 (Tier 2)	
<i>aripiprazole 5mg tab</i>	\$0 (Tier 2)	
ARISTADA 1064MG/3.9ML SYRINGE	25% (Tier 5)	QL=3.90 ML/56 Days
ARISTADA 441MG/1.6ML SYRINGE	25% (Tier 5)	NDS QL=1.60 ML/28 Days
ARISTADA 662MG/2.4ML SYRINGE	25% (Tier 5)	NDS QL=2.40 ML/28 Days
ARISTADA 882MG/3.2ML SYRINGE	25% (Tier 5)	QL=3.20 ML/28 Days
ARISTADA INITIO 675MG/2.4ML SYRINGE	25% (Tier 5)	QL=2.40 ML/42 Days
OPIPZA 10MG ORAL FILM	25% (Tier 4)	PA_NSO QL=90 EA/30 Days
OPIPZA 2MG ORAL FILM	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
OPIPZA 5MG ORAL FILM	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
REXULTI 0.25MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
REXULTI 0.5MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
REXULTI 1MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
REXULTI 2MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
REXULTI 3MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
REXULTI 4MG TAB	25% (Tier 4)	PA_NSO QL=30 EA/30 Days
ANTISEPTICS & DISINFECTANTS		
IODINE ANTISEPTICS		
POVIDONE/IODINE SOLN 10%*	\$0 (Tier 1*)	
ANTISPASTICITY AGENTS		
ANTISPASTICITY AGENTS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>baclofen 10mg tab</i>	\$0 (Tier 1)	
<i>baclofen 20mg tab</i>	\$0 (Tier 1)	
<i>baclofen 5mg tab</i>	\$0 (Tier 1)	
<i>carisoprodol 350mg tab</i>	\$0 (Tier 1)	
<i>chlorzoxazone 500mg tab</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>cyclobenzaprine 10mg tab</i>	\$0 (Tier 1)	
<i>cyclobenzaprine 5mg tab</i>	\$0 (Tier 1)	
<i>dantrolene sodium 100mg cap</i>	\$0 (Tier 2)	
<i>dantrolene sodium 25mg cap</i>	\$0 (Tier 2)	
<i>dantrolene sodium 50mg cap</i>	\$0 (Tier 2)	
<i>metaxalone 800mg tab</i>	\$0 (Tier 2)	
<i>methocarbamol 500mg tab</i>	\$0 (Tier 1)	
<i>methocarbamol 750mg tab</i>	\$0 (Tier 1)	
<i>orphenadrine citrate 100mg er tab</i>	\$0 (Tier 2)	
<i>pyridostigmine bromide 60mg tab</i>	\$0 (Tier 2)	
<i>tizanidine 2mg tab</i>	\$0 (Tier 1)	
<i>tizanidine 4mg tab</i>	\$0 (Tier 1)	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir 20mg/ml oral soln</i>	\$0 (Tier 2)	QL=960 ML/30 Days
<i>abacavir 300mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>abacavir/lamivudine 600-300mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
APTIVUS 250MG CAP	25% (Tier 5)	QL=120 EA/30 Days
<i>atazanavir 150mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>atazanavir 200mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atazanavir 300mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
BIKTARVY 30-120-15MG TAB	25% (Tier 5)	QL=30 EA/30 Days
BIKTARVY 50-200-25MG TAB	25% (Tier 5)	QL=30 EA/30 Days
CIMDUO 300-300MG TAB	25% (Tier 5)	QL=30 EA/30 Days
<i>darunavir 600mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>darunavir 800mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
DELSTRIGO 100-300-300MG TAB	25% (Tier 5)	QL=30 EA/30 Days
DESCOVY 120-15MG TAB	25% (Tier 5)	QL=30 EA/30 Days
DESCOVY 200-25MG TAB	25% (Tier 5)	QL=30 EA/30 Days
DOVATO 50-300MG TAB	25% (Tier 5)	QL=30 EA/30 Days
EDURANT 2.5MG TAB FOR ORAL SUSP	25% (Tier 5)	QL=180 EA/30 Days
<i>efavirenz 600mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB	25% (Tier 5)	QL=30 EA/30 Days
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab</i>	25% (Tier 5)	QL=30 EA/30 Days
<i>emtricitabine 200mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>emtricitabine/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab</i>	25% (Tier 5)	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 100-150mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 133-200mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 167-250mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>emtricitabine/tenofovir disoproxil fumarate 200-300mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
EMTRIVA 10MG/ML ORAL SOLN	25% (Tier 3)	QL=850 ML/30 Days
<i>etravirine 100mg tab</i>	25% (Tier 5)	QL=60 EA/30 Days
<i>etravirine 200mg tab</i>	25% (Tier 5)	QL=60 EA/30 Days
EVOTAZ 300-150MG TAB	25% (Tier 5)	QL=30 EA/30 Days
<i>fosamprenavir 700mg tab</i>	25% (Tier 5)	QL=120 EA/30 Days
GENVOYA 150-150-200-10MG TAB	25% (Tier 5)	QL=30 EA/30 Days
IDVYNOS 100-0.25MG TAB	25% (Tier 5)	QL=30 EA/30 Days
INTELENCE 25MG TAB	25% (Tier 3)	QL=120 EA/30 Days
ISENTRESS 100MG CHEW TAB	25% (Tier 5)	QL=180 EA/30 Days
ISENTRESS 100MG GRANULES FOR ORAL SUSP	25% (Tier 5)	QL=60 EA/30 Days
ISENTRESS 25MG CHEW TAB	25% (Tier 3)	QL=180 EA/30 Days
ISENTRESS 400MG TAB	25% (Tier 5)	QL=60 EA/30 Days
ISENTRESS HD 600MG TAB	25% (Tier 5)	QL=60 EA/30 Days
JULUCA 50-25MG TAB	25% (Tier 5)	QL=30 EA/30 Days
<i>lamivudine 10mg/ml oral soln</i>	\$0 (Tier 2)	QL=960 ML/30 Days
<i>lamivudine 150mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>lamivudine 300mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>lamivudine/zidovudine 150-300mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>lopinavir/ritonavir 100-25mg tab</i>	\$0 (Tier 2)	QL=300 EA/30 Days
<i>lopinavir/ritonavir 200-50mg tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>maraviroc 150mg tab</i>	25% (Tier 5)	QL=60 EA/30 Days
<i>maraviroc 300mg tab</i>	25% (Tier 5)	QL=120 EA/30 Days
NEVIRAPINE 10MG/ML ORAL SUSP	\$0 (Tier 2)	QL=1200 ML/30 Days
<i>nevirapine 200mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>nevirapine 400mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
ODEFSEY 200-25-25MG TAB	25% (Tier 5)	QL=30 EA/30 Days
PIFELTRO 100MG TAB	25% (Tier 5)	QL=30 EA/30 Days
PREZCOBIX 150-675MG TAB	25% (Tier 5)	QL=30 EA/30 Days
PREZCOBIX 150-800MG TAB	25% (Tier 5)	QL=30 EA/30 Days
PREZISTA 100MG/ML ORAL SUSP	25% (Tier 5)	QL=400 ML/30 Days
PREZISTA 150MG TAB	25% (Tier 5)	QL=240 EA/30 Days
PREZISTA 75MG TAB	25% (Tier 3)	QL=480 EA/30 Days
REYATAZ 50MG ORAL POWDER	25% (Tier 5)	QL=240 EA/30 Days
<i>rilpivirine 25mg tab</i>	25% (Tier 5)	QL=30 EA/30 Days
<i>ritonavir 100mg tab</i>	\$0 (Tier 2)	QL=360 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RUKOBIA 600MG ER TAB	25% (Tier 5)	QL=60 EA/30 Days
STRIBILD 150-150-200-300MG TAB	25% (Tier 5)	QL=30 EA/30 Days
SUNLENCA 300MG TAB	25% (Tier 5)	QL=4 EA/28 Days
SUNLENCA 300MG TAB THERAPY PACK (4)	25% (Tier 5)	QL=4 EA/28 Days
SUNLENCA 300MG TAB THERAPY PACK (5)	25% (Tier 5)	QL=5 EA/28 Days
SYMTUZA 150-800-200-10MG TAB	25% (Tier 5)	QL=30 EA/30 Days
<i>tenofovir disoproxil fumarate 300mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
TIVICAY 50MG TAB	25% (Tier 5)	QL=60 EA/30 Days
TIVICAY 5MG TAB FOR ORAL SUSP	25% (Tier 3)	QL=180 EA/30 Days
TRIUMEQ 600-50-300MG TAB	25% (Tier 5)	QL=30 EA/30 Days
TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP	25% (Tier 3)	QL=180 EA/30 Days
VIRACEPT 250MG TAB	25% (Tier 5)	QL=300 EA/30 Days
VIRACEPT 625MG TAB	25% (Tier 5)	QL=120 EA/30 Days
VIREAD 150MG TAB	25% (Tier 5)	QL=30 EA/30 Days
VIREAD 200MG TAB	25% (Tier 5)	QL=30 EA/30 Days
VIREAD 250MG TAB	25% (Tier 5)	QL=30 EA/30 Days
VIREAD 40MG/GM ORAL POWDER	25% (Tier 5)	QL=240 GM/30 Days
<i>zidovudine 100mg cap</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>zidovudine 10mg/ml oral soln</i>	\$0 (Tier 2)	QL=1920 ML/30 Days
<i>zidovudine 300mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
HEPATITIS AGENTS		
<i>adefovir dipivoxil 10mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>entecavir 0.5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>entecavir 1mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>lamivudine 100mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
MAVYRET 100-40MG TAB	25% (Tier 5)	NDS PA QL=84 EA/28 Days
MAVYRET 50-20MG ORAL PELLETT	25% (Tier 5)	NDS PA QL=140 EA/28 Days
PEGASYS 180MCG/0.5ML SYRINGE	25% (Tier 5)	NDS QL=2 ML/28 Days
PEGASYS 180MCG/ML INJ	25% (Tier 5)	NDS QL=4 ML/28 Days
RIBAVIRIN 200MG CAP	\$0 (Tier 2)	QL=210 EA/30 Days
RIBAVIRIN 200MG TAB	\$0 (Tier 2)	QL=210 EA/30 Days
SOFOSBUVIR/VELPATASVIR 400-100MG TAB	25% (Tier 5)	NDS PA QL=28 EA/28 Days
VOSEVI 400-100-100MG TAB	25% (Tier 5)	NDS PA QL=28 EA/28 Days
HERPES AGENTS		
<i>acyclovir 200mg cap</i>	\$0 (Tier 1)	
<i>acyclovir 400mg tab</i>	\$0 (Tier 1)	
<i>acyclovir 40mg/ml oral susp</i>	\$0 (Tier 2)	
<i>acyclovir 50mg/ml inj</i>	\$0 (Tier 2)	PA_BvD
<i>acyclovir 800mg tab</i>	\$0 (Tier 1)	
<i>famciclovir 125mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>famciclovir 250mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>famciclovir 500mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>valacyclovir 1000mg tab</i>	\$0 (Tier 1)	QL=120 EA/30 Days
<i>valacyclovir 500mg tab</i>	\$0 (Tier 1)	QL=60 EA/30 Days
INFLUENZA AGENTS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>oseltamivir 30mg cap</i>	\$0 (Tier 1)	QL=84 EA/180 Days
<i>oseltamivir 45mg cap</i>	\$0 (Tier 1)	QL=42 EA/180 Days
<i>oseltamivir 6mg/ml oral susp</i>	\$0 (Tier 2)	QL=540 ML/180 Days
<i>oseltamivir 75mg cap</i>	\$0 (Tier 1)	QL=42 EA/180 Days
RELENZA DISKHALER 5MG/BLISTER POWDER INHALER	25% (Tier 3)	QL=120 EA/365 Days
RIMANTADINE 100MG TAB	\$0 (Tier 2)	
XOFLUZA 40MG TAB	25% (Tier 4)	QL=2 EA/30 Days
XOFLUZA 80MG TAB	25% (Tier 4)	QL=1 EA/30 Days
MISC. ANTIVIRALS		
LIVTENCITY 200MG TAB	25% (Tier 5)	NDS PA QL=120 EA/30 Days
PAXLOVID 150MG/100MG TAB PACK (20)	\$0 (Tier 2)	QL=20 EA/5 Days
PAXLOVID 150MG/100MG TAB PACK (30)	\$0 (Tier 2)	QL=30 EA/5 Days
PAXLOVID 300MG/100MG AND 150MG/100MG TAB DOSE PACK (11)	\$0 (Tier 2)	QL=11 EA/5 Days
PREVYMIS 120MG ORAL PELLET	25% (Tier 5)	NDS PA QL=120 EA/30 Days
PREVYMIS 240MG TAB	25% (Tier 5)	NDS PA QL=28 EA/28 Days
PREVYMIS 480MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>valganciclovir 450mg tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>valganciclovir 50mg/ml oral soln</i>	25% (Tier 5)	NDS QL=1056 ML/30 Days
BIOLOGICALS MISC		
BIOLOGICALS MISC		
ARCALYST 220MG INJ	25% (Tier 5)	NDS PA
AVTOZMA 162MG/0.9ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=3.60 ML/28 Days
AVTOZMA 162MG/0.9ML SYRINGE	25% (Tier 5)	NDS PA QL=3.60 ML/28 Days
BENLYSTA 200MG/ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=4 ML/28 Days
BENLYSTA 200MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=4 ML/28 Days
CIMZIA 200MG INJ	25% (Tier 5)	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=4 EA/28 Days
CIMZIA 200MG/ML SYRINGE PACK (2)	25% (Tier 5)	NDS PA QL=2 EA/28 Days
CIMZIA 200MG/ML SYRINGE STARTER KIT (6)	25% (Tier 5)	NDS PA QL=3 EA/28 Days
COSENTYX 150MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=8 ML/28 Days
COSENTYX 75MG/0.5ML SYRINGE	25% (Tier 5)	NDS PA QL=2 ML/28 Days
COSENTYX SENSOREADY 150MG/ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=8 ML/28 Days
COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=8 ML/28 Days
DUPIXENT 200MG/1.14ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=4.56 ML/28 Days
DUPIXENT 200MG/1.14ML SYRINGE	25% (Tier 5)	NDS PA QL=4.56 ML/28 Days
DUPIXENT 300MG/2ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=8 ML/28 Days
DUPIXENT 300MG/2ML SYRINGE	25% (Tier 5)	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML INJ	25% (Tier 5)	NDS PA QL=8 ML/28 Days
ENBREL 25MG/0.5ML SYRINGE	25% (Tier 5)	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML CARTRIDGE	25% (Tier 5)	NDS PA QL=8 ML/28 Days
ENBREL 50MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=8 ML/28 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ENBREL SURECLICK 50MG/ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=8 ML/28 Days
ENTYVIO 108MG/0.68ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=1.36 ML/28 Days
FASENRA 10MG/0.5ML SYRINGE	25% (Tier 5)	PA QL=.50 ML/28 Days
FASENRA 30MG/ML AUTO-INJECTOR	25% (Tier 5)	PA QL=1 ML/28 Days
FASENRA 30MG/ML SYRINGE	25% (Tier 5)	PA QL=1 ML/28 Days
HADLIMA 40MG/0.4ML SYRINGE	25% (Tier 5)	NDS PA QL=2.40 ML/28 Days
HADLIMA 40MG/0.8ML SYRINGE	25% (Tier 5)	NDS PA QL=4.80 ML/28 Days
HADLIMA PUSHTOUCH 40MG/0.4ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=2.40 ML/28 Days
HADLIMA PUSHTOUCH 40MG/0.8ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=4.80 ML/28 Days
KINERET 100MG/0.67ML SYRINGE	25% (Tier 5)	NDS PA QL=18.76 ML/28 Days
NEMLUVIO 30MG AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=2 EA/28 Days
NUCALA 100MG INJ	25% (Tier 5)	NDS PA QL=3 EA/28 Days
NUCALA 100MG/ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=3 ML/28 Days
NUCALA 100MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=3 ML/28 Days
NUCALA 40MG/0.4ML SYRINGE	25% (Tier 5)	NDS PA QL=.40 ML/28 Days
ORENCIA 125MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=4 ML/28 Days
ORENCIA 50MG/0.4ML SYRINGE	25% (Tier 5)	NDS PA QL=1.60 ML/28 Days
ORENCIA 87.5MG/0.7ML SYRINGE	25% (Tier 5)	NDS PA QL=2.80 ML/28 Days
ORENCIA CLICKJECT 125MG/ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=4 ML/28 Days
SIMLANDI 20MG/0.2ML SYRINGE	25% (Tier 4)	PA QL=2 EA/28 Days
SIMLANDI 40MG/0.4ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=6 EA/28 Days
SIMLANDI 40MG/0.4ML SYRINGE	25% (Tier 5)	NDS PA QL=6 EA/28 Days
SIMLANDI 80MG/0.8ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=3 EA/28 Days
SKYRIZI 150MG/ML AUTO-INJECTOR	25% (Tier 5)	PA QL=7 ML/365 Days
SKYRIZI 150MG/ML SYRINGE	25% (Tier 5)	PA QL=7 ML/365 Days
SKYRIZI 180MG/1.2ML CARTRIDGE	25% (Tier 5)	PA QL=1.20 ML/56 Days
SKYRIZI 360MG/2.4ML CARTRIDGE	25% (Tier 5)	PA QL=2.40 ML/56 Days
SKYRIZI 55MG/0.37ML SYRINGE	25% (Tier 5)	PA QL=2.59 ML/365 Days
STARJEMZA 45MG/0.5ML INJ	25% (Tier 3)	PA QL=.50 ML/28 Days
STARJEMZA 45MG/0.5ML SYRINGE	25% (Tier 3)	PA QL=.50 ML/28 Days
STARJEMZA 90MG/ML SYRINGE	25% (Tier 3)	PA QL=1 ML/28 Days
TREMFYA 100MG/ML AUTO-INJECTOR	25% (Tier 5)	PA QL=2 ML/28 Days
TREMFYA 100MG/ML SYRINGE	25% (Tier 5)	PA QL=2 ML/28 Days
TREMFYA 200MG/2ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=2 ML/28 Days
TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2)	25% (Tier 5)	NDS PA QL=4 ML/28 Days
TREMFYA 200MG/2ML SYRINGE	25% (Tier 5)	NDS PA QL=2 ML/28 Days
TYENNE 162MG/0.9ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=3.60 ML/28 Days
TYENNE 162MG/0.9ML SYRINGE	25% (Tier 5)	NDS PA QL=3.60 ML/28 Days
XOLAIR 150MG INJ	25% (Tier 5)	NDS PA QL=8 EA/28 Days
XOLAIR 150MG/ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=2 ML/28 Days
XOLAIR 150MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=2 ML/28 Days
XOLAIR 300MG/2ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=8 ML/28 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
XOLAIR 300MG/2ML SYRINGE	25% (Tier 5)	NDS PA QL=8 ML/28 Days
XOLAIR 75MG/0.5ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=1 ML/28 Days
XOLAIR 75MG/0.5ML SYRINGE	25% (Tier 5)	NDS PA QL=1 ML/28 Days
YESINTEK 45MG/0.5ML INJ	25% (Tier 3)	PA QL=.50 ML/28 Days
YESINTEK 45MG/0.5ML SYRINGE	25% (Tier 3)	PA QL=.50 ML/28 Days
YESINTEK 90MG/ML SYRINGE	25% (Tier 3)	PA QL=1 ML/28 Days
ZYMFENTRA 120MG/ML PEN INJ	25% (Tier 5)	NDS PA QL=2 EA/28 Days
ZYMFENTRA 120MG/ML SYRINGE	25% (Tier 5)	NDS PA QL=2 EA/28 Days
CARDIOTONICS		
INOTROPES		
MILRINONE IN DEXTROSE SOLN 40MG/200ML*	\$0 (Tier 1*)	
MILRINONE INJ 10MG/10ML*	\$0 (Tier 1*)	
MILRINONE INJ 1MG/ML*	\$0 (Tier 1*)	
MILRINONE INJ 20MG/20ML*	\$0 (Tier 1*)	
MILRINONE INJ 50MG/50ML*	\$0 (Tier 1*)	
MILRINONE LACTATE INJ 1MG/ML*	\$0 (Tier 1*)	
MILRINONE/DEXTROSE INJ 20MG/100ML*	\$0 (Tier 1*)	
MILRINONE/DEXTROSE INJ 40MG/200ML*	\$0 (Tier 1*)	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>droxidopa 100mg cap</i>	\$0 (Tier 2)	PA QL=90 EA/30 Days
<i>droxidopa 200mg cap</i>	\$0 (Tier 2)	PA QL=180 EA/30 Days
<i>droxidopa 300mg cap</i>	\$0 (Tier 2)	PA QL=180 EA/30 Days
<i>midodrine 10mg tab</i>	\$0 (Tier 2)	
<i>midodrine 2.5mg tab</i>	\$0 (Tier 2)	
<i>midodrine 5mg tab</i>	\$0 (Tier 2)	
ANTIARRHYTHMICS		
<i>amiodarone 100mg tab</i>	\$0 (Tier 2)	
<i>amiodarone 200mg tab</i>	\$0 (Tier 1)	
<i>amiodarone 400mg tab</i>	\$0 (Tier 2)	
<i>disopyramide 100mg cap</i>	\$0 (Tier 2)	
<i>disopyramide 150mg cap</i>	\$0 (Tier 2)	
<i>dofetilide 125mcg cap</i>	\$0 (Tier 2)	
<i>dofetilide 250mcg cap</i>	\$0 (Tier 2)	
<i>dofetilide 500mcg cap</i>	\$0 (Tier 2)	
<i>flecainide acetate 100mg tab</i>	\$0 (Tier 2)	
<i>flecainide acetate 150mg tab</i>	\$0 (Tier 2)	
<i>flecainide acetate 50mg tab</i>	\$0 (Tier 2)	
<i>mexiletine 150mg cap</i>	\$0 (Tier 2)	
<i>mexiletine 200mg cap</i>	\$0 (Tier 2)	
<i>mexiletine 250mg cap</i>	\$0 (Tier 2)	
MULTAQ 400MG TAB	25% (Tier 3)	QL=60 EA/30 Days
<i>propafenone 150mg tab</i>	\$0 (Tier 2)	
<i>propafenone 225mg er cap</i>	\$0 (Tier 2)	
<i>propafenone 225mg tab</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>propafenone 300mg tab</i>	\$0 (Tier 2)	
<i>propafenone 325mg er cap</i>	\$0 (Tier 2)	
<i>propafenone 425mg er cap</i>	\$0 (Tier 2)	
QUINIDINE SULFATE 200MG TAB	\$0 (Tier 2)	
QUINIDINE SULFATE 300MG TAB	\$0 (Tier 2)	
BETA-ADRENERGIC BLOCKING AGENTS		
<i>acebutolol 200mg cap</i>	\$0 (Tier 2)	
<i>acebutolol 400mg cap</i>	\$0 (Tier 2)	
<i>atenolol 100mg tab</i>	\$0 (Tier 1)	
<i>atenolol 25mg tab</i>	\$0 (Tier 1)	
<i>atenolol 50mg tab</i>	\$0 (Tier 1)	
<i>betaxolol 10mg tab</i>	\$0 (Tier 2)	
<i>betaxolol 20mg tab</i>	\$0 (Tier 2)	
<i>bisoprolol fumarate 10mg tab</i>	\$0 (Tier 2)	
<i>bisoprolol fumarate 5mg tab</i>	\$0 (Tier 2)	
<i>carvedilol 12.5mg tab</i>	\$0 (Tier 1)	
<i>carvedilol 25mg tab</i>	\$0 (Tier 1)	
<i>carvedilol 3.125mg tab</i>	\$0 (Tier 1)	
<i>carvedilol 6.25mg tab</i>	\$0 (Tier 1)	
<i>labetalol 100mg tab</i>	\$0 (Tier 2)	
<i>labetalol 200mg tab</i>	\$0 (Tier 2)	
<i>labetalol 300mg tab</i>	\$0 (Tier 2)	
<i>metoprolol succinate 100mg er tab</i>	\$0 (Tier 1)	
<i>metoprolol succinate 200mg er tab</i>	\$0 (Tier 1)	
<i>metoprolol succinate 25mg er tab</i>	\$0 (Tier 1)	
<i>metoprolol succinate 50mg er tab</i>	\$0 (Tier 1)	
<i>metoprolol tartrate 100mg tab</i>	\$0 (Tier 1)	
<i>metoprolol tartrate 25mg tab</i>	\$0 (Tier 1)	
<i>metoprolol tartrate 37.5mg tab</i>	\$0 (Tier 1)	
<i>metoprolol tartrate 50mg tab</i>	\$0 (Tier 1)	
<i>metoprolol tartrate 75mg tab</i>	\$0 (Tier 1)	
<i>nadolol 20mg tab</i>	\$0 (Tier 2)	
<i>nadolol 40mg tab</i>	\$0 (Tier 2)	
<i>nadolol 80mg tab</i>	\$0 (Tier 2)	
<i>nebivolol 10mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>nebivolol 2.5mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>nebivolol 20mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>nebivolol 5mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>pindolol 10mg tab</i>	\$0 (Tier 2)	
<i>pindolol 5mg tab</i>	\$0 (Tier 2)	
<i>propranolol 10mg tab</i>	\$0 (Tier 1)	
<i>propranolol 120mg er cap</i>	\$0 (Tier 2)	
<i>propranolol 160mg er cap</i>	\$0 (Tier 2)	
<i>propranolol 20mg tab</i>	\$0 (Tier 1)	
<i>propranolol 20mg/5ml oral soln</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>propranolol 40mg tab</i>	\$0 (Tier 1)	
<i>propranolol 60mg er cap</i>	\$0 (Tier 2)	
<i>propranolol 60mg tab</i>	\$0 (Tier 1)	
<i>propranolol 80mg er cap</i>	\$0 (Tier 2)	
<i>propranolol 80mg tab</i>	\$0 (Tier 1)	
PROPRANOLOL 8MG/ML ORAL SOLN	\$0 (Tier 2)	
<i>sotalol 120mg tab</i>	\$0 (Tier 2)	
<i>sotalol 160mg tab</i>	\$0 (Tier 2)	
<i>sotalol 240mg tab</i>	\$0 (Tier 2)	
<i>sotalol 80mg tab</i>	\$0 (Tier 2)	
<i>sotalol af 120mg tab</i>	\$0 (Tier 2)	
<i>sotalol af 160mg tab</i>	\$0 (Tier 2)	
<i>sotalol af 80mg tab</i>	\$0 (Tier 2)	
<i>timolol 10mg tab</i>	\$0 (Tier 2)	
TIMOLOL 5MG TAB	\$0 (Tier 2)	
CALCIUM CHANNEL BLOCKING AGENTS		
<i>amlodipine 10mg tab</i>	\$0 (Tier 1)	
<i>amlodipine 2.5mg tab</i>	\$0 (Tier 1)	
<i>amlodipine 5mg tab</i>	\$0 (Tier 1)	
<i>cartia xt 120mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>cartia xt 180mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>cartia xt 240mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>cartia xt 300mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 120mg er (12hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 120mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 120mg tab</i>	\$0 (Tier 2)	
<i>diltiazem 180mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 240mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 300mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 30mg tab</i>	\$0 (Tier 1)	
<i>diltiazem 360mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 420mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 60mg er (12hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 60mg tab</i>	\$0 (Tier 2)	
<i>diltiazem 90mg er (12hr) cap</i>	\$0 (Tier 2)	
<i>diltiazem 90mg tab</i>	\$0 (Tier 2)	
<i>dilt-xr 120mg cap</i>	\$0 (Tier 2)	
<i>dilt-xr 180mg cap</i>	\$0 (Tier 2)	
<i>dilt-xr 240mg cap</i>	\$0 (Tier 2)	
<i>felodipine 10mg er tab</i>	\$0 (Tier 2)	
<i>felodipine 2.5mg er tab</i>	\$0 (Tier 2)	
<i>felodipine 5mg er tab</i>	\$0 (Tier 2)	
<i>nifedipine 30mg er tab</i>	\$0 (Tier 1)	
<i>nifedipine 30mg osmotic er tab</i>	\$0 (Tier 1)	
<i>nifedipine 60mg er tab</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>nifedipine 60mg osmotic er tab</i>	\$0 (Tier 1)	
<i>nifedipine 90mg er tab</i>	\$0 (Tier 1)	
<i>nifedipine 90mg osmotic er tab</i>	\$0 (Tier 1)	
<i>nimodipine 30mg cap</i>	\$0 (Tier 2)	
<i>tiadylt 120mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>tiadylt 180mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>tiadylt 240mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>tiadylt 300mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>tiadylt 360mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>tiadylt 420mg er (24hr) cap</i>	\$0 (Tier 2)	
<i>verapamil 120mg er cap</i>	\$0 (Tier 2)	
<i>verapamil 120mg er tab</i>	\$0 (Tier 2)	
<i>verapamil 120mg tab</i>	\$0 (Tier 1)	
<i>verapamil 180mg er cap</i>	\$0 (Tier 2)	
<i>verapamil 180mg er tab</i>	\$0 (Tier 2)	
<i>verapamil 240mg er cap</i>	\$0 (Tier 2)	
<i>verapamil 240mg er tab</i>	\$0 (Tier 2)	
<i>verapamil 40mg tab</i>	\$0 (Tier 1)	
<i>verapamil 80mg tab</i>	\$0 (Tier 1)	
CARDIOVASCULAR AGENTS, OTHER		
ATTRUBY 356MG TAB	25% (Tier 5)	NDS PA QL=112 EA/28 Days
<i>digoxin 0.125mg tab</i>	\$0 (Tier 1)	
<i>digoxin 0.25mg tab</i>	\$0 (Tier 1)	
<i>ivabradine 5mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>ivabradine 7.5mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>pentoxifylline 400mg er tab</i>	\$0 (Tier 2)	
<i>ranolazine 1000mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>ranolazine 500mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>sacubitril/valsartan 24-26mg tab</i>	\$0 (Tier 2)	QL=180 EA/30 Days
<i>sacubitril/valsartan 49-51mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>sacubitril/valsartan 97-103mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
VERQUVO 10MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
VERQUVO 2.5MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
VERQUVO 5MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
WEGOVY 0.25MG/0.5ML AUTO-INJECTOR	25% (Tier 3)	PA QL=2 ML/28 Days
WEGOVY 0.5MG/0.5ML AUTO-INJECTOR	25% (Tier 3)	PA QL=2 ML/28 Days
WEGOVY 1.5MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
WEGOVY 1.7MG/0.75ML AUTO-INJECTOR	25% (Tier 3)	PA QL=3 ML/28 Days
WEGOVY 1MG/0.5ML AUTO-INJECTOR	25% (Tier 3)	PA QL=2 ML/28 Days
WEGOVY 2.4MG/0.75ML AUTO-INJECTOR	25% (Tier 3)	PA QL=3 ML/28 Days
WEGOVY 25MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
WEGOVY 4MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
WEGOVY 9MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
DIURETICS, CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide 125mg tab</i>	\$0 (Tier 1)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acetazolamide 250mg tab</i>	\$0 (Tier 1)	
<i>acetazolamide 500mg er cap</i>	\$0 (Tier 2)	
<i>methazolamide 25mg tab</i>	\$0 (Tier 2)	
<i>methazolamide 50mg tab</i>	\$0 (Tier 2)	
DIURETICS, LOOP		
<i>bumetanide 0.25mg/ml inj</i>	\$0 (Tier 2)	
<i>bumetanide 0.5mg tab</i>	\$0 (Tier 2)	
<i>bumetanide 1mg tab</i>	\$0 (Tier 2)	
<i>bumetanide 2mg tab</i>	\$0 (Tier 2)	
ENBUMYST 0.5MG/0.1ML NASAL SPRAY	25% (Tier 5)	NDS QL=36 EA/7 Days
<i>furosemide 10mg/ml inj</i>	\$0 (Tier 2)	
FUROSEMIDE 10MG/ML ORAL SOLN	\$0 (Tier 1)	
<i>furosemide 20mg tab</i>	\$0 (Tier 1)	
<i>furosemide 40mg tab</i>	\$0 (Tier 1)	
<i>furosemide 80mg tab</i>	\$0 (Tier 1)	
FUROSEMIDE 8MG/ML ORAL SOLN	\$0 (Tier 2)	
<i>toremide 100mg tab</i>	\$0 (Tier 1)	
<i>toremide 10mg tab</i>	\$0 (Tier 1)	
<i>toremide 20mg tab</i>	\$0 (Tier 1)	
<i>toremide 5mg tab</i>	\$0 (Tier 1)	
DIURETICS, POTASSIUM-SPARING		
<i>amiloride 5mg tab</i>	\$0 (Tier 1)	
<i>spironolactone 100mg tab</i>	\$0 (Tier 1)	
<i>spironolactone 25mg tab</i>	\$0 (Tier 1)	
<i>spironolactone 50mg tab</i>	\$0 (Tier 1)	
DIURETICS, THIAZIDE		
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	\$0 (Tier 2)	
<i>chlorthalidone 25mg tab</i>	\$0 (Tier 1)	
<i>chlorthalidone 50mg tab</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide 12.5mg cap</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide 12.5mg tab</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide 25mg tab</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide 50mg tab</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide/spironolactone 25-25mg tab</i>	\$0 (Tier 2)	
<i>hydrochlorothiazide/triamterene 25-37.5mg cap</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide/triamterene 25-37.5mg tab</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide/triamterene 50-75mg tab</i>	\$0 (Tier 1)	
<i>indapamide 1.25mg tab</i>	\$0 (Tier 1)	
<i>indapamide 2.5mg tab</i>	\$0 (Tier 1)	
<i>metolazone 10mg tab</i>	\$0 (Tier 1)	
<i>metolazone 2.5mg tab</i>	\$0 (Tier 1)	
<i>metolazone 5mg tab</i>	\$0 (Tier 1)	
VASODILATORS, DIRECT-ACTING ARTERIAL		
<i>hydralazine 100mg tab</i>	\$0 (Tier 1)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>hydralazine 10mg tab</i>	\$0 (Tier 1)	
<i>hydralazine 25mg tab</i>	\$0 (Tier 1)	
<i>hydralazine 50mg tab</i>	\$0 (Tier 1)	
<i>minoxidil 10mg tab</i>	\$0 (Tier 1)	
<i>minoxidil 2.5mg tab</i>	\$0 (Tier 1)	
VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS		
<i>isosorbide dinitrate 10mg tab</i>	\$0 (Tier 2)	
<i>isosorbide dinitrate 20mg tab</i>	\$0 (Tier 2)	
<i>isosorbide dinitrate 30mg tab</i>	\$0 (Tier 2)	
<i>isosorbide dinitrate 5mg tab</i>	\$0 (Tier 2)	
<i>isosorbide mononitrate 10mg tab</i>	\$0 (Tier 2)	
<i>isosorbide mononitrate 120mg er tab</i>	\$0 (Tier 1)	
<i>isosorbide mononitrate 20mg tab</i>	\$0 (Tier 2)	
<i>isosorbide mononitrate 30mg er tab</i>	\$0 (Tier 1)	
<i>isosorbide mononitrate 60mg er tab</i>	\$0 (Tier 1)	
<i>nitro-bid 2% topical ointment</i>	\$0 (Tier 2)	
<i>nitroglycerin 0.1mg/hr patch</i>	\$0 (Tier 2)	
<i>nitroglycerin 0.2mg/hr patch</i>	\$0 (Tier 2)	
<i>nitroglycerin 0.3mg sl tab</i>	\$0 (Tier 1)	
<i>nitroglycerin 0.4mg sl tab</i>	\$0 (Tier 1)	
<i>nitroglycerin 0.4mg/hr patch</i>	\$0 (Tier 2)	
<i>nitroglycerin 0.6mg sl tab</i>	\$0 (Tier 1)	
<i>nitroglycerin 0.6mg/hr patch</i>	\$0 (Tier 2)	
CARDIOVASCULAR AGENTS - MISC.		
PROSTAGLANDIN VASODILATORS		
EPOPROSTENOL INJ 0.5MG*	\$0 (Tier 1*)	
EPOPROSTENOL INJ 1.5MG*	\$0 (Tier 1*)	
TYVASO DPI POWDER 16-32-48*	\$0 (Tier 2*)	
TYVASO DPI POWDER 16MCG*	\$0 (Tier 2*)	
TYVASO DPI POWDER 32MCG*	\$0 (Tier 2*)	
TYVASO DPI POWDER 48MCG*	\$0 (Tier 2*)	
TYVASO DPI POWDER 64MCG*	\$0 (Tier 2*)	
TYVASO SOLN 0.6MG/ML*	\$0 (Tier 2*)	
VELETRI INJ 0.5MG*	\$0 (Tier 2*)	
VELETRI INJ 1.5MG*	\$0 (Tier 2*)	
CHEMICALS		
LIQUIDS		
FT CAMPHOR SOLN SPIRIT*	\$0 (Tier 2*)	
CONTRACEPTIVES		
EMERGENCY CONTRACEPTIVES		
LEVONORGESTREL TAB 1.5MG*	\$0 (Tier 1*)	
MY WAY TAB 1.5MG*	\$0 (Tier 1*)	
NEW DAY TAB 1.5MG*	\$0 (Tier 1*)	
PROGESTIN CONTRACEPTIVES - ORAL		
OPILL TAB 0.075MG*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
PREDNISOLONE ODT TAB 10MG*	\$0 (Tier 2*)	
PREDNISOLONE ODT TAB 30MG*	\$0 (Tier 2*)	
PREDNISOLONE SOLN 10MG/5ML*	\$0 (Tier 1*)	
PREDNISOLONE SOLN 20MG/5ML*	\$0 (Tier 1*)	
PREDNISOLONE TAB 5MG*	\$0 (Tier 1*)	
PREDNISONONE DR TAB 1MG*	\$0 (Tier 1*)	
PREDNISONONE DR TAB 2MG*	\$0 (Tier 2*)	
PREDNISONONE INTENSOL CONC*	\$0 (Tier 2*)	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
BENZONATATE CAP 100MG*	\$0 (Tier 1*)	PA
BENZONATATE CAP 200MG*	\$0 (Tier 1*)	PA
BENZONATATE CAP 100MG*	\$0 (Tier 1*)	PA
BENZONATATE CAP 200MG*	\$0 (Tier 1*)	PA
COUGH DM CHILDRENS SUSP 30MG/5ML*	\$0 (Tier 1*)	PA QL=10 UNITS/1 DAYS; 20 UNITS/1 DAYS
COUGH DM SUSP*	\$0 (Tier 1*)	PA QL=10 UNITS/1 DAYS; 20 UNITS/1 DAYS
COUGH DM SUSP 30MG/5ML*	\$0 (Tier 1*)	PA QL=10 UNITS/1 DAYS; 20 UNITS/1 DAYS
DEXTROMETHORPHAN CAP 15MG*	\$0 (Tier 1*)	PA QL=8 UNITS/1 DAYS
DEXTROMETHORPHAN LIQUID 30MG/5ML*	\$0 (Tier 1*)	PA QL=10 UNITS/1 DAYS; 20 UNITS/1 DAYS
HYDROCODONE/HOMATROPINE SYRUP 5-1.5MG/5ML*	\$0 (Tier 1*)	
HYDROCODONE/HOMATROPINE TAB 5-1.5MG*	\$0 (Tier 1*)	
COUGH/COLD/ALLERGY COMBINATIONS		
ALAHIST CF TAB 10-2-20*	\$0 (Tier 2*)	PA
ALAHIST DM LIQ*	\$0 (Tier 2*)	PA QL=15 UNITS/1 DAYS; 30 UNITS/1 DAYS
ALAHIST PE TAB 2-7.5MG*	\$0 (Tier 2*)	PA
ALL DAY ALLERGY TAB 5-120MG*	\$0 (Tier 1*)	
ALLERGY D TAB 5-120MG*	\$0 (Tier 1*)	
ALLERGY MULTI SYMPTOM TAB*	\$0 (Tier 1*)	PA
ALLERGY RELIEF D-12 TAB 5-120MG*	\$0 (Tier 1*)	
ALLERGY RELIEF TAB D-24*	\$0 (Tier 1*)	
ALLERGY RELIEF-D TAB 10-240MG*	\$0 (Tier 1*)	
ALL-NITE COLD AND FLU LIQUID*	\$0 (Tier 1*)	PA QL=60 UNITS/1 DAYS; 120 UNITS/1 DAYS
APRODINE TAB 2.5-60MG*	\$0 (Tier 1*)	PA
BROM/PSE/DM SYRUP*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BROM/PSE/DM SYRUP 2-30-10*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
BROMPHEN/PSE/DM SYRUP 2-30-10*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
BROMPHEN/PSEUDOEPHEDRINE/DEXTROMETHORPHAN SYRUP*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
CETIRIZINE/PSEUDOEPHEDRINE TAB 5-120MG*	\$0 (Tier 1*)	
CHEST CONGESTION RELIEF D TAB 20-400MG*	\$0 (Tier 1*)	PA QL=3 UNITS/1 DAYS; 6 UNITS/1 DAYS
CHEST CONGESTION RELIEF DM SYRUP*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
CHEST CONGESTION TAB RELIEF PE*	\$0 (Tier 1*)	PA
CHLO TUSS LIQUID*	\$0 (Tier 2*)	PA
CODEINE/GUAIFENESIN SOLN 10-100/5*	\$0 (Tier 1*)	
COLD AND ALLERGY CHILDRENS LIQUID*	\$0 (Tier 1*)	PA
COLD AND FLU NIGHTTIME CAP*	\$0 (Tier 1*)	PA QL=4 UNITS/1 DAYS; 8 UNITS/1 DAYS
COLD AND FLU PAK DAY/NGHT*	\$0 (Tier 1*)	PA
COLD AND SINUS CAP 30-200MG*	\$0 (Tier 1*)	PA
COLD/COUGH CHILDRENS LIQUID*	\$0 (Tier 1*)	
COLD/COUGH LIQUID CHILDREN*	\$0 (Tier 1*)	PA QL=60 UNITS/1 DAYS; 120 UNITS/1 DAYS
COLD/FLU CAP DAYTIME*	\$0 (Tier 1*)	PA QL=6 UNITS/1 DAYS; 12 UNITS/1 DAYS
COLD/FLU CAP NITETIME*	\$0 (Tier 1*)	PA QL=4 UNITS/1 DAYS; 8 UNITS/1 DAYS
COUGH AND COLD TAB 4-30MG*	\$0 (Tier 1*)	PA
DAYTIME COLD/FLU RELIEF LIQUID 10/5/325*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
DECONEX DMX TAB*	\$0 (Tier 2*)	PA QL=3 UNITS/1 DAYS; 6 UNITS/1 DAYS
DECONEX IR TAB 10-385MG*	\$0 (Tier 1*)	PA
DM/GG/PHENYL LIQUID*	\$0 (Tier 1*)	PA QL=45 UNITS/1 DAYS; 90 UNITS/1 DAYS
DM/GUAIFENESIN LIQUID 20/200MG*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
DURAFLU TAB*	\$0 (Tier 2*)	PA QL=3 UNITS/1 DAYS; 6 UNITS/1 DAYS
DURAHIST TAB 2-60MG*	\$0 (Tier 1*)	PA
ED A-HIST DM LIQUID*	\$0 (Tier 1*)	PA QL=15 UNITS/1 DAYS; 30 UNITS/1 DAYS
ED A-HIST DM TAB*	\$0 (Tier 1*)	PA QL=3 UNITS/1 DAYS; 6 UNITS/1 DAYS
ED A-HIST LIQUID 4-10MG/5ML*	\$0 (Tier 2*)	PA
ED A-HIST TAB*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ED BRON GP LIQUID*	\$0 (Tier 1*)	PA
ENDACOF-DM LIQUID*	\$0 (Tier 1*)	PA QL=60 UNITS/1 DAYS; 120 UNITS/1 DAYS
ENDAL LIQUID*	\$0 (Tier 2*)	PA
FEXOFENADINE/PSE TAB 60-120MG*	\$0 (Tier 1*)	
FLU HMP TAB 10-352-2MG*	\$0 (Tier 1*)	PA
GUAIFENESIN/CODEINE SOLN 100-10MG/5ML*	\$0 (Tier 1*)	
GUAIFENESIN/DEXTROMETHORPHAN SYRUP 100-10/5*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
GUAIFENESIN/PSE ER TAB 120/1200*	\$0 (Tier 1*)	PA
HEAD CONGESTION/MUCUS TAB*	\$0 (Tier 1*)	PA
HISTEX-DM SYRUP*	\$0 (Tier 2*)	PA QL=10 UNITS/1 DAYS; 20 UNITS/1 DAYS
HYDROCODONE POLISTIREX/CHLORPHEN CR SUSP 10-8MG/5ML*	\$0 (Tier 2*)	
LOHIST-D LIQUID 2-30MG/5ML*	\$0 (Tier 2*)	PA
LOHIST-DM SYRUP 5-2-10MG*	\$0 (Tier 2*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
LORATADINE-D 24 HOUR TAB*	\$0 (Tier 1*)	
LORATADINE-D TAB 5-120MG*	\$0 (Tier 1*)	
MAPAP COLD FORMULA TAB*	\$0 (Tier 1*)	PA QL=6 UNITS/1 DAYS; 12 UNITS/1 DAYS
M-END DMX LIQUID*	\$0 (Tier 2*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
MUCUS RELIEF D TAB 60-600MG*	\$0 (Tier 1*)	PA
MUCUS RELIEF DM COUGH TAB*	\$0 (Tier 1*)	PA QL=3 UNITS/1 DAYS; 6 UNITS/1 DAYS
MUCUS RELIEF DM ER TAB 30-600*	\$0 (Tier 1*)	PA QL=4 UNITS/1 DAYS
MUCUS RELIEF DM ER TAB 30-600MG*	\$0 (Tier 1*)	PA QL=4 UNITS/1 DAYS
MUCUS RELIEF DM LIQUID 5-100/5*	\$0 (Tier 1*)	PA QL=60 UNITS/1 DAYS; 120 UNITS/1 DAYS
MUCUS RELIEF ER TAB 30-600*	\$0 (Tier 1*)	PA QL=4 UNITS/1 DAYS
MUCUS RELIEF TAB 10-400MG*	\$0 (Tier 1*)	PA
MUCUS RELIEF TAB 60-1200*	\$0 (Tier 1*)	PA QL=2 UNITS/1 DAYS
MUCUS RELIEF TAB 60-1200MG*	\$0 (Tier 1*)	PA QL=2 UNITS/1 DAYS
MUCUS RELIEF-D MAXIMUM TAB 120-1200*	\$0 (Tier 1*)	PA
NINJACOF LIQUID*	\$0 (Tier 2*)	PA
NOHIST-DM LIQUID*	\$0 (Tier 1*)	PA QL=15 UNITS/1 DAYS; 30 UNITS/1 DAYS
PHENYLEPHRINE/BROMPHENIRAMINE/DM LIQ 10-4-20MG/5ML*	\$0 (Tier 1*)	PA QL=60 UNITS/1 DAYS; 120 UNITS/1 DAYS
POLY HIST FORTE TAB 10.5-10*	\$0 (Tier 2*)	PA
POLYTUSSIN DM LIQ*	\$0 (Tier 2*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
POLY-VENT DM TAB 60-20-380MG*	\$0 (Tier 2*)	PA QL=2 UNITS/1 DAYS; 4 UNITS/1 DAYS
POLY-VENT IR TAB 60-380MG*	\$0 (Tier 2*)	PA
PROMETHAZINE DM SOLN*	\$0 (Tier 1*)	PA QL=15 UNITS/1 DAYS; 30 UNITS/1 DAYS
PROMETHAZINE SYRUP DM*	\$0 (Tier 1*)	PA QL=15 UNITS/1 DAYS; 30 UNITS/1 DAYS
PROMETHAZINE/CODEINE SOLN 6.25/10*	\$0 (Tier 1*)	
PSEUDOEPHEDRINE/GUAIFENESIN ER TAB 60-600MG*	\$0 (Tier 1*)	PA
PSEUDOEPHEDRINE/GUAIFENESIN TAB 60-375MG*	\$0 (Tier 2*)	PA
PSEUDOEPHEDRINE/GUAIFENESIN TAB 60-600MG*	\$0 (Tier 1*)	PA
PYRILAMINE/DEXTROMETHORPHAN DM LIQUID*	\$0 (Tier 1*)	PA
ROBAFEN CF MULTI-SYMPTOM LIQUID*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
ROBAFEN DM LIQUID 20-200MG*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
RYNEX DM LIQUID*	\$0 (Tier 1*)	PA QL=60 UNITS/1 DAYS; 120 UNITS/1 DAYS
RYNEX PE ELIXIR*	\$0 (Tier 1*)	PA
RYNEX PSE ELIXIR*	\$0 (Tier 1*)	PA
SEVERE COLD AND FLU TAB*	\$0 (Tier 1*)	PA QL=6 UNITS/1 DAYS; 12 UNITS/1 DAYS
SINUS CONGESTION/PAIN TAB 5-325MG*	\$0 (Tier 1*)	PA
SINUS RELIEF SEVERE TAB*	\$0 (Tier 1*)	PA
SINUS RELIEF TAB 5-325MG*	\$0 (Tier 1*)	PA
SINUS/COLD-D TAB 120-220MG*	\$0 (Tier 1*)	
SINUS+HEADACHE TAB 5-325MG*	\$0 (Tier 1*)	PA
TUSSIN DM LIQUID 20-200MG*	\$0 (Tier 1*)	PA QL=30 UNITS/1 DAYS; 60 UNITS/1 DAYS
TUXARIN ER TAB 54.3-8MG*	\$0 (Tier 2*)	
VANACOF CP LIQUID*	\$0 (Tier 2*)	
VANACOF DM LIQUID*	\$0 (Tier 1*)	PA QL=45 UNITS/1 DAYS; 90 UNITS/1 DAYS
VANACOF LIQUID*	\$0 (Tier 2*)	PA
WESTUSSIN DM LIQ 7.5-2-15*	\$0 (Tier 2*)	PA QL=15 UNITS/1 DAYS; 30 UNITS/1 DAYS
WESTUSSIN DM SYP 5-10-1MG/5 ML*	\$0 (Tier 2*)	PA
EXPECTORANTS		
CHEST CONGESTION SYRUP 100/5ML*	\$0 (Tier 1*)	PA
CHEST CONGESTION TAB 400MG*	\$0 (Tier 1*)	PA
GUAIFENESIN LIQUID 100MG/5ML*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GUAIFENESIN TAB 600MG ER*	\$0 (Tier 1*)	PA
MUCUS AND CHEST LIQUID 200/10ML*	\$0 (Tier 1*)	
MUCUS RELIEF ER TAB 1200*	\$0 (Tier 1*)	PA QL=2 UNITS/1 DAYS
MUCUS RELIEF ER TAB 600MG*	\$0 (Tier 1*)	PA
TUSSIN MUCUS LIQUID 200/10ML*	\$0 (Tier 1*)	PA
MISC. RESPIRATORY INHALANTS		
CHEST RUB OINTMENT*	\$0 (Tier 1*)	
HYPERSAL NEB SOLN 3.5%*	\$0 (Tier 2*)	
HYPERSAL NEB SOLN 7%*	\$0 (Tier 2*)	
NEBUSAL NEB SOLN 3%*	\$0 (Tier 2*)	
NEBUSAL NEB SOLN 6%*	\$0 (Tier 2*)	
PULMOSAL NEB SOLN 7%*	\$0 (Tier 2*)	
SOD CHLORIDE NEB SOLN 0.9%*	\$0 (Tier 2*)	
SODIUM CHLORIDE NEB SOLN 0.9%*	\$0 (Tier 2*)	
SODIUM CHLORIDE NEB SOLN 3%*	\$0 (Tier 2*)	
SODIUM CHLORIDE NEB SOLN 7%*	\$0 (Tier 2*)	
VAPOR STEAM LIQUID 6.2%*	\$0 (Tier 1*)	
DENTAL AND ORAL AGENTS		
DENTAL AND ORAL AGENTS		
<i>cevimeline 30mg cap</i>	\$0 (Tier 2)	
<i>chlorhexidine gluconate 0.12% mouthwash</i>	\$0 (Tier 1)	
<i>clotrimazole 10mg lozenge</i>	\$0 (Tier 1)	
<i>kourzeq 0.1% oral paste</i>	\$0 (Tier 2)	
<i>lidocaine viscous 2% mucous membrane topical soln</i>	\$0 (Tier 1)	
<i>nystatin 100000unit/ml oral susp</i>	\$0 (Tier 1)	
<i>periogard 0.12% mouthwash</i>	\$0 (Tier 1)	
<i>pilocarpine 5mg tab</i>	\$0 (Tier 2)	
<i>pilocarpine 7.5mg tab</i>	\$0 (Tier 2)	
<i>triamcinolone acetonide 0.1% oral paste</i>	\$0 (Tier 2)	
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>acutane 10mg cap</i>	\$0 (Tier 2)	
<i>acutane 20mg cap</i>	\$0 (Tier 2)	
<i>acutane 40mg cap</i>	\$0 (Tier 2)	
ACNE MEDICATION GEL 10%*	\$0 (Tier 1*)	
ACNE MEDICATION GEL 5%*	\$0 (Tier 1*)	
ACNE MEDICATION LOTION 10%*	\$0 (Tier 1*)	
ADAPALENE GEL 0.1%*	\$0 (Tier 1*)	
<i>amnesteem 10mg cap</i>	\$0 (Tier 2)	
<i>amnesteem 20mg cap</i>	\$0 (Tier 2)	
<i>amnesteem 30mg cap</i>	\$0 (Tier 2)	
<i>amnesteem 40mg cap</i>	\$0 (Tier 2)	
BENZOYL PEROXIDE GEL 10%*	\$0 (Tier 1*)	
BENZOYL PEROXIDE GEL 2.5%*	\$0 (Tier 1*)	
BENZOYL PEROXIDE GEL 5%*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
BENZOYL PEROXIDE LIQUID WASH 10%*	\$0 (Tier 1*)	
BENZOYL PEROXIDE LIQUID WASH 5%*	\$0 (Tier 1*)	
BENZOYL PEROXIDE WASH 10%*	\$0 (Tier 1*)	
BENZOYL PEROXIDE WASH 5%*	\$0 (Tier 1*)	
<i>claravis 10mg cap</i>	\$0 (Tier 2)	
<i>claravis 20mg cap</i>	\$0 (Tier 2)	
<i>claravis 30mg cap</i>	\$0 (Tier 2)	
<i>claravis 40mg cap</i>	\$0 (Tier 2)	
<i>clindamycin 1% pad</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>clindamycin 1% topical gel (once-daily)</i>	\$0 (Tier 2)	QL=75 ML/30 Days
<i>clindamycin 1% topical gel (twice-daily)</i>	\$0 (Tier 2)	QL=75 GM/30 Days
<i>clindamycin 1% topical lotion</i>	\$0 (Tier 2)	QL=60 ML/30 Days
<i>clindamycin 1% topical soln</i>	\$0 (Tier 1)	QL=60 ML/30 Days
ERY 2% PAD	\$0 (Tier 2)	QL=60 EA/30 Days
ERYTHROMYCIN 2% TOPICAL GEL	\$0 (Tier 2)	QL=60 GM/30 Days
<i>erythromycin 2% topical soln</i>	\$0 (Tier 2)	QL=60 ML/30 Days
<i>isotretinoin 10mg cap</i>	\$0 (Tier 2)	
<i>isotretinoin 20mg cap</i>	\$0 (Tier 2)	
<i>isotretinoin 30mg cap</i>	\$0 (Tier 2)	
<i>isotretinoin 40mg cap</i>	\$0 (Tier 2)	
<i>sulfacetamide sodium 10% topical lotion</i>	\$0 (Tier 2)	QL=118 ML/30 Days
<i>tretinoin 0.01% topical gel</i>	\$0 (Tier 2)	PA QL=45 GM/30 Days
<i>tretinoin 0.025% topical cream</i>	\$0 (Tier 2)	PA QL=45 GM/30 Days
<i>tretinoin 0.025% topical gel</i>	\$0 (Tier 2)	PA QL=45 GM/30 Days
<i>tretinoin 0.05% topical cream</i>	\$0 (Tier 2)	PA QL=45 GM/30 Days
<i>tretinoin 0.1% topical cream</i>	\$0 (Tier 2)	PA QL=45 GM/30 Days
<i>zenatane 10mg cap</i>	\$0 (Tier 2)	
<i>zenatane 20mg cap</i>	\$0 (Tier 2)	
<i>zenatane 30mg cap</i>	\$0 (Tier 2)	
<i>zenatane 40mg cap</i>	\$0 (Tier 2)	
ANALGESICS - TOPICAL		
BLUE GEL 2%*	\$0 (Tier 1*)	
ANTIBIOTICS - TOPICAL		
BACITRACIN OINT 500/GM*	\$0 (Tier 1*)	
BACITRACIN OINT 500UNIT/GM*	\$0 (Tier 1*)	
BACITRACIN ZINC OINT 500/GM*	\$0 (Tier 1*)	
<i>gentamicin 0.1% topical cream</i>	\$0 (Tier 2)	QL=30 GM/30 Days
<i>gentamicin 0.1% topical ointment</i>	\$0 (Tier 2)	QL=30 GM/30 Days
<i>mupirocin 2% topical ointment</i>	\$0 (Tier 1)	QL=220 GM/30 Days
NEOMYCIN/BACITRACIN/POLYMYXIN OINT*	\$0 (Tier 1*)	
POLY BACITRACIN OINT*	\$0 (Tier 1*)	
TRIPLE ANTIBIOTIC OIN*	\$0 (Tier 1*)	
TRIPLE ANTIBIOTIC OINT*	\$0 (Tier 1*)	
TRIPLE ANTIBIOTIC OINTMENT*	\$0 (Tier 1*)	
TRIPLE ANTIBIOTIC PLUS OINT*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIFUNGALS - TOPICAL		
ANTIFUNGAL CREAM 2%*	\$0 (Tier 1*)	
ANTIFUNGAL POWDER 2%*	\$0 (Tier 1*)	
ATHLETE FOOT CREAM 1%*	\$0 (Tier 1*)	
ATHLETES FOOT AEROSOL POWDER 1%*	\$0 (Tier 1*)	
ATHLETES FOOT POWDER SPRAY 2%*	\$0 (Tier 1*)	
<i>ciclopirox 0.77% topical cream</i>	\$0 (Tier 1)	QL=90 GM/30 Days
<i>ciclopirox 0.77% topical gel</i>	\$0 (Tier 2)	QL=100 GM/30 Days
<i>ciclopirox 0.77% topical lotion</i>	\$0 (Tier 2)	QL=60 ML/30 Days
<i>ciclopirox 1% shampoo</i>	\$0 (Tier 2)	QL=120 ML/30 Days
<i>ciclopirox 8% topical soln</i>	\$0 (Tier 1)	QL=13.20 ML/30 Days
<i>clotrimazole 1% topical cream</i>	\$0 (Tier 1)	QL=45 GM/30 Days
CLOTRIMAZOLE SOLN 1%*	\$0 (Tier 1*)	
<i>clotrimazole/betamethasone 1-0.05% topical cream</i>	\$0 (Tier 1)	QL=90 GM/30 Days
<i>econazole nitrate 1% topical cream</i>	\$0 (Tier 1)	QL=85 GM/30 Days
FUNGOID TINCTURE SOLN 2%*	\$0 (Tier 1*)	
<i>ketoconazole 2% shampoo</i>	\$0 (Tier 1)	QL=240 ML/30 Days
<i>ketoconazole 2% topical cream</i>	\$0 (Tier 1)	QL=120 GM/30 Days
MICONAZOLE CREAM 2%*	\$0 (Tier 1*)	
MICONAZOLE NITRATE CREAM 2%*	\$0 (Tier 1*)	
<i>nyamyc 100000unit/gm topical powder</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>nystatin 100000unit/gm topical ointment</i>	\$0 (Tier 1)	QL=30 GM/30 Days
<i>nystatin 100000unit/gm topical powder</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>nystatin 100000unit/ml topical cream</i>	\$0 (Tier 1)	QL=30 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical ointment</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>nystop 100000unit/gm topical powder</i>	\$0 (Tier 1)	QL=60 GM/30 Days
TERBINAFINE CREAM 1%*	\$0 (Tier 1*)	
TOLNAFTATE CREAM 1%*	\$0 (Tier 1*)	
TOLNAFTATE CREAM 1%*	\$0 (Tier 1*)	
TOLNAFTATE POWDER 1%*	\$0 (Tier 1*)	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
ARTHRITIS PAIN GEL 1%*	\$0 (Tier 1*)	
DICLOFENAC GEL 1%*	\$0 (Tier 1*)	
FT ARTHRITIS GEL 1%*	\$0 (Tier 1*)	
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1% topical gel</i>	25% (Tier 5)	NDS PA_NSO QL=60 GM/30 Days
<i>diclofenac sodium 3% topical gel</i>	\$0 (Tier 2)	PA QL=100 GM/30 Days
FLUOROURACIL 2% TOPICAL SOLN	\$0 (Tier 2)	QL=10 ML/30 Days
<i>fluorouracil 5% topical cream</i>	\$0 (Tier 2)	QL=40 GM/30 Days
<i>fluorouracil 5% topical soln</i>	\$0 (Tier 2)	QL=10 ML/30 Days
PANRETIN 0.1% TOPICAL GEL	25% (Tier 5)	NDS PA_NSO QL=60 GM/30 Days
VALCHLOR 0.016% TOPICAL GEL	25% (Tier 5)	NDS PA_NSO QL=60 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANTIPSORIATICS		
<i>acitretin 10mg cap</i>	\$0 (Tier 2)	
<i>acitretin 17.5mg cap</i>	\$0 (Tier 2)	
<i>acitretin 25mg cap</i>	\$0 (Tier 2)	
<i>calcipotriene 0.005% topical cream</i>	\$0 (Tier 2)	PA QL=120 GM/30 Days
<i>calcipotriene 0.005% topical ointment</i>	\$0 (Tier 2)	PA QL=120 GM/30 Days
CALCIPOTRIENE 0.005% TOPICAL SOLN	\$0 (Tier 2)	PA QL=120 ML/30 Days
METHOXSALEN 10MG CAP	25% (Tier 5)	NDS
OTEZLA 10/20/30MG TAB 28-DAY STARTER PACK (55)	25% (Tier 5)	NDS PA QL=55 EA/28 Days
OTEZLA 10/20MG TAB 28-DAY STARTER PACK (55)	25% (Tier 5)	NDS PA QL=55 EA/28 Days
OTEZLA 20MG TAB	25% (Tier 5)	NDS PA QL=60 EA/30 Days
OTEZLA 30MG TAB	25% (Tier 5)	NDS PA QL=60 EA/30 Days
OTEZLA XR 75MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
OTEZLA/OTEZLA XR 28-DAY 10/20/30/75MG STARTER PACK (41)	25% (Tier 5)	NDS PA QL=41 EA/28 Days
<i>tazarotene 0.1% topical cream</i>	\$0 (Tier 2)	PA QL=60 GM/30 Days
ANTIVIRALS - TOPICAL		
DOCOSANOL CREAM 10%*	\$0 (Tier 1*)	
CORTICOSTEROIDS - TOPICAL		
<i>ALCLOMETASONE DIPROPIONATE 0.05% TOPICAL CREAM</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>ALCLOMETASONE DIPROPIONATE 0.05% TOPICAL OINTMENT</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>betamethasone 0.05% aug topical cream</i>	\$0 (Tier 1)	QL=100 GM/30 Days
<i>betamethasone 0.05% aug topical lotion</i>	\$0 (Tier 2)	QL=120 ML/30 Days
<i>betamethasone 0.05% topical cream</i>	\$0 (Tier 2)	QL=90 GM/30 Days
<i>betamethasone 0.05% topical lotion</i>	\$0 (Tier 2)	QL=120 ML/30 Days
<i>betamethasone 0.1% topical cream</i>	\$0 (Tier 1)	QL=135 GM/30 Days
BETAMETHASONE 0.1% TOPICAL LOTION	\$0 (Tier 2)	QL=120 ML/30 Days
<i>betamethasone dipropionate 0.05% aug topical ointment</i>	\$0 (Tier 2)	QL=100 GM/30 Days
<i>betamethasone dipropionate 0.05% topical ointment</i>	\$0 (Tier 2)	QL=90 GM/30 Days
<i>betamethasone valerate 0.1% topical ointment</i>	\$0 (Tier 1)	QL=135 GM/30 Days
<i>clobetasol propionate 0.05% shampoo</i>	\$0 (Tier 2)	QL=236 ML/30 Days
<i>clobetasol propionate 0.05% topical cream</i>	\$0 (Tier 1)	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical e cream</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical foam</i>	\$0 (Tier 2)	QL=100 GM/30 Days
<i>clobetasol propionate 0.05% topical gel</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical lotion</i>	\$0 (Tier 2)	QL=118 ML/30 Days
<i>clobetasol propionate 0.05% topical ointment</i>	\$0 (Tier 1)	QL=120 GM/30 Days
<i>clobetasol propionate 0.05% topical soln</i>	\$0 (Tier 1)	QL=100 ML/30 Days
<i>desonide 0.05% topical cream</i>	\$0 (Tier 2)	QL=60 GM/30 Days
<i>desonide 0.05% topical ointment</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>desoximetasone 0.25% topical cream</i>	\$0 (Tier 2)	QL=100 GM/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>desoximetasone 0.25% topical ointment</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% topical cream</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.01% topical oil</i>	\$0 (Tier 2)	QL=120 ML/30 Days
<i>fluocinolone acetonide 0.01% topical soln</i>	\$0 (Tier 2)	QL=90 ML/30 Days
<i>fluocinolone acetonide 0.025% topical cream</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>fluocinolone acetonide 0.025% topical ointment</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>fluocinonide 0.05% topical cream</i>	\$0 (Tier 2)	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical e cream</i>	\$0 (Tier 2)	QL=120 GM/30 Days
<i>fluocinonide 0.05% topical gel</i>	\$0 (Tier 2)	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical ointment</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>fluocinonide 0.05% topical soln</i>	\$0 (Tier 1)	QL=60 ML/30 Days
<i>fluocinonide 0.1% topical cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>fluticasone propionate 0.005% topical ointment</i>	\$0 (Tier 2)	QL=240 GM/30 Days
<i>fluticasone propionate 0.05% topical cream</i>	\$0 (Tier 1)	QL=240 GM/30 Days
<i>halobetasol propionate 0.05% topical cream</i>	\$0 (Tier 2)	QL=50 GM/30 Days
<i>halobetasol propionate 0.05% topical ointment</i>	\$0 (Tier 2)	QL=50 GM/30 Days
<i>hydrocortisone 1% topical cream</i>	\$0 (Tier 1)	QL=240 GM/30 Days
HYDROCORTISONE 2.5% TOPICAL LOTION	\$0 (Tier 2)	QL=118 ML/30 Days
<i>hydrocortisone 2.5% topical ointment</i>	\$0 (Tier 1)	QL=240 GM/30 Days
<i>mometasone furoate 0.1% topical cream</i>	\$0 (Tier 1)	QL=180 GM/30 Days
<i>mometasone furoate 0.1% topical lotion</i>	\$0 (Tier 2)	QL=180 ML/30 Days
<i>mometasone furoate 0.1% topical ointment</i>	\$0 (Tier 1)	QL=180 GM/30 Days
<i>triamcinolone acetonide 0.025% topical cream</i>	\$0 (Tier 1)	QL=454 GM/30 Days
TRIAMCINOLONE ACETONIDE 0.025% TOPICAL LOTION	\$0 (Tier 1)	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.025% topical ointment</i>	\$0 (Tier 1)	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% topical cream</i>	\$0 (Tier 1)	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.1% topical lotion</i>	\$0 (Tier 1)	QL=120 ML/30 Days
<i>triamcinolone acetonide 0.1% topical ointment</i>	\$0 (Tier 1)	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% topical cream</i>	\$0 (Tier 1)	QL=454 GM/30 Days
<i>triamcinolone acetonide 0.5% topical ointment</i>	\$0 (Tier 1)	QL=120 GM/30 Days
EMOLLIENTS		
COATS ALOE CREAM*	\$0 (Tier 2*)	
COATS ALOE GEL*	\$0 (Tier 2*)	
COATS ALOE MOISTURIZING LOTION*	\$0 (Tier 2*)	
VITAMIN A AND D OINT*	\$0 (Tier 1*)	
KERATOLYTIC/ANTIMITOTIC AGENTS		
CALLUS REMOV PAD 40%*	\$0 (Tier 1*)	
CORN AND CALLUS LIQUID*	\$0 (Tier 1*)	
CORN REMOVER PAD 40%*	\$0 (Tier 1*)	
WART REMOVER LIQUID 17%*	\$0 (Tier 1*)	
LINIMENTS		
COATS ALOE LINIMENT LOTION 10%*	\$0 (Tier 2*)	
PAIN RELIEVING CREAM*	\$0 (Tier 1*)	
LOCAL ANESTHETICS - TOPICAL		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ANLIDO 24 PAD 4%*	\$0 (Tier 1*)	
CALAMINE CLEAR LOTION 1-0.1%*	\$0 (Tier 1*)	
CALAMINE PLUS LOTION 1-8%*	\$0 (Tier 1*)	
CAPSAICIN CREAM 0.025%*	\$0 (Tier 1*)	
DIBUCAINE OIN 1%*	\$0 (Tier 1*)	
<i>lidocaine 4% mucous membrane topical soln</i>	\$0 (Tier 2)	QL=50 ML/30 Days
<i>lidocaine 5% patch</i>	\$0 (Tier 2)	PA QL=90 EA/30 Days
<i>lidocaine 5% topical ointment</i>	\$0 (Tier 1)	PA QL=107 GM/30 Days
LIDOCAINE PA PAD 4%*	\$0 (Tier 1*)	
LIDOCAINE PAD 4%*	\$0 (Tier 1*)	
<i>lidocaine/prilocaine 2.5-2.5% topical cream</i>	\$0 (Tier 1)	QL=30 GM/30 Days
MISC. DERMATOLOGICAL PRODUCTS		
<i>acyclovir 5% topical ointment</i>	\$0 (Tier 1)	QL=30 GM/30 Days
<i>ammonium lactate 12% topical cream</i>	\$0 (Tier 1)	
<i>ammonium lactate 12% topical lotion</i>	\$0 (Tier 1)	
EUCRISA 2% TOPICAL OINTMENT	25% (Tier 3)	PA QL=100 GM/30 Days
<i>imiquimod 5% topical cream</i>	\$0 (Tier 1)	QL=24 EA/30 Days
LITFULO 50MG CAP	25% (Tier 5)	NDS PA QL=28 EA/28 Days
<i>malathion 0.5% topical lotion</i>	\$0 (Tier 2)	QL=59 ML/30 Days
<i>permethrin 5% topical cream</i>	\$0 (Tier 1)	QL=60 GM/30 Days
<i>pimecrolimus 1% topical cream</i>	\$0 (Tier 2)	QL=100 GM/30 Days
PODOFILOX 0.5% TOPICAL SOLN	\$0 (Tier 2)	QL=7 ML/30 Days
SELENIUM SULFIDE 2.5% SHAMPOO	\$0 (Tier 1)	QL=120 ML/30 Days
<i>tacrolimus 0.03% topical ointment</i>	\$0 (Tier 2)	QL=100 GM/30 Days
<i>tacrolimus 0.1% topical ointment</i>	\$0 (Tier 2)	QL=100 GM/30 Days
MISC. TOPICAL		
CUTTER BACKWOODS SPRAY 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
CUTTER LEMON EUCALYPTUS*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
DIAPER RASH OIN 40%*	\$0 (Tier 1*)	
MEDI-PADS PAD 50%*	\$0 (Tier 1*)	
NATRAPEL 12-HOUR SPRAY 20%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
OFF DEEP WDS SPR 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
OFF DEEP WOODS DRY SPRAY 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
OFF DEEP WOODS SPORTSMEN SPRAY 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
OFF DEEP WOODS SPRAY 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
REPEL HUNTERS SPRAY 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
REPEL LEMON EUCALYPTUS SPRAY*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
REPEL SPORTSMEN MAX SPRAY 40%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
REPEL SPORTSMEN SPRAY 25%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
SAWYER INSECT REPELLENT 20%*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
ULTRATHON INSECT REPELLENT*	\$0 (Tier 1*)	QL=1 QUANTITY PER DISPENSING; 2 FILLS/30 DAYS
Z-BUM CREAM 22.5%*	\$0 (Tier 1*)	
ZINC OXIDE CREAM 22%*	\$0 (Tier 1*)	
ZINC OXIDE OINT 10%*	\$0 (Tier 2*)	
ZINC OXIDE OINT 20%*	\$0 (Tier 1*)	
ZINC OXIDE OINT 25%*	\$0 (Tier 1*)	
ROSACEA AGENTS		
<i>azelaic acid 15% topical gel</i>	\$0 (Tier 2)	QL=50 GM/30 Days
<i>metronidazole 0.75% topical cream</i>	\$0 (Tier 2)	QL=45 GM/30 Days
<i>metronidazole 0.75% topical gel</i>	\$0 (Tier 2)	QL=45 GM/30 Days
<i>metronidazole 1% topical gel</i>	\$0 (Tier 2)	QL=60 GM/30 Days
SCABICIDES & PEDICULICIDES		
LICE KILLING SHAMPOO 0.33-4%*	\$0 (Tier 1*)	
VANALICE GEL 0.3-3.5%*	\$0 (Tier 2*)	
WOUND CARE PRODUCTS		
SANTYL 250UNIT/GM TOPICAL OINTMENT	25% (Tier 3)	PA QL=90 GM/30 Days
<i>silver sulfadiazine 1% topical cream</i>	\$0 (Tier 1)	
<i>ssd 1% topical cream</i>	\$0 (Tier 1)	
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
ACCU CHEK AVIVA PLUS TEST STRIPS*	\$0 (Tier 2*)	
ACCU CHEK GUIDE TEST STRIPS*	\$0 (Tier 2*)	
ACCU-CHEK GUIDE TEST STRIP*	\$0 (Tier 2*)	
ACCU-CHEK GUIDE TEST STRIPS*	\$0 (Tier 2*)	
ACCU-CHEK SMARTVIEW TEST STRIPS*	\$0 (Tier 2*)	
ACCUTREND TEST STRIPS*	\$0 (Tier 2*)	
ADVOCATE REDI-CODE TEST STRIPS*	\$0 (Tier 2*)	
ADVOCATE TEST STRIPS*	\$0 (Tier 2*)	
AGAMATRIX JAZZ TEST STRIPS*	\$0 (Tier 2*)	
AGAMATRIX PRESTO TEST STRIPS*	\$0 (Tier 2*)	
AGAMATRIX TEST STRIPS*	\$0 (Tier 2*)	
ASSURE TES PLATINUM*	\$0 (Tier 2*)	
ASSURE 4 TEST STRIPS*	\$0 (Tier 2*)	
ASSURE PLATINUM TEST STRIPS*	\$0 (Tier 2*)	
ASSURE PRISM MULTI TEST STRIPS*	\$0 (Tier 2*)	
ASSURE PRISM TEST STRIPS*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ASSURE TITAN TEST STRIPS*	\$0 (Tier 2*)	
ASSURE TITANIUM TEST STRIPS*	\$0 (Tier 2*)	
BAYER BREEZE 2 TEST DISC*	\$0 (Tier 2*)	
BAYER CONTOUR NEXT TEST STRIPS*	\$0 (Tier 2*)	
BAYER CONTOUR TEST STRIPS*	\$0 (Tier 2*)	
BLOOD GLUCOSE TEST STRIPS*	\$0 (Tier 2*)	
BLULINK GLUCOSE TEST STRIP*	\$0 (Tier 2*)	
BLULINK TEST STRIPS*	\$0 (Tier 2*)	
CAREONE TEST STRIPS*	\$0 (Tier 2*)	
CARESENS N TEST STRIPS*	\$0 (Tier 2*)	
CARESENS S TEST STRIP*	\$0 (Tier 2*)	
CARETOUCH BLOOD GLUCOSE T*	\$0 (Tier 2*)	
CARETOUCH TEST STRIPS*	\$0 (Tier 2*)	
CLEVER CHEK TEST STRIPS*	\$0 (Tier 2*)	
CLEVER CHOICE TEST STRIPS*	\$0 (Tier 2*)	
CONTOUR PLUS TEST STRIPS*	\$0 (Tier 2*)	
CVS ADVANCED TEST STRIPS*	\$0 (Tier 2*)	
CVS GLUCOSE METER TEST ST*	\$0 (Tier 2*)	
DIATRUE PLUS TEST STRIPS*	\$0 (Tier 2*)	
EASY PLUS II TEST STRIPS*	\$0 (Tier 2*)	
EASY STEP TEST STRIPS*	\$0 (Tier 2*)	
EASY TALK TEST STRIPS*	\$0 (Tier 2*)	
EASY TALK TEST STRIPS PLUS II*	\$0 (Tier 2*)	
EASY TOUCH TEST STRIPS*	\$0 (Tier 2*)	
EASY TRAK II TEST STRIPS*	\$0 (Tier 2*)	
EASY TRAK TEST STRIPS*	\$0 (Tier 2*)	
EASYGLUCO TEST STRIPS*	\$0 (Tier 2*)	
EASYMAX 15 TEST STRIPS*	\$0 (Tier 2*)	
EASYMAX TEST STRIPS*	\$0 (Tier 2*)	
ELEMENT TEST STRIPS*	\$0 (Tier 2*)	
ELEMNT COMPANY TEST STRIPS*	\$0 (Tier 2*)	
EMBRACE BLOOD GLUCOSE TEST*	\$0 (Tier 2*)	
EMBRACE PRO TEST STRIPS*	\$0 (Tier 2*)	
EMBRACE TALK BLOOD GLUCOS*	\$0 (Tier 2*)	
EMBRACE TALK TEST STRIPS*	\$0 (Tier 2*)	
EMBRACE TEST STRIPS*	\$0 (Tier 2*)	
EVENCARE G2 TEST STRIPS*	\$0 (Tier 2*)	
EVENCARE G3 TEST STRIPS*	\$0 (Tier 2*)	
EVENCARE MINI TEST STRIP*	\$0 (Tier 2*)	
EVENCARE PROVIEW BLOOD GL*	\$0 (Tier 2*)	
EVOLUTION TEST STRIPS*	\$0 (Tier 2*)	
EZ SMART PLUS TEST STRIPS*	\$0 (Tier 2*)	
EZ SMART TEST STRIPS*	\$0 (Tier 2*)	
FLOWFLEX KIT HOME TEST*	\$0 (Tier 2*)	
FORA 6 CONNECT TEST STRIPS*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FORA 6 CONNECT/GTEL BLOOD TEST STRIPS*	\$0 (Tier 2*)	
FORA G20 TEST STRIPS*	\$0 (Tier 2*)	
FORA GD20 TEST STRIPS*	\$0 (Tier 2*)	
FORA GD50 TEST STRIPS*	\$0 (Tier 2*)	
FORA GTEL TEST STRIPS*	\$0 (Tier 2*)	
FORA TEST STRIP*	\$0 (Tier 2*)	
FORA TEST STRIPS*	\$0 (Tier 2*)	
FORA V10 TEST STRIPS*	\$0 (Tier 2*)	
FORA V30A TEST STRIPS*	\$0 (Tier 2*)	
FORA VOICE TEST STRIP*	\$0 (Tier 2*)	
FORACARE GD40 TEST STRIPS*	\$0 (Tier 2*)	
FORACARE PREMIUM TEST STRIPS*	\$0 (Tier 2*)	
FORACARE TEST STRIPS*	\$0 (Tier 2*)	
FREESTYLE INSULINX TEST STRIPS*	\$0 (Tier 2*)	
FREESTYLE LITE TEST STRIPS*	\$0 (Tier 2*)	
FREESTYLE PRECISION NEO TEST STRIPS*	\$0 (Tier 2*)	
FREESTYLE TEST STRIPS*	\$0 (Tier 2*)	
GE100 TEST STRIPS*	\$0 (Tier 2*)	
GENSTRIP 50 TEST STRIPS*	\$0 (Tier 2*)	
GHT TEST STRIPS*	\$0 (Tier 2*)	
GLUCOCARD EXPRESSION TEST STRIPS*	\$0 (Tier 2*)	
GLUCOCARD SENSOR PLUS TEST STRIPS*	\$0 (Tier 2*)	
GLUCOCARD SHINE TEST STRIPS*	\$0 (Tier 2*)	
GLUCOCARD VITAL TEST STRIPS*	\$0 (Tier 2*)	
GLUCOCOM TEST STRIPS*	\$0 (Tier 2*)	
GLUCONAVII TEST STRIPS*	\$0 (Tier 2*)	
GNP TEST STRIPS*	\$0 (Tier 2*)	
GOJJI TEST STRIPS*	\$0 (Tier 2*)	
HARMONY BLOOD GLUCOSE TES*	\$0 (Tier 2*)	
HEALTHPRO TEST STRIPS*	\$0 (Tier 2*)	
IHEALTH BLOOD TEST GLUCOSE*	\$0 (Tier 2*)	
INFINITY TEST STRIPS*	\$0 (Tier 2*)	
KROGER BLOOD TES GLUCOSE*	\$0 (Tier 2*)	
KROGER PREMIUM TEST STRIPS*	\$0 (Tier 2*)	
MEIJER PREMIUM TEST STRIPS*	\$0 (Tier 2*)	
MICRODOT TEST STRIPS*	\$0 (Tier 2*)	
MOBI CONNECT TEST STRIP*	\$0 (Tier 2*)	
MYGLUCOHEALTH TEST STRIPS*	\$0 (Tier 2*)	
NEUTEK 2TEK TEST STRIPS*	\$0 (Tier 2*)	
NO CODING TEST STRIP*	\$0 (Tier 2*)	
NOVA MAX TEST STRIPS*	\$0 (Tier 2*)	
ON CALL EXPRESS TEST STRIPS*	\$0 (Tier 2*)	
ONETOUCH ULTRA*	\$0 (Tier 2*)	
ONETOUCH ULTRA BLUE TEST STRIPS*	\$0 (Tier 2*)	
ONETOUCH VERIO TEST STRIP*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ONETOUCH VERIO TEST STRIPS*	\$0 (Tier 2*)	
OPTIUMEZ TEST STRIPS*	\$0 (Tier 2*)	
PHARMACIST CHOICE TEST STRIPS*	\$0 (Tier 2*)	
PIP BLOOD GLUCOSE TEST STRIPS*	\$0 (Tier 2*)	
PRECISION TEST STRIPS*	\$0 (Tier 2*)	
PRECISION XTRA TEST STRIPS*	\$0 (Tier 2*)	
PRECISIONS XTRA TEST STRIPS*	\$0 (Tier 2*)	
PREMIUM BLOOD GLUCOSE TEST STRIPS*	\$0 (Tier 2*)	
PREMIUM GLUCOSE TEST STRIPS*	\$0 (Tier 2*)	
PRO VOICE TEST STRIPS*	\$0 (Tier 2*)	
PRODIGY TEST STRIPS*	\$0 (Tier 2*)	
QUICKVUE HOME KIT COVID-19*	\$0 (Tier 2*)	
QUICKVUE KIT SARS ANT*	\$0 (Tier 2*)	
QUINTET TEST STRIPS*	\$0 (Tier 2*)	
REFUAH PLUS TEST STRIPS*	\$0 (Tier 2*)	
RELION METRIX TEST STRIPS*	\$0 (Tier 2*)	
RELION PREMIER TEST STRIPS*	\$0 (Tier 2*)	
RELION PRIME TEST STRIPS*	\$0 (Tier 2*)	
RELION TEST STRIPS*	\$0 (Tier 2*)	
REVEAL TEST STRIPS*	\$0 (Tier 2*)	
REXALL TEST STRIPS*	\$0 (Tier 2*)	
RIGHTEST GS550 TEST STRIPS*	\$0 (Tier 2*)	
RIGHTEST TEST STRIP*	\$0 (Tier 2*)	
RIGHTEST TEST STRIPS*	\$0 (Tier 2*)	
SMART SENSE PREMIUM TEST STRIPS*	\$0 (Tier 2*)	
SMART SENSE TEST STRIPS*	\$0 (Tier 2*)	
SMART SENSE VALUE TEST STRIPS*	\$0 (Tier 2*)	
SMARTTEST TEST STRIPS*	\$0 (Tier 2*)	
SOLUS V2 AUDIBLE TEST STRIPS*	\$0 (Tier 2*)	
SURE TEST EASYPLUS TEST STRIPS*	\$0 (Tier 2*)	
TELCARE TEST STRIPS*	\$0 (Tier 2*)	
TEST STRIPS*	\$0 (Tier 2*)	
TGT TEST STRIPS*	\$0 (Tier 2*)	
TRU METRIX TEST STRIPS*	\$0 (Tier 2*)	
TRUE METRIX TEST STRIPS*	\$0 (Tier 2*)	
TRUE METRIX TEST STRIPS*	\$0 (Tier 2*)	PA QL=100 UNITS/30 DAYS
TRUENESS TEST STRIPS*	\$0 (Tier 2*)	
TRUETEST STRIPS*	\$0 (Tier 2*)	
TRUETRACK TEST STRIPS*	\$0 (Tier 2*)	
ULTRATRAK PRO TEST STRIPS*	\$0 (Tier 2*)	
ULTRATRAK ULTIMATE TEST STRIPS*	\$0 (Tier 2*)	
UNISTRIPI TEST STRIPS*	\$0 (Tier 2*)	
VIVAGUARD INO TEST STRIP*	\$0 (Tier 2*)	
VIVAGUARD TEST STRIPS*	\$0 (Tier 2*)	
WAVESENSE PRESTO TEST STRIPS*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
DIETARY MANAGEMENT PRODUCTS		
CEREFOLIN TAB*	\$0 (Tier 2*)	PA
ELFOLATE PLUS TAB*	\$0 (Tier 2*)	PA
ENLYTE CAP*	\$0 (Tier 2*)	
FOLIC ACID/VITAMIN B-6/VITAMIN B-12 TAB*	\$0 (Tier 1*)	PA
FOLTANX TAB*	\$0 (Tier 2*)	PA
L-METHYL-B6-B12 TAB*	\$0 (Tier 2*)	PA
L-METHYL-MC TAB*	\$0 (Tier 2*)	PA
METAFOLBIC TAB*	\$0 (Tier 2*)	PA
VITA-RESPA TAB*	\$0 (Tier 2*)	PA
WESTAB MAX TAB 2.5-25-2*	\$0 (Tier 1*)	PA
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate 10mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>alendronate 35mg tab</i>	\$0 (Tier 1)	QL=4 EA/28 Days
<i>alendronate 70mg tab</i>	\$0 (Tier 1)	QL=4 EA/28 Days
ENOBY 60MG/ML SYRINGE	25% (Tier 3)	QL=1 ML/168 Days
<i>ibandronate 150mg tab</i>	\$0 (Tier 1)	QL=1 EA/28 Days
<i>risedronate sodium 150mg tab</i>	\$0 (Tier 2)	QL=1 EA/28 Days
<i>risedronate sodium 30mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>risedronate sodium 35mg tab</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>risedronate sodium 35mg tab pack (12)</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>risedronate sodium 35mg tab pack (4)</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>risedronate sodium 5mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>salmon calcitonin 200unit/act nasal spray</i>	\$0 (Tier 2)	QL=3.70 ML/28 Days
<i>teriparatide 560mcg/2.24ml pen inj</i>	25% (Tier 5)	NDS QL=2.48 ML/28 Days
TYMLOS 3120MCG/1.56ML PEN INJ	25% (Tier 5)	NDS QL=1.56 ML/30 Days
XTRENBO 120MG/1.7ML INJ	25% (Tier 3)	PA QL=1.70 ML/28 Days
METABOLIC MODIFIERS		
<i>calcitriol 0.25mcg cap</i>	\$0 (Tier 1)	
<i>calcitriol 0.5mcg cap</i>	\$0 (Tier 1)	
<i>calcitriol 1mcg/ml oral soln</i>	\$0 (Tier 2)	
<i>carglumic acid 200mg tab for oral susp</i>	25% (Tier 5)	NDS PA
<i>cinacalcet 30mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>cinacalcet 60mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>cinacalcet 90mg tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
CYSTADANE 1GM POWDER FOR ORAL SOLN	25% (Tier 5)	NDS
<i>levocarnitine 100mg/ml oral soln</i>	\$0 (Tier 2)	
<i>levocarnitine 330mg tab</i>	\$0 (Tier 2)	
<i>paricalcitol 1mcg cap</i>	\$0 (Tier 2)	
<i>paricalcitol 2mcg cap</i>	\$0 (Tier 2)	
<i>paricalcitol 4mcg cap</i>	\$0 (Tier 2)	
REDEMPLO 25MG/0.5ML SYRINGE	25% (Tier 5)	PA QL=.50 ML/84 Days
REVCovi 2.4MG/1.5ML INJ	25% (Tier 5)	NDS PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>sapropterin 100mg powder for oral soln</i>	25% (Tier 5)	NDS PA
<i>sapropterin 100mg tab</i>	25% (Tier 5)	NDS PA
<i>sapropterin 500mg powder for oral soln</i>	25% (Tier 5)	NDS PA
<i>sodium phenylbutyrate 3gm/tsp oral powder</i>	\$0 (Tier 2)	
TRYNGOLZA 80MG/0.8ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=.80 ML/28 Days
ENDOCRINE MEDICATIONS		
ANTITHYROID DRUGS		
<i>methimazole 10mg tab</i>	\$0 (Tier 1)	
<i>methimazole 5mg tab</i>	\$0 (Tier 1)	
<i>propylthiouracil 50mg tab</i>	\$0 (Tier 2)	
GLUCOCORTICOID DRUGS		
<i>budesonide 3mg dr cap</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>budesonide 9mg er tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>dexamethasone 0.5mg tab</i>	\$0 (Tier 1)	
DEXAMETHASONE 0.5MG/5ML ORAL SOLN	\$0 (Tier 2)	
<i>dexamethasone 0.75mg tab</i>	\$0 (Tier 1)	
<i>dexamethasone 1.5mg tab</i>	\$0 (Tier 1)	
<i>dexamethasone 1mg tab</i>	\$0 (Tier 1)	
<i>dexamethasone 2mg tab</i>	\$0 (Tier 1)	
<i>dexamethasone 4mg tab</i>	\$0 (Tier 1)	
<i>dexamethasone 6mg tab</i>	\$0 (Tier 1)	
<i>hydrocortisone 10mg tab</i>	\$0 (Tier 2)	
<i>hydrocortisone 20mg tab</i>	\$0 (Tier 2)	
<i>hydrocortisone 5mg tab</i>	\$0 (Tier 2)	
<i>methylprednisolone 16mg tab</i>	\$0 (Tier 2)	PA_BvD
<i>methylprednisolone 32mg tab</i>	\$0 (Tier 2)	PA_BvD
<i>methylprednisolone 4mg tab</i>	\$0 (Tier 2)	PA_BvD
<i>methylprednisolone 4mg tab pack (21)</i>	\$0 (Tier 2)	
<i>methylprednisolone 8mg tab</i>	\$0 (Tier 2)	PA_BvD
<i>prednisolone 1mg/ml oral soln</i>	\$0 (Tier 2)	PA_BvD
<i>prednisolone 3mg/ml oral soln</i>	\$0 (Tier 2)	PA_BvD
<i>prednisolone 5mg/ml oral soln</i>	\$0 (Tier 2)	PA_BvD
<i>prednisone 10mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>prednisone 10mg tab (21)</i>	\$0 (Tier 2)	
<i>prednisone 10mg tab pack (48)</i>	\$0 (Tier 2)	
<i>prednisone 1mg tab</i>	\$0 (Tier 1)	PA_BvD
PREDNISONE 1MG/ML ORAL SOLN	\$0 (Tier 2)	PA_BvD
<i>prednisone 2.5mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>prednisone 20mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>prednisone 50mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>prednisone 5mg tab</i>	\$0 (Tier 1)	PA_BvD
<i>prednisone 5mg tab pack (21)</i>	\$0 (Tier 2)	
<i>prednisone 5mg tab pack (48)</i>	\$0 (Tier 2)	
TARPEYO 4MG DR CAP	25% (Tier 5)	NDS PA QL=120 EA/30 Days
OTHER ENDOCRINE DRUGS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>cabergoline 0.5mg tab</i>	\$0 (Tier 2)	
<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	\$0 (Tier 2)	
<i>desmopressin acetate 0.1mg tab</i>	\$0 (Tier 2)	
<i>desmopressin acetate 0.2mg tab</i>	\$0 (Tier 2)	
<i>fludrocortisone acetate 0.1mg tab</i>	\$0 (Tier 1)	
INCRELEX 40MG/4ML INJ	25% (Tier 5)	NDS PA
ISTURISA 1MG TAB	25% (Tier 5)	NDS PA QL=240 EA/30 Days
ISTURISA 5MG TAB	25% (Tier 5)	NDS PA QL=360 EA/30 Days
KERENDIA 10MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
KERENDIA 20MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
KERENDIA 40MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
NORDITROPIN 10MG/1.5ML PEN INJ	25% (Tier 5)	NDS PA
NORDITROPIN 15MG/1.5ML PEN INJ	25% (Tier 5)	NDS PA
NORDITROPIN 5MG/1.5ML PEN INJ	25% (Tier 5)	NDS PA
<i>octreotide 0.05mg/ml inj</i>	\$0 (Tier 2)	PA
<i>octreotide 0.1mg/ml inj</i>	\$0 (Tier 2)	PA
<i>octreotide 0.2mg/ml inj</i>	\$0 (Tier 2)	PA
<i>octreotide 0.5mg/ml inj</i>	\$0 (Tier 2)	PA
<i>octreotide 1mg/ml inj</i>	\$0 (Tier 2)	PA
OMNITROPE 10MG/1.5ML CARTRIDGE	25% (Tier 5)	NDS PA
OMNITROPE 5.8MG INJ	25% (Tier 5)	NDS PA
OMNITROPE 5MG/1.5ML CARTRIDGE	25% (Tier 5)	NDS PA
<i>raloxifene 60mg tab</i>	\$0 (Tier 2)	
SIGNIFOR 0.3MG/ML INJ	25% (Tier 5)	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.6MG/ML INJ	25% (Tier 5)	NDS PA QL=60 ML/30 Days
SIGNIFOR 0.9MG/ML INJ	25% (Tier 5)	NDS PA QL=60 ML/30 Days
SOMAVERT 10MG INJ	25% (Tier 5)	NDS PA QL=60 EA/30 Days
SOMAVERT 15MG INJ	25% (Tier 5)	NDS PA QL=60 EA/30 Days
SOMAVERT 20MG INJ	25% (Tier 5)	NDS PA QL=60 EA/30 Days
SOMAVERT 25MG INJ	25% (Tier 5)	NDS PA QL=30 EA/30 Days
SOMAVERT 30MG INJ	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>tolvaptan 15mg tab (jynarque equiv)</i>	25% (Tier 5)	NDS PA QL=120 EA/30 Days
<i>tolvaptan 15mg tab therapy pack (56)</i>	25% (Tier 5)	NDS PA QL=56 EA/28 Days
<i>tolvaptan 15mg/30mg tab pack (56)</i>	25% (Tier 5)	NDS PA QL=56 EA/28 Days
<i>tolvaptan 15mg/45mg tab pack (56)</i>	25% (Tier 5)	NDS PA QL=56 EA/28 Days
<i>tolvaptan 30mg tab (jynarque equiv)</i>	25% (Tier 5)	NDS PA QL=120 EA/30 Days
<i>tolvaptan 30mg/60mg tab pack (56)</i>	25% (Tier 5)	NDS PA QL=56 EA/28 Days
<i>tolvaptan 30mg/90mg tab pack (56)</i>	25% (Tier 5)	NDS PA QL=56 EA/28 Days
THYROID SUPPLEMENTS		
<i>levothyroxine 100mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 112mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 125mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 137mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 150mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 175mcg tab</i>	\$0 (Tier 1)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>levothyroxine 200mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 25mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 300mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 50mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 75mcg tab</i>	\$0 (Tier 1)	
<i>levothyroxine 88mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 100mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 112mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 125mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 137mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 150mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 175mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 200mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 25mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 50mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 75mcg tab</i>	\$0 (Tier 1)	
<i>levoxyl 88mcg tab</i>	\$0 (Tier 1)	
<i>liomny 25mcg tab</i>	\$0 (Tier 2)	
<i>liomny 50mcg tab</i>	\$0 (Tier 2)	
<i>liomny 5mcg tab</i>	\$0 (Tier 2)	
<i>liothyronine sodium 25mcg tab</i>	\$0 (Tier 2)	
<i>liothyronine sodium 50mcg tab</i>	\$0 (Tier 2)	
<i>liothyronine sodium 5mcg tab</i>	\$0 (Tier 2)	
SYNTHROID 100MCG TAB	25% (Tier 3)	
SYNTHROID 112MCG TAB	25% (Tier 3)	
SYNTHROID 125MCG TAB	25% (Tier 3)	
SYNTHROID 137MCG TAB	25% (Tier 3)	
SYNTHROID 150MCG TAB	25% (Tier 3)	
SYNTHROID 175MCG TAB	25% (Tier 3)	
SYNTHROID 200MCG TAB	25% (Tier 3)	
SYNTHROID 25MCG TAB	25% (Tier 3)	
SYNTHROID 300MCG TAB	25% (Tier 3)	
SYNTHROID 50MCG TAB	25% (Tier 3)	
SYNTHROID 75MCG TAB	25% (Tier 3)	
SYNTHROID 88MCG TAB	25% (Tier 3)	
GASTROINTESTINAL AGENTS - MISC.		
ANTIFLATULENTS		
GAS RELIEF CAP 125MG*	\$0 (Tier 1*)	
GAS RELIEF CAP 180MG*	\$0 (Tier 1*)	
GAS RELIEF CHEW 125MG*	\$0 (Tier 1*)	
GAS RELIEF CHEW 80MG*	\$0 (Tier 1*)	
GAS RELIEF DROPS INFANT*	\$0 (Tier 1*)	
SIMETHICONE CAP 180MG*	\$0 (Tier 1*)	
SIMETHICONE CHEW 80MG*	\$0 (Tier 1*)	
SIMETHICONE DROPS INFANTS*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SIMETHICONE SUSP 20/0.3ML *	\$0 (Tier 1*)	
GASTROINTESTINAL MEDICATIONS		
ANTIDIARRHEAL DRUGS		
<i>alosetron 0.5mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>alosetron 1mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	\$0 (Tier 1)	
<i>loperamide 2mg cap</i>	\$0 (Tier 1)	
XERMELO 250MG TAB	25% (Tier 5)	NDS PA QL=84 EA/28 Days
ANTISPASMODICS/DRUGS AFFECT GI MOTILITY		
<i>constulose 10gm/15ml oral soln</i>	\$0 (Tier 1)	
<i>dicyclomine 10mg cap</i>	\$0 (Tier 1)	
<i>dicyclomine 20mg tab</i>	\$0 (Tier 1)	
<i>dicyclomine 2mg/ml oral soln</i>	\$0 (Tier 2)	
<i>enulose 10gm/15ml oral soln</i>	\$0 (Tier 1)	
GAVILYTE-C POWDER FOR ORAL SOLN	\$0 (Tier 1)	
<i>gavilyte-g powder for oral soln</i>	\$0 (Tier 1)	
<i>gavilyte-n powder for oral soln</i>	\$0 (Tier 1)	
<i>generlac 10gm/15ml oral soln</i>	\$0 (Tier 1)	
<i>glycopyrrolate 1mg tab</i>	\$0 (Tier 2)	
<i>glycopyrrolate 2mg tab</i>	\$0 (Tier 2)	
<i>lactulose 667mg/ml oral soln</i>	\$0 (Tier 1)	
LINZESS 145MCG CAP	25% (Tier 3)	QL=30 EA/30 Days
LINZESS 290MCG CAP	25% (Tier 3)	QL=30 EA/30 Days
LINZESS 72MCG CAP	25% (Tier 3)	QL=30 EA/30 Days
<i>lubiprostone 24mcg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>lubiprostone 8mcg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>metoclopramide 10mg tab</i>	\$0 (Tier 1)	
<i>metoclopramide 1mg/ml oral soln</i>	\$0 (Tier 2)	
<i>metoclopramide 5mg tab</i>	\$0 (Tier 1)	
MOVANTIK 12.5MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
MOVANTIK 25MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
<i>peg 3350 powder for oral soln (100gm moviprep equiv)</i>	\$0 (Tier 2)	
<i>peg 3350/electrolyte powder for oral soln</i>	\$0 (Tier 1)	
<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	\$0 (Tier 1)	
<i>prucalopride 1mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>prucalopride 2mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit</i>	\$0 (Tier 2)	
<i>sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)</i>	\$0 (Tier 2)	
SUFLAVE ORAL SOLN PACK	25% (Tier 3)	
SUTAB 225-188-1479MG TAB	25% (Tier 3)	
ANTIULCER DRUGS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>bismuth subcitrate/metronidazole/tetracycline</i> 140-125-125mg cap	\$0 (Tier 2)	QL=120 EA/10 Days
<i>cimetidine 200mg tab</i>	\$0 (Tier 2)	
<i>cimetidine 300mg tab</i>	\$0 (Tier 2)	
<i>cimetidine 400mg tab</i>	\$0 (Tier 2)	
<i>cimetidine 800mg tab</i>	\$0 (Tier 2)	
<i>esomeprazole 20mg dr cap</i>	\$0 (Tier 2)	
<i>esomeprazole 40mg dr cap</i>	\$0 (Tier 2)	
<i>famotidine 20mg tab</i>	\$0 (Tier 1)	
<i>famotidine 40mg tab</i>	\$0 (Tier 1)	
<i>lansoprazole 15mg dr cap</i>	\$0 (Tier 1)	
<i>lansoprazole 30mg dr cap</i>	\$0 (Tier 1)	
<i>misoprostol 100mcg tab</i>	\$0 (Tier 2)	
<i>misoprostol 200mcg tab</i>	\$0 (Tier 2)	
<i>omeprazole 10mg dr cap</i>	\$0 (Tier 1)	
<i>omeprazole 20mg dr cap</i>	\$0 (Tier 1)	
<i>omeprazole 40mg dr cap</i>	\$0 (Tier 1)	
<i>pantoprazole 20mg dr tab</i>	\$0 (Tier 1)	
<i>pantoprazole 40mg dr tab</i>	\$0 (Tier 1)	
<i>rabeprazole sodium 20mg dr tab</i>	\$0 (Tier 2)	
<i>sucralfate 1000mg tab</i>	\$0 (Tier 1)	
<i>sucralfate 100mg/ml oral susp</i>	\$0 (Tier 2)	
VOQUEZNA 500-20MG DUAL THERAPY PACK (112)	25% (Tier 3)	QL=112 EA/14 Days
VOQUEZNA 500-500-20MG TRIPLE THERAPY PACK (112)	25% (Tier 3)	QL=112 EA/14 Days
GENITOURINARY AGENTS		
ANTISPASMODICS, URINARY		
<i>bethanechol chloride 10mg tab</i>	\$0 (Tier 2)	
<i>bethanechol chloride 25mg tab</i>	\$0 (Tier 2)	
<i>bethanechol chloride 50mg tab</i>	\$0 (Tier 2)	
<i>bethanechol chloride 5mg tab</i>	\$0 (Tier 2)	
<i>fesoterodine fumarate 4mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>fesoterodine fumarate 8mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
GEMTESA 75MG TAB	25% (Tier 3)	QL=30 EA/30 Days
MYRBETRIQ 25MG ER TAB	25% (Tier 3)	QL=30 EA/30 Days
MYRBETRIQ 50MG ER TAB	25% (Tier 3)	QL=30 EA/30 Days
<i>oxybutynin chloride 10mg er tab</i>	\$0 (Tier 1)	
<i>oxybutynin chloride 15mg er tab</i>	\$0 (Tier 1)	
<i>oxybutynin chloride 1mg/ml oral soln</i>	\$0 (Tier 1)	QL=600 ML/30 Days
<i>oxybutynin chloride 5mg er tab</i>	\$0 (Tier 1)	
<i>oxybutynin chloride 5mg tab</i>	\$0 (Tier 1)	
<i>solifenacin succinate 10mg tab</i>	\$0 (Tier 2)	
<i>solifenacin succinate 5mg tab</i>	\$0 (Tier 2)	
<i>tolterodine tartrate 1mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>tolterodine tartrate 2mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tolterodine tartrate 2mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>tolterodine tartrate 4mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>tropium chloride 20mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
BENIGN PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin 10mg er tab</i>	\$0 (Tier 1)	
<i>dutasteride 0.5mg cap</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>finasteride 5mg tab</i>	\$0 (Tier 1)	
<i>silodosin 4mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>silodosin 8mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>tadalafil 2.5mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>tadalafil 5mg tab</i>	\$0 (Tier 2)	PA QL=30 EA/30 Days
<i>tamsulosin 0.4mg cap</i>	\$0 (Tier 1)	
GENITOURINARY AGENTS, OTHER		
CYSTAGON 150MG CAP	25% (Tier 3)	
CYSTAGON 50MG CAP	25% (Tier 3)	
FILSPARI 200MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
FILSPARI 400MG TAB	25% (Tier 5)	NDS PA QL=60 EA/30 Days
<i>potassium citrate 10meq er tab</i>	\$0 (Tier 2)	
<i>potassium citrate 15meq er tab</i>	\$0 (Tier 2)	
<i>potassium citrate 5meq er tab</i>	\$0 (Tier 2)	
<i>sodium chloride 0.9% irrigation soln</i>	\$0 (Tier 2)	
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
K CITRATE/CITRIC ACID SOLN*	\$0 (Tier 2*)	
SODIUM CITRATE/CITRIC ACID SOLN*	\$0 (Tier 2*)	
TRICITRATES SOLN*	\$0 (Tier 2*)	
IGA NEPHROPATHY (IGAN) AGENTS		
VOYXACT INJ 400/2ML*	\$0 (Tier 2*)	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol 100mg tab</i>	\$0 (Tier 1)	
<i>allopurinol 300mg tab</i>	\$0 (Tier 1)	
<i>colchicine 0.6mg tab</i>	\$0 (Tier 2)	
<i>colchicine/probenecid 0.5-500mg tab</i>	\$0 (Tier 2)	
<i>febuxostat 40mg tab</i>	\$0 (Tier 2)	ST QL=30 EA/30 Days
<i>febuxostat 80mg tab</i>	\$0 (Tier 2)	ST QL=30 EA/30 Days
<i>probenecid 500mg tab</i>	\$0 (Tier 2)	
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		
ADVATE INJ*	\$0 (Tier 2*)	
ADYNOVATE INJ 1000UNIT*	\$0 (Tier 2*)	
ADYNOVATE INJ 1500UNIT*	\$0 (Tier 2*)	
ADYNOVATE INJ 2000UNIT*	\$0 (Tier 2*)	
ADYNOVATE INJ 250UNIT*	\$0 (Tier 2*)	
ADYNOVATE INJ 3000UNIT*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ADYNOVATE INJ 500UNIT*	\$0 (Tier 2*)	
ADYNOVATE INJ 750UNIT*	\$0 (Tier 2*)	
AFSTYLA INJ*	\$0 (Tier 2*)	
AFSTYLA KIT 1500UNIT*	\$0 (Tier 2*)	
AFSTYLA KIT 2500UNIT*	\$0 (Tier 2*)	
ALHEMO INJ 150MG/1.5ML*	\$0 (Tier 2*)	
ALHEMO INJ 300MG/3ML*	\$0 (Tier 2*)	
ALHEMO INJ 60MG/1.5ML*	\$0 (Tier 2*)	
ALPHANATE INJ*	\$0 (Tier 2*)	
ALPHANATE INJ 1000UNIT*	\$0 (Tier 2*)	
ALPHANATE INJ 2000UNIT*	\$0 (Tier 2*)	
ALPHANATE INJ 250 UNIT*	\$0 (Tier 2*)	
ALPHANINE SD INJ 1000UNIT*	\$0 (Tier 2*)	
ALPHANINE SD INJ 1500UNIT*	\$0 (Tier 2*)	
ALPHANINE SD INJ 500UNIT*	\$0 (Tier 2*)	
ALPROLIX INJ 1000UNIT*	\$0 (Tier 2*)	
ALPROLIX INJ 2000UNIT*	\$0 (Tier 2*)	
ALPROLIX INJ 250UNIT*	\$0 (Tier 2*)	
ALPROLIX INJ 3000UNIT*	\$0 (Tier 2*)	
ALPROLIX INJ 4000UNIT*	\$0 (Tier 2*)	
ALPROLIX INJ 500UNIT*	\$0 (Tier 2*)	
ALTUVIIIIO INJ 1000UNIT*	\$0 (Tier 2*)	
ALTUVIIIIO INJ 2000UNIT*	\$0 (Tier 2*)	
ALTUVIIIIO INJ 250 UNIT*	\$0 (Tier 2*)	
ALTUVIIIIO INJ 3000UNIT*	\$0 (Tier 2*)	
ALTUVIIIIO INJ 4000UNIT*	\$0 (Tier 2*)	
ALTUVIIIIO INJ 500UNIT*	\$0 (Tier 2*)	
BENEFIX INJ 1000UNIT*	\$0 (Tier 2*)	
BENEFIX INJ 2000UNIT*	\$0 (Tier 2*)	
BENEFIX INJ 250UNIT*	\$0 (Tier 2*)	
BENEFIX INJ 3000UNIT*	\$0 (Tier 2*)	
BENEFIX INJ 500UNIT*	\$0 (Tier 2*)	
COAGADEX INJ*	\$0 (Tier 2*)	
CORIFACT INJ*	\$0 (Tier 2*)	
ELOCTATE INJ 1000UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 1500UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 2000UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 250UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 3000UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 4000UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 5000UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 500UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 6000UNIT*	\$0 (Tier 2*)	
ELOCTATE INJ 750UNIT*	\$0 (Tier 2*)	
ESPEROCT INJ 1000 UNIT*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ESPEROCT INJ 1500 UNIT*	\$0 (Tier 2*)	
ESPEROCT INJ 2000 UNIT*	\$0 (Tier 2*)	
ESPEROCT INJ 3000 UNIT*	\$0 (Tier 2*)	
ESPEROCT INJ 4000 UNIT*	\$0 (Tier 2*)	
ESPEROCT INJ 500 UNIT*	\$0 (Tier 2*)	
FEIBA INJ*	\$0 (Tier 2*)	
FEIBA NF INJ*	\$0 (Tier 2*)	
HEMLIBRA INJ 105MG/0.7ML*	\$0 (Tier 2*)	
HEMLIBRA INJ 150MG/ML*	\$0 (Tier 2*)	
HEMLIBRA INJ 300MG/2ML*	\$0 (Tier 2*)	
HEMLIBRA INJ 30MG/ML*	\$0 (Tier 2*)	
HEMLIBRA INJ 60MG/0.4ML*	\$0 (Tier 2*)	
HEMLIBRA SOLN 12MG/0.4ML*	\$0 (Tier 2*)	
HEMOFIL M INJ*	\$0 (Tier 2*)	
HUMATE-P INJ*	\$0 (Tier 2*)	
HYMPAVZI INJ 150MG/ML*	\$0 (Tier 2*)	
IDELVION INJ*	\$0 (Tier 2*)	
IDELVION SOLN 3500UNIT*	\$0 (Tier 2*)	
IXINITY INJ 1000UNIT*	\$0 (Tier 2*)	
IXINITY INJ 1500UNIT*	\$0 (Tier 2*)	
IXINITY INJ 3000UNIT*	\$0 (Tier 2*)	
IXINITY INJ 500UNIT*	\$0 (Tier 2*)	
JIVI INJ 1000UNIT*	\$0 (Tier 2*)	
JIVI INJ 2000UNIT*	\$0 (Tier 2*)	
JIVI INJ 3000UNIT*	\$0 (Tier 2*)	
JIVI INJ 4000UNIT*	\$0 (Tier 2*)	
JIVI INJ 500 UNIT*	\$0 (Tier 2*)	
KCENTRA INJ*	\$0 (Tier 2*)	
KCENTRA KIT 1000UNIT*	\$0 (Tier 2*)	
KOATE INJ 1000UNIT*	\$0 (Tier 2*)	
KOATE INJ 250UNIT*	\$0 (Tier 2*)	
KOATE INJ 500 UNIT*	\$0 (Tier 2*)	
KOVALTRY INJ*	\$0 (Tier 2*)	
NOVOEIGHT INJ 1000UNIT*	\$0 (Tier 2*)	
NOVOEIGHT INJ 1500UNIT*	\$0 (Tier 2*)	
NOVOEIGHT INJ 2000UNIT*	\$0 (Tier 2*)	
NOVOEIGHT INJ 250UNIT*	\$0 (Tier 2*)	
NOVOEIGHT INJ 3000UNIT*	\$0 (Tier 2*)	
NOVOEIGHT INJ 500UNIT*	\$0 (Tier 2*)	
NOVOSEVEN RT INJ*	\$0 (Tier 2*)	
NUWIQ INJ 1000UNIT*	\$0 (Tier 2*)	
NUWIQ INJ 2000UNIT*	\$0 (Tier 2*)	
NUWIQ INJ 250UNIT*	\$0 (Tier 2*)	
NUWIQ INJ 500UNIT*	\$0 (Tier 2*)	
NUWIQ KIT 1500UNIT*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
NUWIQ KIT 2500UNIT*	\$0 (Tier 2*)	
NUWIQ KIT 3000UNIT*	\$0 (Tier 2*)	
NUWIQ KIT 4000UNIT*	\$0 (Tier 2*)	
OBIZUR INJ 500 UNIT*	\$0 (Tier 2*)	
PROFILNINE INJ 1000UNIT*	\$0 (Tier 2*)	
PROFILNINE INJ 500UNIT*	\$0 (Tier 2*)	
QFITLIA INJ 20/0.2ML*	\$0 (Tier 2*)	
QFITLIA INJ 50/0.5ML*	\$0 (Tier 2*)	
REBINYN INJ 3000UNIT*	\$0 (Tier 2*)	
REBINYN SOLN 1000UNIT*	\$0 (Tier 2*)	
REBINYN SOLN 2000UNIT*	\$0 (Tier 2*)	
REBINYN SOLN 500UNIT*	\$0 (Tier 2*)	
RECOMBINATE INJ*	\$0 (Tier 2*)	
RIXUBIS INJ*	\$0 (Tier 2*)	
SEVENFACT INJ 1MG*	\$0 (Tier 2*)	
SEVENFACT INJ 5MG*	\$0 (Tier 2*)	
SEVENFACT SOLN 2MG*	\$0 (Tier 2*)	
TRETTEN INJ*	\$0 (Tier 2*)	
VONVENDI INJ*	\$0 (Tier 2*)	
VONVENDI INJ 1300UNIT*	\$0 (Tier 2*)	
WILATE INJ*	\$0 (Tier 2*)	
XYNTHA INJ*	\$0 (Tier 2*)	
XYNTHA SOLOFUSE INJ*	\$0 (Tier 2*)	
HEMATOPOIETIC AGENTS		
COBALAMINS		
B-12 DOTS TAB 500MCG*	\$0 (Tier 2*)	PA
B12 LIQUID 1000MCG/15ML*	\$0 (Tier 1*)	PA
B-12 SLOW RELEASE TAB*	\$0 (Tier 1*)	PA
B-12 SUB 2500MCG*	\$0 (Tier 1*)	PA
B-12 TAB 1000 CR*	\$0 (Tier 1*)	PA
B-12 TAB 1000MCG*	\$0 (Tier 1*)	PA
B-12 TAB 100MCG*	\$0 (Tier 1*)	PA
B-12 TAB 2000MCG*	\$0 (Tier 1*)	PA
B-12 TAB 500MCG*	\$0 (Tier 1*)	PA
B-12 TAB 50MCG*	\$0 (Tier 1*)	PA
B-12 TR TAB 1000MCG*	\$0 (Tier 1*)	PA
CVS B12 LIQUID 1000/15*	\$0 (Tier 1*)	PA
CVS VITAMIN B12 TAB 1000MCG*	\$0 (Tier 1*)	PA
CVS VITAMIN B-12 TR TAB 1000*	\$0 (Tier 1*)	PA
CYANOCOBALAM INJ 1000MCG*	\$0 (Tier 1*)	
CYANOCOBALAMIN INJ 1000MCG*	\$0 (Tier 1*)	
CYANOCOBALAMIN LIQUID 1000MCG/15ML*	\$0 (Tier 1*)	PA
CYANOCOBALAMIN SPRAY 500MCG*	\$0 (Tier 1*)	
CYANOCOBALAMIN TAB 1000 MCG*	\$0 (Tier 1*)	PA
CYANOCOBALAMIN TAB 500 MCG*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GNP B-12 SUB 2500MCG*	\$0 (Tier 1*)	PA
GNP VIT B-12 TAB 1000 PR*	\$0 (Tier 1*)	PA
GNP VIT B-12 TAB 500MCG*	\$0 (Tier 1*)	PA
NASCOBAL NASAL SPRAY 500MCG*	\$0 (Tier 2*)	
SV VITAMIN B-12 TR TAB 1000*	\$0 (Tier 1*)	PA
VITAMIN B-12 250MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 CR TAB 1000*	\$0 (Tier 1*)	PA
VITAMIN B-12 CR TAB 1000MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 ER TAB 1000MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 SL TAB 2500MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 1000 TR*	\$0 (Tier 1*)	PA
VITAMIN B12 TAB 1000MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 1000MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 100MCG*	\$0 (Tier 1*)	PA
VITAMIN B12 TAB 2000MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 2000MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 2500MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 250MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 500MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TAB 50MCG*	\$0 (Tier 1*)	PA
VITAMIN B-12 TR TAB 1000MG*	\$0 (Tier 1*)	PA
FOLIC ACID/FOLATES		
FOLIC ACID INJ 5MG/ML*	\$0 (Tier 1*)	
FOLIC ACID TAB 1MG*	\$0 (Tier 1*)	
HEMATOPOIETIC GROWTH FACTORS		
ARANESP INJ 100MCG*	\$0 (Tier 2*)	
ARANESP INJ 150MCG*	\$0 (Tier 2*)	
ARANESP INJ 200MCG*	\$0 (Tier 2*)	
ARANESP INJ 25MCG*	\$0 (Tier 2*)	
ARANESP INJ 300MCG*	\$0 (Tier 2*)	
ARANESP INJ 40MCG*	\$0 (Tier 2*)	
ARANESP INJ 500MCG*	\$0 (Tier 2*)	
ARANESP INJ 60MCG*	\$0 (Tier 2*)	
<i>eltrombopag olamine 12.5mg powder for oral susp</i>	25% (Tier 5)	NDS PA QL=90 EA/30 Days
<i>eltrombopag olamine 12.5mg tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>eltrombopag olamine 25mg powder for oral susp</i>	25% (Tier 5)	NDS PA QL=180 EA/30 Days
<i>eltrombopag olamine 25mg tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>eltrombopag olamine 50mg tab</i>	25% (Tier 5)	NDS PA QL=60 EA/30 Days
<i>eltrombopag olamine 75mg tab</i>	25% (Tier 5)	NDS PA QL=60 EA/30 Days
EPOGEN INJ 10000UNIT/ML*	\$0 (Tier 2*)	
EPOGEN INJ 20000UNIT/ML*	\$0 (Tier 2*)	
EPOGEN INJ 2000UNIT/ML*	\$0 (Tier 2*)	
EPOGEN INJ 3000UNIT/ML*	\$0 (Tier 2*)	
EPOGEN INJ 4000UNIT/ML*	\$0 (Tier 2*)	
FULPHILA 6MG/0.6ML SYRINGE	25% (Tier 5)	NDS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LEUKINE 250MCG INJ	25% (Tier 5)	NDS PA
NIVESTYM 300MCG/0.5ML SYRINGE	25% (Tier 5)	NDS
NIVESTYM 300MCG/ML INJ	25% (Tier 5)	NDS
NIVESTYM 480MCG/0.8ML SYRINGE	25% (Tier 5)	NDS
NIVESTYM 480MCG/1.6ML INJ	25% (Tier 5)	NDS
PROCRIT INJ 10000UNIT/ML*	\$0 (Tier 2*)	
PROCRIT INJ 20000UNIT/ML*	\$0 (Tier 2*)	
PROCRIT INJ 2000UNIT/ML*	\$0 (Tier 2*)	
PROCRIT INJ 3000UNIT/ML*	\$0 (Tier 2*)	
PROCRIT INJ 40000UNIT/ML*	\$0 (Tier 2*)	
PROCRIT INJ 4000UNIT/ML*	\$0 (Tier 2*)	
RETACRIT INJ 4000UNIT*	\$0 (Tier 2*)	
RETACRIT 10000UNIT/ML INJ	25% (Tier 3)	PA QL=12 ML/28 Days
RETACRIT 20000UNIT/2ML INJ	25% (Tier 3)	PA QL=12 ML/28 Days
RETACRIT 20000UNIT/ML INJ	25% (Tier 3)	PA QL=12 ML/28 Days
RETACRIT 2000UNIT/ML INJ	25% (Tier 3)	PA QL=12 ML/28 Days
RETACRIT 3000UNIT/ML INJ	25% (Tier 3)	PA QL=12 ML/28 Days
RETACRIT 40000UNIT/ML INJ	25% (Tier 3)	PA QL=4 ML/28 Days
RETACRIT 4000UNIT/ML INJ	25% (Tier 3)	PA QL=12 ML/28 Days
HEMATOPOIETIC MIXTURES		
ABANEU-SL TAB*	\$0 (Tier 2*)	PA
CENTRATEX CAP*	\$0 (Tier 2*)	PA
CORVITE 150 TAB*	\$0 (Tier 2*)	
CORVITE FE TAB*	\$0 (Tier 2*)	
FEOSOL BIFER TAB 28MG*	\$0 (Tier 2*)	PA
FERIVA TAB 21/7*	\$0 (Tier 2*)	
FERIVAFA CAP 110-1MG*	\$0 (Tier 2*)	
FERRALET 90 TAB*	\$0 (Tier 2*)	
FERREX 150 CAP 150MG*	\$0 (Tier 2*)	PA
FERREX 150 FORTE CAP*	\$0 (Tier 2*)	PA
FOLIC ACID/VITAMIN B-6/VITAMIN B-12 TAB*	\$0 (Tier 2*)	PA
FOLITAB 500 TAB*	\$0 (Tier 2*)	PA
FOLTABS 800 TAB*	\$0 (Tier 2*)	PA
FOLTRATE TAB*	\$0 (Tier 2*)	PA
FUSION CAP*	\$0 (Tier 2*)	
FUSION PLUS CAP*	\$0 (Tier 2*)	
HEMOCYTE PLUS CAP*	\$0 (Tier 2*)	PA
HEMOCYTE-F TAB*	\$0 (Tier 1*)	PA
I.L.X. B-12 ELIXIR*	\$0 (Tier 2*)	PA
ICAR-C TAB*	\$0 (Tier 1*)	PA
IFEREX 150 FORTE CAP*	\$0 (Tier 1*)	PA
INTEGRA CAP*	\$0 (Tier 2*)	
INTEGRA F CAP*	\$0 (Tier 2*)	
INTEGRA PLUS CAP*	\$0 (Tier 2*)	
IRON/VITAMIN C TAB 100-250MG*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
IROSPAN 24/6 PACK*	\$0 (Tier 2*)	
MTX SUPPORT TAB*	\$0 (Tier 1*)	PA
MYFERON 150 FORTE CAP*	\$0 (Tier 1*)	PA
NEPHRON FA TAB*	\$0 (Tier 2*)	
NEURIN-SL TAB*	\$0 (Tier 2*)	PA
POLY-IRON 150 FORTE CAP*	\$0 (Tier 2*)	PA
PROFERRIN-FORTE TAB 12-1MG*	\$0 (Tier 2*)	PA
PROTECTIRON TAB 60-1MG*	\$0 (Tier 2*)	PA
SE-TAN PLUS CAP*	\$0 (Tier 2*)	
TANDEM CAP*	\$0 (Tier 2*)	
TANDEM PLUS*	\$0 (Tier 2*)	
TARON FORTE CAP*	\$0 (Tier 2*)	
WESTAB ONE TAB 2.5-25-1*	\$0 (Tier 1*)	PA
IRON		
ACCRUFER CAP 30MG*	\$0 (Tier 2*)	
CVS IRON TAB 27MG*	\$0 (Tier 1*)	PA
CVS IRON TAB 325MG*	\$0 (Tier 1*)	PA
CVS SLOW RELEASE FE TAB 45MG*	\$0 (Tier 1*)	PA
CVS SLOW RELEASE IRON TAB 45MG*	\$0 (Tier 1*)	PA
EZFE 200 CAP 200MG*	\$0 (Tier 2*)	PA
FEOSOL TAB 200MG*	\$0 (Tier 1*)	PA
FERATE TAB 27MG*	\$0 (Tier 1*)	PA
FER-IN-SOL SOLN*	\$0 (Tier 1*)	PA
FERRETTES IPS SOLN*	\$0 (Tier 2*)	PA
FERRETTES TAB*	\$0 (Tier 2*)	PA
FERREX 150 CAP*	\$0 (Tier 1*)	PA
FERREX-150 CAP*	\$0 (Tier 1*)	PA
FERRIMIN TAB 150MG*	\$0 (Tier 2*)	PA
FERROUS FUMARATE TAB 324MG*	\$0 (Tier 1*)	PA
FERROUS GLUCONATE TAB 240MG*	\$0 (Tier 1*)	PA
FERROUS GLUCONATE TAB 324MG*	\$0 (Tier 1*)	PA
FERROUS SULF EC TAB 325MG*	\$0 (Tier 1*)	PA
FERROUS SULF LIQ 44MG/5ML*	\$0 (Tier 1*)	PA
FERROUS SULF SOLN 220/5ML*	\$0 (Tier 1*)	PA
FERROUS SULF SOLN 300/5ML*	\$0 (Tier 1*)	PA
FERROUS SULF TAB 325MG*	\$0 (Tier 1*)	PA
FERROUS SULF TAB 325MG EC*	\$0 (Tier 1*)	PA
FERROUS SULFATE*	\$0 (Tier 1*)	PA
FERROUS SULFATE EC TAB 325MG*	\$0 (Tier 1*)	PA
FERROUS SULFATE ELIXIR 220MG/5ML*	\$0 (Tier 1*)	PA
FERROUS SULFATE LIQUID 220 MG/5ML*	\$0 (Tier 1*)	PA
FERROUS SULFATE SLOW RELEASE TAB 143MG*	\$0 (Tier 1*)	PA
FERROUS SULFATE SOLN*	\$0 (Tier 1*)	PA
FERROUS SULFATE SYRUP*	\$0 (Tier 1*)	PA
FERROUS SULFATE SYRUP 300 MG/5ML*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
FERROUS SULFATE SYRUP 300MG/5ML*	\$0 (Tier 1*)	PA
FERROUS SULFATE TAB 324MG*	\$0 (Tier 1*)	PA
FERROUS SULFATE TAB 324MG EC*	\$0 (Tier 1*)	PA
FERROUS SULFATE TAB 325MG*	\$0 (Tier 1*)	PA
FERROUS SULFATE TAB EC 324 MG*	\$0 (Tier 1*)	PA
FERROUS SULFATE TAB EC 324 MG (65 MG FE EQUIVALENT)*	\$0 (Tier 1*)	PA
FE-VITE IRON SOLN 15MG/ML*	\$0 (Tier 1*)	PA
FT IRON TAB 65MG*	\$0 (Tier 1*)	PA
GNP IRON TAB 45MG*	\$0 (Tier 1*)	PA
GNP IRON TAB 65MG*	\$0 (Tier 1*)	PA
ICAR PEDIATRIC SUSP*	\$0 (Tier 1*)	PA
IFEREX 150 CAP*	\$0 (Tier 1*)	PA
INFED INJ 50MG/ML*	\$0 (Tier 2*)	
IRON COMPLEX CAP 150MG*	\$0 (Tier 1*)	PA
IRON DROPS 15MG/ML*	\$0 (Tier 1*)	PA
IRON INFANT/TODDLER DROPS 15MG*	\$0 (Tier 1*)	PA
IRON INF-TOD DROPS 15MG*	\$0 (Tier 1*)	PA
IRON SLOW TAB 45MG*	\$0 (Tier 1*)	PA
IRON SUPPLEMENT TAB*	\$0 (Tier 1*)	PA
IRON SUPPLMENT DROPS 15MG/ML*	\$0 (Tier 1*)	PA
IRON TAB 27MG*	\$0 (Tier 1*)	PA
IRON TAB 325MG*	\$0 (Tier 1*)	PA
IRON TAB 45MG*	\$0 (Tier 1*)	PA
IRON TAB 65MG*	\$0 (Tier 1*)	PA
MYFERON 150 CAP*	\$0 (Tier 1*)	PA
NU-IRON 150 CAP*	\$0 (Tier 1*)	PA
PEDIA IRON DROPS 15MG/ML*	\$0 (Tier 1*)	PA
PEDIATRIC IRON DROPS*	\$0 (Tier 1*)	PA
POLY-IRON CAP 150MG*	\$0 (Tier 1*)	PA
POLYSACCHARIDE-IRON CAP 150MG*	\$0 (Tier 1*)	PA
PRO FE 180 MG CAPSULE*	\$0 (Tier 2*)	PA
PROFE CAP 180MG*	\$0 (Tier 2*)	PA
PROFERRIN ES TAB 12MG*	\$0 (Tier 2*)	PA
SLOW RELEASE IRON ER TAB 45MG*	\$0 (Tier 1*)	PA
SLOW RELEASE IRON TAB 45MG*	\$0 (Tier 1*)	PA
SLOW RELEASE TAB 45MG*	\$0 (Tier 1*)	PA
SLOW RELEASE TAB 47.5MG*	\$0 (Tier 2*)	PA
SLOW-RELEASE TAB FE 45MG*	\$0 (Tier 1*)	PA
SV IRON TAB 325MG*	\$0 (Tier 1*)	PA
TRUE FERROUS SULFATE EC TAB 324MG*	\$0 (Tier 1*)	PA
WEE CARE SUSP*	\$0 (Tier 1*)	PA
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
ANTI-HISTAMINE HYPNOTICS		
SLEEP AID LIQUID 50MG/30*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SLEEP-AID CAP 25MG*	\$0 (Tier 1*)	
SLEEP-AID CAP 50MG*	\$0 (Tier 1*)	
SLEEP-AID TAB 25MG*	\$0 (Tier 1*)	
IMMUNOLOGICAL AGENTS		
ANGIOEDEMA (HAE) AGENTS		
HAEGARDA 2000UNIT INJ	25% (Tier 5)	NDS PA QL=30 EA/30 Days
HAEGARDA 3000UNIT INJ	25% (Tier 5)	NDS PA QL=20 EA/30 Days
icatibant 30mg/3ml syringe	25% (Tier 5)	NDS PA QL=27 ML/30 Days
IMMUNE SUPPRESSANTS		
azathioprine 50mg tab	\$0 (Tier 2)	PA_BvD
cyclosporine 100mg cap	\$0 (Tier 2)	PA_BvD
cyclosporine 25mg cap	\$0 (Tier 2)	PA_BvD
cyclosporine modified 100mg cap	\$0 (Tier 2)	PA_BvD
cyclosporine modified 100mg/ml oral soln	\$0 (Tier 2)	PA_BvD
cyclosporine modified 25mg cap	\$0 (Tier 2)	PA_BvD
cyclosporine modified 50mg cap	\$0 (Tier 2)	PA_BvD
ENVARUS XR 0.75MG TAB	25% (Tier 4)	PA_BvD
ENVARUS XR 1MG TAB	25% (Tier 4)	PA_BvD
ENVARUS XR 4MG TAB	25% (Tier 4)	PA_BvD
everolimus 0.25mg tab	\$0 (Tier 2)	PA_BvD QL=60 EA/30 Days
everolimus 0.5mg tab	25% (Tier 5)	NDS PA_BvD QL=120 EA/30 Days
everolimus 0.75mg tab	25% (Tier 5)	NDS PA_BvD QL=60 EA/30 Days
everolimus 1mg tab	25% (Tier 5)	NDS PA_BvD QL=60 EA/30 Days
mycophenolate mofetil 200mg/ml oral susp	\$0 (Tier 2)	PA_BvD
mycophenolate mofetil 250mg cap	\$0 (Tier 2)	PA_BvD
mycophenolate mofetil 500mg tab	\$0 (Tier 2)	PA_BvD
mycophenolic acid 180mg dr tab	\$0 (Tier 2)	PA_BvD
mycophenolic acid 360mg dr tab	\$0 (Tier 2)	PA_BvD
PROGRAF 0.2MG GRANULES FOR ORAL SUSP	25% (Tier 4)	PA_BvD
PROGRAF 1MG GRANULES FOR ORAL SUSP	25% (Tier 4)	PA_BvD
sirolimus 0.5mg tab	\$0 (Tier 2)	PA_BvD
sirolimus 1mg tab	\$0 (Tier 2)	PA_BvD
sirolimus 1mg/ml oral soln	\$0 (Tier 2)	PA_BvD
sirolimus 2mg tab	\$0 (Tier 2)	PA_BvD
tacrolimus 0.5mg cap	\$0 (Tier 2)	PA_BvD
tacrolimus 1mg cap	\$0 (Tier 2)	PA_BvD
tacrolimus 5mg cap	\$0 (Tier 2)	PA_BvD
IMMUNIZING AGENTS, PASSIVE		
GAMMAGARD 10GM INJ	25% (Tier 5)	NDS PA
GAMMAGARD 10GM/100ML INJ	25% (Tier 5)	NDS PA
GAMMAGARD 2.5GM/25ML INJ	25% (Tier 5)	NDS PA
GAMMAGARD 5GM INJ	25% (Tier 5)	NDS PA
GAMMAGARD 5GM/50ML INJ	25% (Tier 5)	NDS PA
GAMMAGARD ERC 10GM/100ML INJ	25% (Tier 5)	NDS PA
GAMMAGARD ERC 5GM/50ML INJ	25% (Tier 5)	NDS PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GAMUNEX 1GM/10ML INJ	25% (Tier 5)	NDS PA
PRIVIGEN 20GM/200ML INJ	25% (Tier 5)	NDS PA
VACCINES		
ABRYSVO 120MCG/0.5ML INJ	25% (Tier 3)	QL=1 EA/365 DaysVAC
ACTHIB INJ	25% (Tier 3)	
ADACEL INJ	25% (Tier 3)	VAC
ADACEL SYRINGE	25% (Tier 3)	VAC
AREXVY 120MCG/0.5ML INJ	25% (Tier 3)	QL=1 EA/999 DaysVAC
BCG LIVE TICE STRAIN 50MG INJ	25% (Tier 3)	VAC
BEXSERO SYRINGE	25% (Tier 3)	VAC
BOOSTRIX SYRINGE	25% (Tier 3)	VAC
DAPTACEL INJ	25% (Tier 3)	
ENGERIX-B 10MCG/0.5ML SYRINGE	25% (Tier 3)	PA_BvD VAC
ENGERIX-B 20MCG/ML INJ	25% (Tier 3)	PA_BvD VAC
ENGERIX-B 20MCG/ML SYRINGE	25% (Tier 3)	PA_BvD VAC
GARDASIL 9 INJ	25% (Tier 3)	VAC
GARDASIL 9 SYRINGE	25% (Tier 3)	VAC
HAVRIX 1440ELU/ML SYRINGE	25% (Tier 3)	VAC
HAVRIX 720ELU/0.5ML SYRINGE	25% (Tier 3)	
HEPLISAV-B 20MCG/0.5ML SYRINGE	25% (Tier 3)	PA_BvD VAC
HIBERIX 10MCG INJ	25% (Tier 3)	
IMOVAX 2.5UNIT/ML INJ	25% (Tier 3)	PA_BvD VAC
INFANRIX SYRINGE	25% (Tier 3)	
IPOL INJ	25% (Tier 3)	VAC
IXIARO 0.006MG/0.5ML SYRINGE	25% (Tier 3)	VAC
JYNNEOS 0.5ML INJ	25% (Tier 3)	PA_BvD VAC
KINRIX SYRINGE	25% (Tier 3)	
MENQUADFI INJ	25% (Tier 3)	VAC
MENVEO INJ	25% (Tier 3)	VAC
M-M-R II INJ	25% (Tier 3)	VAC
MRESVIA 50MCG/0.5ML SYRINGE	25% (Tier 3)	QL=.50 ML/999 DaysVAC
PEDIARIX SYRINGE	25% (Tier 3)	
PEDVAXHIB 7.5MCG/0.5ML INJ	25% (Tier 3)	
PENBRAYA INJ	25% (Tier 3)	VAC
PENMENVY INJ	25% (Tier 3)	VAC
PENTACEL INJ	25% (Tier 3)	
PRIORIX INJ	25% (Tier 3)	VAC
PROQUAD INJ	25% (Tier 3)	
QUADRACEL INJ	25% (Tier 3)	
QUADRACEL SYRINGE	25% (Tier 3)	
RABAVERT 2.5UNIT/ML INJ	25% (Tier 3)	PA_BvD VAC
RECOMBIVAX 10MCG/ML INJ	25% (Tier 3)	PA_BvD VAC
RECOMBIVAX 40MCG/ML INJ	25% (Tier 3)	PA_BvD VAC
RECOMBIVAX 5MCG/0.5ML INJ	25% (Tier 3)	PA_BvD VAC
RECOMBIVAX HB 10MCG/ML SYRINGE	25% (Tier 3)	PA_BvD VAC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RECOMBIVAX HB 5MCG/0.5ML SYRINGE	25% (Tier 3)	PA_BvD VAC
ROTARIX 667000UNIT/ML ORAL SUSP	25% (Tier 3)	
ROTATEQ ORAL SUSP	25% (Tier 3)	
SHINGRIX 50MCG/0.5ML INJ	25% (Tier 3)	QL=2 EA/999 DaysVAC
SHINGRIX 50MCG/0.5ML SYRINGE	25% (Tier 3)	QL=1 ML/999 DaysVAC
TENIVAC 4-10UNIT/ML INJ	25% (Tier 3)	PA_BvD VAC
TENIVAC 4-10UNIT/ML SYRINGE	25% (Tier 3)	PA_BvD VAC
TICOVAC 1.2MCG/0.25ML SYRINGE	25% (Tier 3)	
TICOVAC 2.4MCG/0.5ML SYRINGE	25% (Tier 3)	VAC
TRUMENBA SYRINGE	25% (Tier 3)	VAC
TWINRIX SYRINGE	25% (Tier 3)	VAC
TYPHIM VI 25MCG/0.5ML SYRINGE	25% (Tier 3)	VAC
VAQTA 25UNIT/0.5ML INJ	25% (Tier 3)	
VAQTA 25UNIT/0.5ML SYRINGE	25% (Tier 3)	
VAQTA 50UNIT/ML INJ	25% (Tier 3)	VAC
VAQTA 50UNIT/ML SYRINGE	25% (Tier 3)	VAC
VARIVAX 1350PFU/0.5ML INJ	25% (Tier 3)	VAC
VAXCHORA ORAL SUSP	25% (Tier 3)	VAC
VIMKUNYA 40MCG/0.8ML SYRINGE	25% (Tier 3)	VAC
VIVOTIF DR CAP	25% (Tier 3)	VAC
YF-VAX INJ	25% (Tier 3)	VAC
INFLAMMATORY BOWEL DISEASE AGENTS		
AMINOSALICYLATES		
<i>balsalazide disodium 750mg cap</i>	\$0 (Tier 2)	
<i>mesalamine 1200mg dr tab</i>	\$0 (Tier 2)	QL=120 EA/30 Days
<i>mesalamine 1gm rectal supp</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>mesalamine 375mg er cap</i>	\$0 (Tier 2)	QL=120 EA/30 Days
MESALAMINE 400MG DR CAP	\$0 (Tier 2)	QL=180 EA/30 Days
<i>mesalamine 66.7mg/ml enema</i>	\$0 (Tier 2)	QL=1800 ML/30 Days
<i>sulfasalazine 500mg dr tab</i>	\$0 (Tier 2)	
<i>sulfasalazine 500mg tab</i>	\$0 (Tier 2)	
LAXATIVES		
BULK LAXATIVES		
FIBER LAX TAB 625MG*	\$0 (Tier 1*)	
FIBER TAB 625MG*	\$0 (Tier 1*)	
ELECTROLYTE-BASED OSMOTIC LAXATIVES		
ENEMA READY-TO-USE*	\$0 (Tier 1*)	
FLEET PEDIATRIC ENEMA*	\$0 (Tier 1*)	
MAGNESIUM HYDROXIDE SUSP 400MG/5ML*	\$0 (Tier 1*)	
LAXATIVE COMBINATIONS		
FT SENNA-S TAB 8.6-50MG*	\$0 (Tier 1*)	
LAXATIVES - MISCELLANEOUS		
CLEARLAX POWDER*	\$0 (Tier 1*)	
CLEARLAX POWDER*	\$0 (Tier 1*)	
GAVILAX POWDER*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
GLYCERIN SUPP 1.2GM*	\$0 (Tier 1*)	
GLYCERIN SUPP 2GM*	\$0 (Tier 1*)	
PEG 3350 POW*	\$0 (Tier 1*)	
PEG 3350 POW*	\$0 (Tier 1*)	
PEG 3350 POWDER*	\$0 (Tier 1*)	
PEG3350 POWDER*	\$0 (Tier 1*)	
POLYETHYLENE GLYCOL 3350 POWDER*	\$0 (Tier 1*)	
POLYETHYLENE GLYCOL NF POWDER 3350*	\$0 (Tier 1*)	
POLYETHYLENE GLYCOL POW 3350 NF*	\$0 (Tier 1*)	
POLYETHYLENE GLYCOL POWDER 3350*	\$0 (Tier 1*)	
POLYETHYLENE GLYCOL POWDER 3350 NF*	\$0 (Tier 1*)	
PROCTOZONE-G SUPP 2GM*	\$0 (Tier 1*)	
LUBRICANT LAXATIVES		
MINERAL OIL*	\$0 (Tier 1*)	
MINERAL OIL ENEMA*	\$0 (Tier 1*)	
SALINE LAXATIVES		
MAG CITRATE SOLN LEMON*	\$0 (Tier 1*)	
MAGNESIUM HYDROXIDE SUSP 400MG/5ML*	\$0 (Tier 1*)	
MILK OF MAGNESIA SUSP 1200/15*	\$0 (Tier 1*)	
PHILLIPS TAB 500MG*	\$0 (Tier 1*)	PA
STIMULANT LAXATIVES		
BISACODYL DR TAB 5MG*	\$0 (Tier 1*)	
BISACODYL SUPP 10MG*	\$0 (Tier 1*)	
CASTOR OIL 100%*	\$0 (Tier 1*)	
PROCTOZONE-B SUPP 10MG*	\$0 (Tier 1*)	
SENNA SYRUP 8.8/5ML*	\$0 (Tier 1*)	
SENNA TAB 8.6MG*	\$0 (Tier 1*)	
SURFACTANT LAXATIVES		
DOCUSATE MINI ENEMA 283MG*	\$0 (Tier 1*)	
DOCUSATE SODIUM*	\$0 (Tier 1*)	
DOCUSOL KIDS ENEMA 100MG/5ML*	\$0 (Tier 2*)	
ENEMEEZ KIDS ENEMA 100/5ML*	\$0 (Tier 1*)	
ENEMEEZ MINI ENEMA*	\$0 (Tier 1*)	
ENEMEEZ PLUS ENEMA*	\$0 (Tier 1*)	
ENEMEEZ PLUS ENEMA 20-283*	\$0 (Tier 1*)	
STOOL SOFTENER TAB 100MG*	\$0 (Tier 1*)	
MEDICAL DEVICES		
DIABETIC SUPPLIES		
LANCET DEVICE*	\$0 (Tier 2*)	
MEDICAL DEVICES AND SUPPLIES		
DIABETIC SUPPLIES		
ADV LANCING DEVICE*	\$0 (Tier 2*)	
ADVOCATE LANCING DEVICE*	\$0 (Tier 2*)	
ADVOCATE SAFETY LANCETS*	\$0 (Tier 2*)	
ALCOHOL SWAB 1X1 (INSULIN USE)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ASSURE COMFORT LANCETS*	\$0 (Tier 2*)	
ASSURE LANCETS 28G*	\$0 (Tier 2*)	
AUTOLET LANC MIS DEVICE*	\$0 (Tier 2*)	
AUTOLET LANCING DEVICE*	\$0 (Tier 2*)	
AUTOLET LITE LANCING DEVICE*	\$0 (Tier 2*)	QL=1 UNITS/730 DAYS
CARESENS LANCETS 30G*	\$0 (Tier 2*)	
CARETOUCH LANCETS 28G*	\$0 (Tier 2*)	
CARETOUCH SAFETY LANCETS 26G*	\$0 (Tier 2*)	
CARETOUCH TWIST 28*	\$0 (Tier 2*)	
CARETOUCH TWIST 30*	\$0 (Tier 2*)	
CARETOUCH TWIST LANCETS*	\$0 (Tier 2*)	
COMFORT EZ LANCETS 28G*	\$0 (Tier 2*)	
COMFORT TOUCH MIS LANC 30G*	\$0 (Tier 2*)	
COMFORT TOUCH MIS LANC 31G*	\$0 (Tier 2*)	
DROPLET LANCING DEVICE*	\$0 (Tier 2*)	
DROPLET PERSONAL LANCETS*	\$0 (Tier 2*)	
DROPSAFE MIS LANCETS 23G*	\$0 (Tier 2*)	
EASY COMFORT LANCETS*	\$0 (Tier 2*)	
EASY MINI EJECT LANCING DEVICE*	\$0 (Tier 2*)	
EASY TOUCH LANCING DEVICE*	\$0 (Tier 2*)	
EMBRACE LANCETS 21G*	\$0 (Tier 2*)	
EMBRACE LANCETS 28G*	\$0 (Tier 2*)	
EMBRACE LANCING DEVICE*	\$0 (Tier 2*)	
FORA LANCETS*	\$0 (Tier 2*)	
FORA LANCING DEVICE*	\$0 (Tier 2*)	
GAUZE PAD 2x2 (INSULIN USE)	\$0 (Tier 2)	
GENTEEL LANCETS*	\$0 (Tier 2*)	
GLUCOCARD KIT*	\$0 (Tier 2*)	
GNP LANCETS 30G*	\$0 (Tier 2*)	
GNP LANCETS 33G*	\$0 (Tier 2*)	
GOJJI LANCETS 30G*	\$0 (Tier 2*)	
GOJJI LANCING DEVICE*	\$0 (Tier 2*)	
INCONTROL LANCETS*	\$0 (Tier 2*)	
INSULIN PEN NEEDLE	\$0 (Tier 2)	
INSULIN SYRINGE	\$0 (Tier 2)	
INSULIN SYRINGE (DISP) U-100 0.3ML	\$0 (Tier 2)	
INSULIN SYRINGE (DISP) U-100 1/2ML	\$0 (Tier 2)	
INSULIN SYRINGE (DISP) U-100 1ML	\$0 (Tier 2)	
LANCET DEVICE*	\$0 (Tier 2*)	
LANCET ULTRA MISC THIN 30G*	\$0 (Tier 2*)	
LANCETS*	\$0 (Tier 2*)	
LANCETS 30G*	\$0 (Tier 2*)	
LANCETS MIS 33G*	\$0 (Tier 2*)	
LANCETS ULTR MIS THIN 31G*	\$0 (Tier 2*)	
MICROLET MIS NEXT*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MM LANCING DEVICE*	\$0 (Tier 2*)	
MM TWIST LANCETS*	\$0 (Tier 2*)	
MOBI CONNECT LANCING DEVICE*	\$0 (Tier 2*)	
MOBI CONNECT MIS LANCETS*	\$0 (Tier 2*)	
MOBILE LANCET 30G*	\$0 (Tier 2*)	
MULTI-LANCET KIT DEVICE*	\$0 (Tier 2*)	
ONETOUCH DELICA LANCET DEVICE*	\$0 (Tier 2*)	
ONETOUCH DELICA LANCETS*	\$0 (Tier 2*)	
ONETOUCH DELICA LANCETS 30G*	\$0 (Tier 2*)	
ONETOUCH DELICA LANCING DEVICE*	\$0 (Tier 2*)	
ONETOUCH DELICA MIS LANCET DEVICE*	\$0 (Tier 2*)	
ONETOUCH DELICA MIS PLUS 30G*	\$0 (Tier 2*)	
ONETOUCH DELICA MIS PLUS 33G*	\$0 (Tier 2*)	
ONETOUCH ULTRASOFT 2 LANCETS*	\$0 (Tier 2*)	
PERFECT POINT LANCET 28G*	\$0 (Tier 2*)	
PERFECT POINT LANCET 30G*	\$0 (Tier 2*)	
PHARMACIST CHOICE ULTRA THIN LANCETS*	\$0 (Tier 2*)	
PIP LANCETS 28G*	\$0 (Tier 2*)	
PIP LANCETS 30G*	\$0 (Tier 2*)	
PRO COMFORT LANCET 30G*	\$0 (Tier 2*)	
PRODIGY SAFETY LANCETS*	\$0 (Tier 2*)	
PURE COMFORT LANCETS 30G*	\$0 (Tier 2*)	
PX LANCETS 28G*	\$0 (Tier 2*)	
PX LANCETS MIS 33G*	\$0 (Tier 2*)	
QC LANCING DEVICE*	\$0 (Tier 2*)	
RELION KIT LANCING*	\$0 (Tier 2*)	
RELION LANCET DEVICE 30G*	\$0 (Tier 2*)	
RELION LANCETS 30G*	\$0 (Tier 2*)	
RELION LANCETS 33G*	\$0 (Tier 2*)	
RELION LANCETS THIN 26G*	\$0 (Tier 2*)	
RELION ULTRA THIN LANCETS*	\$0 (Tier 2*)	
RELION ULTRA THIN LANCETS 30G*	\$0 (Tier 2*)	
SAFETY 21G MISC LANCETS*	\$0 (Tier 2*)	
SAFETY 23G MISC LANCETS*	\$0 (Tier 2*)	
SAFETY 28G MISC LANCETS*	\$0 (Tier 2*)	
SAFETY LANCETS 28G*	\$0 (Tier 2*)	
SAFETY LANCETS 30G*	\$0 (Tier 2*)	
SAPS HEALTH LANCETS*	\$0 (Tier 2*)	
SAPS HEALTH TWIST LANCETS*	\$0 (Tier 2*)	
SAPS TWIST LANCETS 30G*	\$0 (Tier 2*)	
SENSILANCE LANCETS 21G*	\$0 (Tier 2*)	
SENSILANCE LANCETS 26G*	\$0 (Tier 2*)	
SENSILANCE LANCETS 28G*	\$0 (Tier 2*)	
SURE COMFORT LANCETS 18G*	\$0 (Tier 2*)	
SURE COMFORT LANCETS 21G*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SURE COMFORT LANCETS 23G*	\$0 (Tier 2*)	
SURE COMFORT LANCETS 30G*	\$0 (Tier 2*)	
TECHLITE LANCETS*	\$0 (Tier 2*)	
TRUE COMFORT LANCETS 30G*	\$0 (Tier 2*)	
TRUE COMFORT SAFETY LANCETS*	\$0 (Tier 2*)	
TRUE COMFORT TWIST LANCETS*	\$0 (Tier 2*)	
TRUEPLUS SAFETY LANCETS*	\$0 (Tier 2*)	
TRUPLUS LANCETS*	\$0 (Tier 2*)	
TWIST LANCET 30G*	\$0 (Tier 2*)	
TWIST LANCET 30G MULTI*	\$0 (Tier 2*)	
ULTRA THIN LANCETS 31G*	\$0 (Tier 2*)	
ULTRA THIN LANCETS 33G*	\$0 (Tier 2*)	
UNILET LANCET MIS 28G*	\$0 (Tier 2*)	
UNILET LANCET MIS 30G*	\$0 (Tier 2*)	
UNILET LANCET MIS 33G*	\$0 (Tier 2*)	
UNILET LANCETS*	\$0 (Tier 2*)	
UNILET LANCETS 33G*	\$0 (Tier 2*)	
UNILET LANCETS SUPER THIN*	\$0 (Tier 2*)	
UNILET MICRO LANCETS 33G*	\$0 (Tier 2*)	
UNISTIK PRO LANCETS*	\$0 (Tier 2*)	
UNISTIK TOUCH SAFETY LANCETS*	\$0 (Tier 2*)	
VEREFINE LANCETS*	\$0 (Tier 2*)	
VERIFINE LANCET MIS MINI 21G*	\$0 (Tier 2*)	
VERIFINE LANCET MIS MINI 23G*	\$0 (Tier 2*)	
VERIFINE LANCET MIS MINI 28G*	\$0 (Tier 2*)	
VERIFINE LANCET MIS MINI 30G*	\$0 (Tier 2*)	
VERIFINE LANCETS*	\$0 (Tier 2*)	
VIVAGUARD LANCETS 30G*	\$0 (Tier 2*)	
VIVAGUARD LANCING DEVICE*	\$0 (Tier 2*)	
ZEVRX TWIST LANCETS 30G*	\$0 (Tier 2*)	
PARENTERAL THERAPY SUPPLIES		
CARETOUCH TWIST 30G LANCETS*	\$0 (Tier 2*)	
INSULIN SYRINGE 0.5/29G*	\$0 (Tier 2*)	
INSULIN SYRINGE 0.5/30G*	\$0 (Tier 2*)	
INSULIN SYRINGE 0.5/31G*	\$0 (Tier 2*)	
INSULIN SYRINGE MISC 0.5/30G*	\$0 (Tier 2*)	
INSULIN SYRINGE MISC 0.5/31G*	\$0 (Tier 2*)	
INSULIN SYRINGES 0.5ML 29G 1/2IN*	\$0 (Tier 2*)	
PEN NEEDLES*	\$0 (Tier 2*)	
PEN NEEDLES 30G X 5/16*	\$0 (Tier 2*)	
UNIFINE PROTECT PEN NEEDLES 30GX5MM*	\$0 (Tier 2*)	
UNIFINE PROTECT PEN NEEDLES 30GX8MM*	\$0 (Tier 2*)	
UNIFINE PROTECT PEN NEEDLES 32GX4MM*	\$0 (Tier 2*)	
UNIFINE SAFE 32GX4MM*	\$0 (Tier 2*)	
UNIFINE SAFECONTROL PEN N*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
RESPIRATORY AIDS		
PEDIATRIC MASK*	\$0 (Tier 2*)	
RESPIRATORY THERAPY SUPPLIES		
AERCHMBR PLS MIS LRG MASK*	\$0 (Tier 2*)	
AERCHMBR PLS MIS MED MASK*	\$0 (Tier 2*)	
AERCHMBR PLS MIS SM MASK*	\$0 (Tier 2*)	
AEROCHAMBER 2GO*	\$0 (Tier 2*)	
AEROCHAMBER LG MASK*	\$0 (Tier 2*)	
AEROCHAMBER MED MASK*	\$0 (Tier 2*)	
AEROCHAMBER PLUS FLOW*	\$0 (Tier 2*)	
AEROCHAMBER PLUS FLOW VU*	\$0 (Tier 2*)	
AEROCHAMBER SM MASK*	\$0 (Tier 2*)	
AEROCHAMBR PLUS*	\$0 (Tier 2*)	
AEROVENT PLUS HOLDING CHAMBER*	\$0 (Tier 2*)	
COMPACT SPAC MIS CHAMBER*	\$0 (Tier 2*)	
COMPACT SPACE CHAMBER LG MASK*	\$0 (Tier 2*)	
COMPACT SPACE CHAMBER MD MASK*	\$0 (Tier 2*)	
COMPACT SPACE CHAMBER SM MASK*	\$0 (Tier 2*)	
FLEXICHAMBER*	\$0 (Tier 2*)	
FLEXICHAMBER WITH MASK*	\$0 (Tier 2*)	
HOLD CHAMBER ADULT LARGE*	\$0 (Tier 2*)	
HOLD CHAMBER MEDIUM*	\$0 (Tier 2*)	
HOLD CHAMBER SMALL*	\$0 (Tier 2*)	
PARI VORTEX ADULT MASK*	\$0 (Tier 2*)	
PEDIATRIC MASK*	\$0 (Tier 2*)	
PROCARE SPACER CHAMBER ADULT*	\$0 (Tier 2*)	
PROCARE SPACER CHAMBER CHILD*	\$0 (Tier 2*)	
PURE COMFORT SPACER*	\$0 (Tier 2*)	
SPACE CHAMBER LARGE*	\$0 (Tier 2*)	
SPACE CHAMBER MEDIUM*	\$0 (Tier 2*)	
SPACE CHAMBER SMALL*	\$0 (Tier 2*)	
SPACE CHAMBR MIS ANTI-STA*	\$0 (Tier 2*)	
SPACER CHAMBER ADULT*	\$0 (Tier 2*)	
SPACER CHAMBER CHILD*	\$0 (Tier 2*)	
SPACER CHAMBER INFANT*	\$0 (Tier 2*)	
SPACER WITH MASK*	\$0 (Tier 2*)	
SPACERS/HOLDING CHAMBERS*	\$0 (Tier 2*)	
VORTEX HOLDING CHAMBER PEDIATRIC*	\$0 (Tier 2*)	
VORTEX VALVED MISC CHAMBER*	\$0 (Tier 2*)	
MIGRAINE PRODUCTS		
MIGRAINE PRODUCTS		
AIMOVIG 140MG/ML AUTO-INJECTOR	25% (Tier 3)	PA QL=1 ML/30 Days
AIMOVIG 70MG/ML AUTO-INJECTOR	25% (Tier 3)	PA QL=1 ML/30 Days
<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	\$0 (Tier 2)	PA QL=16 ML/30 Days
EMGALITY 100MG/ML SYRINGE	25% (Tier 3)	PA QL=3 ML/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
EMGALITY 120MG/ML AUTO-INJECTOR	25% (Tier 3)	PA QL=2 ML/30 Days
EMGALITY 120MG/ML SYRINGE	25% (Tier 3)	PA QL=2 ML/30 Days
<i>naratriptan 1mg tab</i>	\$0 (Tier 2)	QL=18 EA/30 Days
<i>naratriptan 2.5mg tab</i>	\$0 (Tier 2)	QL=18 EA/30 Days
QULIPTA 10MG TAB	25% (Tier 4)	PA QL=30 EA/30 Days
QULIPTA 30MG TAB	25% (Tier 4)	PA QL=30 EA/30 Days
QULIPTA 60MG TAB	25% (Tier 4)	PA QL=30 EA/30 Days
<i>rizatriptan 10mg odt</i>	\$0 (Tier 1)	QL=36 EA/60 Days
<i>rizatriptan 10mg tab</i>	\$0 (Tier 1)	QL=36 EA/60 Days
<i>rizatriptan 5mg odt</i>	\$0 (Tier 1)	QL=36 EA/60 Days
<i>rizatriptan 5mg tab</i>	\$0 (Tier 1)	QL=36 EA/60 Days
<i>sumatriptan 100mg tab</i>	\$0 (Tier 1)	QL=18 EA/30 Days
<i>sumatriptan 20mg/act nasal spray</i>	\$0 (Tier 2)	QL=12 EA/30 Days
<i>sumatriptan 25mg tab</i>	\$0 (Tier 1)	QL=18 EA/30 Days
<i>sumatriptan 50mg tab</i>	\$0 (Tier 1)	QL=18 EA/30 Days
<i>sumatriptan 5mg/act nasal spray</i>	\$0 (Tier 2)	QL=12 EA/30 Days
<i>sumatriptan 6mg/0.5ml auto-injector</i>	\$0 (Tier 2)	QL=5 ML/30 Days
<i>sumatriptan 6mg/0.5ml inj</i>	\$0 (Tier 2)	QL=5 ML/30 Days
UBRELVY 100MG TAB	25% (Tier 3)	PA QL=16 EA/30 Days
UBRELVY 50MG TAB	25% (Tier 3)	PA QL=16 EA/30 Days
ZAVZPRET 10MG/ACT NASAL SPRAY	25% (Tier 3)	PA QL=6 EA/30 Days
<i>zolmitriptan 2.5mg tab</i>	\$0 (Tier 2)	QL=18 EA/30 Days
<i>zolmitriptan 5mg tab</i>	\$0 (Tier 2)	QL=18 EA/30 Days
MINERALS & ELECTROLYTES		
CALCIUM		
CA CIT/VIT D TAB 315MG-200UNITS*	\$0 (Tier 1*)	PA
CA CIT/VIT D TAB 315MG-250UNITS*	\$0 (Tier 1*)	PA
CALC 600+D TAB 600-800*	\$0 (Tier 1*)	PA
CALCIUM + D3 TAB 315MG/200 UNIT*	\$0 (Tier 1*)	PA
CALCIUM + D3 TAB 600-10*	\$0 (Tier 1*)	PA
CALCIUM + D3 TAB 600-200*	\$0 (Tier 1*)	PA
CALCIUM 500 CHEW +D3*	\$0 (Tier 2*)	PA
CALCIUM 500 TAB +D*	\$0 (Tier 1*)	PA
CALCIUM 500 TAB/VIT D3*	\$0 (Tier 1*)	PA
CALCIUM 600 CHW +D/MINER*	\$0 (Tier 1*)	PA
CALCIUM 600 CHW +D/MNRLS*	\$0 (Tier 1*)	PA
CALCIUM 600 CHW W/VIT D*	\$0 (Tier 1*)	PA
CALCIUM 600 TAB*	\$0 (Tier 1*)	PA
CALCIUM 600 TAB +D*	\$0 (Tier 1*)	PA
CALCIUM 600 TAB +D/MNRLS*	\$0 (Tier 1*)	PA
CALCIUM 600 TAB +D3*	\$0 (Tier 1*)	PA
CALCIUM 600/VIT D TAB*	\$0 (Tier 1*)	PA
CALCIUM AND MAGNESIUM TAB*	\$0 (Tier 2*)	PA
CALCIUM CARB-CHOLECALCIF CHEW TAB 600 MG-20 MCG (800 UNIT)*	\$0 (Tier 2*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CALCIUM CARB-CHOLECALCIFEROL TAB 600 MG-20 MCG (800 UNIT)*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE PLUS VITAMIN D3 TAB 600MG-800UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE TAB 600MG*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/CHOLECALCIFEROL TAB 250MG-125UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/CHOLECALCIFEROL TAB 500MG-200UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/CHOLECALCIFEROL TAB 600MG-400UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 500MG/200UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 500MG-125UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 500MG-200UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 500MG-400 UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 500MG-400UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 600MG/200UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE/VITAMIN D TAB 600MG/400UNIT*	\$0 (Tier 1*)	PA
CALCIUM CARBONATE-CHOLECALCIFEROL TAB 500 MG-5 MCG*	\$0 (Tier 1*)	PA
CALCIUM CHEW 500-10*	\$0 (Tier 2*)	PA
CALCIUM CHEW TAB*	\$0 (Tier 2*)	PA
CALCIUM CHEW TAB 1250MG*	\$0 (Tier 2*)	PA
CALCIUM CHEW TAB 500MG*	\$0 (Tier 2*)	PA
CALCIUM CIT TAB 200MG*	\$0 (Tier 1*)	PA
CALCIUM CIT/VIT D TAB*	\$0 (Tier 1*)	PA
CALCIUM CITR TAB W/VIT D3*	\$0 (Tier 1*)	PA
CALCIUM CITRATE + D TAB 315-250*	\$0 (Tier 1*)	PA
CALCIUM CITRATE TAB 200MG*	\$0 (Tier 1*)	PA
CALCIUM CITRATE/VITAMIN D TAB*	\$0 (Tier 1*)	PA
CALCIUM FOR WOMEN CHW*	\$0 (Tier 2*)	PA
CALCIUM HIGH POTENCY PLUS VITAMIN D TAB*	\$0 (Tier 1*)	PA
CALCIUM PLUS D TAB 600*	\$0 (Tier 1*)	PA
CALCIUM PLUS TAB 500-200*	\$0 (Tier 1*)	PA
CALCIUM TAB 500/D*	\$0 (Tier 1*)	PA
CALCIUM TAB 500+D*	\$0 (Tier 1*)	PA
CALCIUM TAB 500MG*	\$0 (Tier 1*)	PA
CALCIUM TAB 600MG*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CALCIUM TAB VITAMIN D*	\$0 (Tier 1*)	PA
CALCIUM W/VITAMIN D TAB 600+D3*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 500MG*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 500MG-200UNITS*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 500MG-400UNITS*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 500MG-600UNITS*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 600MG-200UNITS*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 600MG-400UNITS*	\$0 (Tier 1*)	PA
CALCIUM/D TAB 600MG-800UNITS*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 500MG/ 400 UNIT*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 500MG/ 600 UNIT*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 600-800*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 600MG/ 200 UNIT*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 600MG/ 400 UNIT*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 600MG/200 UNIT*	\$0 (Tier 1*)	PA
CALCIUM/D3 TAB 600MG/800UNIT*	\$0 (Tier 1*)	PA
CALCIUM/MAGNESIUM/ZINC TAB*	\$0 (Tier 1*)	PA
CALCIUM/VIT D CAP 600-400*	\$0 (Tier 2*)	PA
CALCIUM/VITAMIN D CHEW TAB*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D TAB*	\$0 (Tier 2*)	PA
CALCIUM/VITAMIN D TAB 315MG-250UNIT*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D TAB 500MG-600UNIT*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D TAB 600MG-400UNIT*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D TAB 600MG-800UNIT*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D3 TAB 500-5*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D3 TAB 600-400*	\$0 (Tier 1*)	PA
CALCIUM/VITAMIN D3 TAB 600MG*	\$0 (Tier 1*)	PA
CALCIUM+D3 TAB 315-250*	\$0 (Tier 1*)	PA
CALCIUM+D3 TAB 600-400*	\$0 (Tier 1*)	PA
CALCIUM+D3 TAB 600-800*	\$0 (Tier 1*)	PA
CALCIUM+D3 TAB MAXIMUM*	\$0 (Tier 1*)	PA
CALCIUM-FOLIC ACID PLUS D WAFER*	\$0 (Tier 2*)	PA
CALCIUM + D TAB*	\$0 (Tier 1*)	PA
CAL-MAG-ZINC-D TAB*	\$0 (Tier 2*)	PA
CALTRATE +D TAB 600-800*	\$0 (Tier 1*)	PA
CALTRATE 600 +D3 CHEW*	\$0 (Tier 1*)	PA
CALTRATE 600 CHEW 600-800*	\$0 (Tier 2*)	PA
CALTRATE-D SOFT CHEWS*	\$0 (Tier 2*)	PA
CARBONATE/VITAMIN D TAB 600MG/800UNIT*	\$0 (Tier 1*)	PA
CHEW CALCIUM CHW*	\$0 (Tier 1*)	PA
CITRACAL+D3 TAB MAXIMUM*	\$0 (Tier 1*)	PA
CORAL CALCIUM CAP*	\$0 (Tier 2*)	PA
CVS CALCIUM TAB 600MG*	\$0 (Tier 2*)	PA
EQL CALCIUM TAB CITR/D3*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
EQL CALCIUM TAB W/VIT D*	\$0 (Tier 1*)	PA
ONEVITE CALC TAB 600MG*	\$0 (Tier 1*)	PA
ONEVITE TAB 500-5MCG*	\$0 (Tier 1*)	PA
ONEVITE TAB 600-5*	\$0 (Tier 1*)	PA
OYST SHELL/D TAB 250-125*	\$0 (Tier 2*)	PA
OYST SHELL/D TAB 500MG-200UNIT*	\$0 (Tier 1*)	PA
OYSTER SHELL CALCIUM TAB 500MG*	\$0 (Tier 1*)	PA
OYSTER SHELL CALCIUM/D TAB 500MG*	\$0 (Tier 1*)	PA
OYSTER SHELL CALCIUM/VITAMIN D TAB*	\$0 (Tier 1*)	PA
OYSTER SHELL TAB 1250MG*	\$0 (Tier 1*)	PA
OYSTER SHELL TAB 500MG*	\$0 (Tier 1*)	PA
OYSTER SHELL/VITAMIN D TAB 500-5MCG*	\$0 (Tier 1*)	PA
PURE CALCIUM CARBONATE*	\$0 (Tier 1*)	PA
SM CALCIUM CITRATE+VITAMIN D*	\$0 (Tier 1*)	PA
ULTRA CALCIUM + VITAMIN D*	\$0 (Tier 1*)	PA
ELECTROLYTE MIXTURES		
ADVANTAGE ORAL ELECTROLYTE SOLN*	\$0 (Tier 1*)	
FT ELECTROLYTE SOLN*	\$0 (Tier 1*)	
HYDRALYTE POWDER ORANGE*	\$0 (Tier 1*)	
HYDRALYTE SOLUTION BERRY*	\$0 (Tier 1*)	
HYDRALYTE SOLUTION LEMONADE*	\$0 (Tier 1*)	
HYDRALYTE SOLUTION ORANGE*	\$0 (Tier 1*)	
HYDRATING PAK ELECTROLYTE*	\$0 (Tier 1*)	
HYDRATION MULTIPLIER POWDER*	\$0 (Tier 1*)	
KINDERLYTE PAK*	\$0 (Tier 1*)	
KINDERLYTE PAK PREMAX*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION CHERRY*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION FRUIT*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION GRAPE*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION LEMON*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION LEMON/LIME*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION LEMONADE*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION ORANGE*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION PREMAX*	\$0 (Tier 1*)	
KINDERLYTE SOLUTION STRAWBERRY*	\$0 (Tier 1*)	
LIQUID I.V. POWDER POPSICLE*	\$0 (Tier 1*)	
LIQUID I.V. POWDER STRAWBERRY*	\$0 (Tier 1*)	
ORAL ELECTROLYTE SOLN*	\$0 (Tier 1*)	
ORALYTE SOLN*	\$0 (Tier 1*)	
PEDIALYTE SOL ADV CARE*	\$0 (Tier 1*)	
PEDIALYTE SOLN*	\$0 (Tier 1*)	
PEDIALYTE SOLUTION*	\$0 (Tier 1*)	
PEDIALYTE SOLUTION GRAPE*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYTE SOLUTION*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PEDIATRIC ELECTROLYE SOLUTION APPLE*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYE SOLUTION FRUIT*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYE SOLUTION GRAPE*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYE SOLUTION PINEAPPLE*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYE SOLUTION STRAWBRY*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYE SOLUTION UNFLAVOR*	\$0 (Tier 1*)	
PEDIATRIC ELECTROLYTE SOLN*	\$0 (Tier 1*)	QL=2000 UNITS PER DISPENSING
PEDIATRIC ELECTROLYTE SOLUTION*	\$0 (Tier 1*)	
TRUELYTE SOLN*	\$0 (Tier 1*)	
FLUORIDE		
FLORIVA DROPS*	\$0 (Tier 2*)	PA
MONOCAL TAB*	\$0 (Tier 2*)	PA
SODIUM FLUORIDE CHEW 0.25MG*	\$0 (Tier 2*)	
SODIUM FLUORIDE CHEW 0.5MG*	\$0 (Tier 2*)	
SODIUM FLUORIDE CHEW 1MG*	\$0 (Tier 2*)	
SODIUM FLUORIDE DROPS 0.5MG/ML*	\$0 (Tier 2*)	
MAGNESIUM		
CVS MAGNESIUM TAB 500MG*	\$0 (Tier 1*)	PA
MAG L-LACTAT TAB 84MG*	\$0 (Tier 1*)	PA
MAGNESIUM CAP 300MG*	\$0 (Tier 2*)	PA
MAGNESIUM GLUCONATE TAB 550MG*	\$0 (Tier 2*)	PA
MAGNESIUM OXIDE CAP (ELEMENTAL MG) 500MG*	\$0 (Tier 2*)	PA
MAGNESIUM OXIDE TAB 420MG*	\$0 (Tier 1*)	PA
MAGNESIUM TAB 500MG*	\$0 (Tier 1*)	PA
MAG-TAB SR TAB 84MG*	\$0 (Tier 1*)	PA
SLOW-MAG TAB 71.5-119MG*	\$0 (Tier 2*)	PA
MINERAL COMBINATIONS		
CA CITRATE + MAGNESIUM TAB*	\$0 (Tier 2*)	PA
PHOSPHATE		
K-PHOS NEUTRAL*	\$0 (Tier 2*)	PA
K-PHOS NEUTRAL TAB*	\$0 (Tier 2*)	PA
PHOSPHA 250 NEUTRAL TAB*	\$0 (Tier 2*)	PA
PHOSPHA 250 TAB NEUTRAL*	\$0 (Tier 1*)	PA
PHOSPHOROUS TAB*	\$0 (Tier 2*)	PA
PHOSPHO-TRIN TAB 250 NEUT*	\$0 (Tier 2*)	PA
PHOSPHO-TRIN TAB K500*	\$0 (Tier 2*)	PA
WES-PHOS 250 NEUTRAL TAB*	\$0 (Tier 2*)	PA
SODIUM		
SODIUM CHLORIDE TAB 1GM*	\$0 (Tier 1*)	
TRACE MINERALS		
CVS SELENIUM TAB 200MCG*	\$0 (Tier 1*)	PA
SELENIUM TAB 200MCG*	\$0 (Tier 1*)	PA
SELENIUM TAB 50MCG*	\$0 (Tier 1*)	PA
ZINC		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ORAZINC TAB 110MG*	\$0 (Tier 2*)	PA
ZINC CAP 220MG*	\$0 (Tier 1*)	PA
ZINC TAB 50MG*	\$0 (Tier 1*)	PA
ZINC 15 TAB*	\$0 (Tier 2*)	PA
ZINC CAP 220MG*	\$0 (Tier 1*)	PA
ZINC CHELATE TAB 50MG*	\$0 (Tier 1*)	PA
ZINC CHELATED TAB 50MG*	\$0 (Tier 1*)	PA
ZINC GLUCON TAB 30MG*	\$0 (Tier 1*)	PA
ZINC GLUCONATE TAB 100MG*	\$0 (Tier 1*)	PA
ZINC LOZ 10MG*	\$0 (Tier 2*)	PA
ZINC SULFATE CAP 220MG*	\$0 (Tier 1*)	PA
ZINC SULFATE TAB 220MG*	\$0 (Tier 1*)	PA
ZINC TAB 100MG*	\$0 (Tier 1*)	PA
ZINC TAB 30MG*	\$0 (Tier 1*)	PA
ZINC TAB 50MG*	\$0 (Tier 1*)	PA
MISCELLANEOUS THERAPEUTIC AGENTS		
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>calcium acetate 667mg cap</i>	\$0 (Tier 1)	QL=360 EA/30 Days
CREON 120000-24000-76000UNIT DR CAP	25% (Tier 3)	
CREON 15000-3000-9500UNIT DR CAP	25% (Tier 3)	
CREON 180000-36000-114000UNIT DR CAP	25% (Tier 3)	
CREON 30000-6000-19000UNIT DR CAP	25% (Tier 3)	
CREON 60000-12000-38000UNIT DR CAP	25% (Tier 3)	
<i>cromolyn sodium 20mg/ml oral soln</i>	\$0 (Tier 2)	
DROXIA 200MG CAP	25% (Tier 3)	
DROXIA 300MG CAP	25% (Tier 3)	
DROXIA 400MG CAP	25% (Tier 3)	
EVRYSDI 0.75MG/ML ORAL SOLN	25% (Tier 5)	NDS PA QL=240 ML/30 Days
EVRYSDI 5MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>kionex 15gm/60ml oral susp</i>	\$0 (Tier 2)	
<i>l-glutamine 5gm powder for oral soln</i>	25% (Tier 5)	NDS PA QL=180 EA/30 Days
LOKELMA 10GM POWDER FOR ORAL SUSP	25% (Tier 3)	QL=90 EA/30 Days
LOKELMA 5GM POWDER FOR ORAL SUSP	25% (Tier 3)	QL=30 EA/30 Days
RADICAVA 105MG/5ML ORAL SUSP	25% (Tier 5)	NDS PA QL=70 ML/28 Days
REZDIFFRA 100MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
REZDIFFRA 60MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
REZDIFFRA 80MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
REZUROCK 200MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
RHAPSIDO 25MG TAB	25% (Tier 5)	NDS PA QL=60 EA/30 Days
<i>riluzole 50mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>sevelamer carbonate 800mg tab</i>	\$0 (Tier 2)	QL=510 EA/30 Days
<i>sodium polystyrene sulfonate 15000mg powder for oral susp</i>	\$0 (Tier 2)	
<i>sodium polystyrene sulfonate 15gm/60ml oral susp</i>	\$0 (Tier 2)	
<i>sps 15gm/60ml oral susp</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tranexamic acid 650mg tab</i>	\$0 (Tier 2)	QL=30 EA/5 Days
<i>ursodiol 250mg tab</i>	\$0 (Tier 2)	
<i>ursodiol 300mg cap</i>	\$0 (Tier 2)	
<i>ursodiol 500mg tab</i>	\$0 (Tier 2)	
VELSIPITY 2MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
VOWST 30000000UNIT CAP	25% (Tier 5)	PA QL=12 EA/90 Days
ZENPEP 105000-25000-79000UNIT DR CAP	25% (Tier 3)	
ZENPEP 14000-3000-10000UNIT DR CAP	25% (Tier 3)	
ZENPEP 24000-5000-17000UNIT DR CAP	25% (Tier 3)	
ZENPEP 252600-60000-189600UNIT DR CAP	25% (Tier 3)	
ZENPEP 40000-126000-168000UNIT DR CAP	25% (Tier 3)	
ZENPEP 42000-10000-32000UNIT DR CAP	25% (Tier 3)	
ZENPEP 63000-15000-47000UNIT DR CAP	25% (Tier 3)	
ZENPEP 84000-20000-63000UNIT DR CAP	25% (Tier 3)	
MISCELLANEOUS THERAPEUTIC CLASSES		
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF XL CAP 0.5MG*	\$0 (Tier 2*)	
ASTAGRAF XL CAP 1MG*	\$0 (Tier 2*)	
ASTAGRAF XL CAP 5MG*	\$0 (Tier 2*)	
AZATHIOPRINE TAB 100MG*	\$0 (Tier 1*)	
AZATHIOPRINE TAB 75MG*	\$0 (Tier 1*)	
LUPKYNIS CAP 7.9MG*	\$0 (Tier 2*)	
MULTIVITAMINS		
B-COMPLEX VITAMINS		
APETEX ELIXIR*	\$0 (Tier 1*)	PA
APETIGEN ELIXIR*	\$0 (Tier 1*)	PA
B COMPLEX CAP*	\$0 (Tier 1*)	PA
B COMPLEX VITAMIN CAP*	\$0 (Tier 1*)	PA
B-COMPLEX CAP*	\$0 (Tier 1*)	PA
B-COMPLEX TAB*	\$0 (Tier 1*)	PA
BIOPETIT LIQUID*	\$0 (Tier 2*)	PA
VITAMIN B COMPLEX CAP*	\$0 (Tier 1*)	PA
VITAMIN B COMPLEX TAB/B-12*	\$0 (Tier 1*)	PA
VITAMIN B TAB COMPLEX*	\$0 (Tier 1*)	PA
B-COMPLEX W/ C		
B COMPLEX/VITAMIN C CAP*	\$0 (Tier 1*)	PA
B-COMPLEX/C TAB*	\$0 (Tier 1*)	PA
B-COMPLEX-C CAP*	\$0 (Tier 1*)	PA
CVS B COMPLEX PLUS C TAB*	\$0 (Tier 1*)	PA
STRESS B/ TAB ZINC*	\$0 (Tier 1*)	PA
STRESS FORMULA/ZINC TAB*	\$0 (Tier 1*)	PA
VITAMIN B COMPLEX/VITAMIN C TAB*	\$0 (Tier 1*)	PA
B-COMPLEX W/ FOLIC ACID		
B COMPLEX TAB*	\$0 (Tier 2*)	PA
BALANCE B-50 TAB*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
B-COMPLEX TAB*	\$0 (Tier 1*)	PA
DIALYVITE 800 TAB*	\$0 (Tier 1*)	PA
DIALYVITE TAB*	\$0 (Tier 2*)	PA
DIALYVITE/ZINC TAB*	\$0 (Tier 2*)	PA
EQL B COMPLX 50 TAB*	\$0 (Tier 1*)	PA
FOLBEE PLUS TAB*	\$0 (Tier 2*)	PA
KOBEE TAB*	\$0 (Tier 1*)	PA
KP B COMPLEX/VITAMIN C TAB*	\$0 (Tier 1*)	PA
MYNEPHROCAPS*	\$0 (Tier 1*)	PA
MYNEPHRON CAP*	\$0 (Tier 2*)	PA
NEPHPLEX RX TAB*	\$0 (Tier 2*)	PA
NEPHRO VITAMINS TAB*	\$0 (Tier 1*)	PA
NEPHRONEX*	\$0 (Tier 2*)	PA
NEPHRO-VITE TAB*	\$0 (Tier 1*)	PA
NUTRIVIT LIQUID 800-15-1MG/15ML*	\$0 (Tier 2*)	PA
RENAL SOFTGEL CAP*	\$0 (Tier 2*)	PA
RENAL VITAMIN TAB*	\$0 (Tier 1*)	PA
RENAL-VITE TAB*	\$0 (Tier 1*)	PA
RENA-VITE RX TAB*	\$0 (Tier 1*)	PA
RENA-VITE TAB*	\$0 (Tier 1*)	PA
RENO CAP*	\$0 (Tier 2*)	PA
RENO CAPS*	\$0 (Tier 2*)	PA
SUPER QUINTS TAB*	\$0 (Tier 1*)	PA
TRIPHROCAPS*	\$0 (Tier 2*)	PA
WESCAPS*	\$0 (Tier 2*)	PA
B-COMPLEX W/ IRON		
APETIGEN PLUS SOLN*	\$0 (Tier 2*)	PA
APETIGEN-PLUS SOLN*	\$0 (Tier 2*)	PA
B-COMPLEX W/ MINERALS		
B COMPLEX TAB*	\$0 (Tier 1*)	PA
VITAMIN TAB B-COMPLEX*	\$0 (Tier 1*)	PA
BIOFLAVONOID PRODUCTS		
C COMPLEX TAB*	\$0 (Tier 1*)	PA
PERIDIN-C TAB*	\$0 (Tier 1*)	PA
VITAMIN C TAB*	\$0 (Tier 1*)	PA
VITC/ROSE HP TAB/BIOFLAV*	\$0 (Tier 1*)	PA
MULTIPLE VITAMINS W/ CALCIUM		
ONE-A-DAY WOMENS TAB*	\$0 (Tier 2*)	PA
MULTIPLE VITAMINS W/ IRON		
MULTIPLE VITAMINS WITH IRON TAB*	\$0 (Tier 2*)	PA
MULTI-VIT/FE TAB*	\$0 (Tier 2*)	PA
TAB-A-VITE IRON/BETA CAROTENE*	\$0 (Tier 2*)	PA
TAB-A-VITE MULTIVITAMIN/I*	\$0 (Tier 2*)	PA
MULTIPLE VITAMINS W/ MINERALS		
A THRU Z SEL TAB 50+ ADVA*	\$0 (Tier 2*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
A THRU Z SEL TAB ADVANCED*	\$0 (Tier 2*)	PA
A THRU Z TAB ADVANCED*	\$0 (Tier 2*)	PA
A THRU Z TAB SELECT*	\$0 (Tier 2*)	PA
A THRU Z TAB ULTIMATE*	\$0 (Tier 2*)	PA
A THRU Z ULT TAB MENS*	\$0 (Tier 2*)	PA
ABC COMPLETE TAB SENIOR*	\$0 (Tier 2*)	PA
ACTICAL CAP*	\$0 (Tier 2*)	PA
APATATE FORTE LIQUID*	\$0 (Tier 2*)	PA
BACMIN TAB*	\$0 (Tier 2*)	PA
BIOCAL CAP*	\$0 (Tier 2*)	PA
BPROTECTED MULTI VITAMIN LIQUID*	\$0 (Tier 2*)	PA
CENTRAVITES 50 PLUS TAB*	\$0 (Tier 2*)	PA
CENTRUM ADULTS*	\$0 (Tier 2*)	PA
CENTRUM ADULTS TAB*	\$0 (Tier 2*)	PA
CENTRUM LIQUID ADULT*	\$0 (Tier 2*)	PA
CENTRUM MATURE TAB 50+WOMEN*	\$0 (Tier 2*)	PA
CENTRUM MEN TAB*	\$0 (Tier 2*)	PA
CENTRUM MENS TAB*	\$0 (Tier 2*)	PA
CENTRUM SILVER ADULTS 50+ TAB*	\$0 (Tier 2*)	PA
CENTRUM SILVER TAB*	\$0 (Tier 2*)	PA
CENTRUM SILVER TAB 50+*	\$0 (Tier 2*)	PA
CENTRUM SILVER TAB 50+WOMEN*	\$0 (Tier 2*)	PA
CENTRUM SILVER TAB WOMEN 50+*	\$0 (Tier 2*)	PA
CENTRUM SILVER WOMEN TAB*	\$0 (Tier 2*)	PA
CENTRUM TAB*	\$0 (Tier 2*)	PA
CENTRUM WOMEN MULTIVITAMIN*	\$0 (Tier 2*)	PA
CENTRUM WOMEN TAB*	\$0 (Tier 2*)	PA
CENTURY ADULT TAB*	\$0 (Tier 2*)	PA
CEROVITE TAB SENIOR*	\$0 (Tier 2*)	PA
CERTA PLUS TAB*	\$0 (Tier 1*)	PA
CERTAVITE TAB ANTIOXID*	\$0 (Tier 2*)	PA
CERTAVITE TAB SENIOR*	\$0 (Tier 2*)	PA
CERTAVITE/ANTIOXIDANTS TAB*	\$0 (Tier 2*)	PA
COMPANION TAB*	\$0 (Tier 2*)	PA
COMPLE MULTI TAB ADLT 50+*	\$0 (Tier 2*)	PA
COMPLETE MULTIVITAMIN ADULT 50+ TAB*	\$0 (Tier 2*)	PA
CORVITA TAB*	\$0 (Tier 2*)	PA
CORVITE FREE TAB*	\$0 (Tier 1*)	PA
CORVITE TAB*	\$0 (Tier 2*)	PA
CVS DAILY MULTIPLE FOR WOMEN TAB*	\$0 (Tier 1*)	PA
CVS SPECTRAVITE ADVANCED TAB*	\$0 (Tier 2*)	PA
CVS VITAMIN C TAB*	\$0 (Tier 1*)	PA
DAILY MULTIPLE VITAMINS MINERALS*	\$0 (Tier 2*)	PA
DAILY MULTIPLE VITAMINS TAB*	\$0 (Tier 2*)	PA
DAILY VIT TAB+MINERAL*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DAILY WOMENS MULTIVITAMIN TAB*	\$0 (Tier 2*)	PA
DEKAS PLUS CAP*	\$0 (Tier 2*)	PA
DIALYVITE SUPREME TAB*	\$0 (Tier 2*)	PA
EQ COMPLETE TAB ADULT*	\$0 (Tier 2*)	PA
EQ ONE DAILY TAB WOMENS*	\$0 (Tier 2*)	PA
ESSENTIA TAB*	\$0 (Tier 2*)	PA
FORTAVIT CAP*	\$0 (Tier 2*)	PA
FT CENTURY MEN*	\$0 (Tier 2*)	PA
FT CENTURY TAB 50 PLUS*	\$0 (Tier 2*)	PA
FT CENTURY TAB ADULTS*	\$0 (Tier 2*)	PA
FT CENTURY TAB WOMEN*	\$0 (Tier 2*)	PA
FT CENTURY TAB WOMEN 50 PLUS*	\$0 (Tier 2*)	PA
GERI-VITE*	\$0 (Tier 2*)	PA
GNP CENTURY MATURE TAB*	\$0 (Tier 1*)	PA
GNP CENTURY TAB*	\$0 (Tier 1*)	PA
GNP MEGA MULTI FOR MEN TAB*	\$0 (Tier 2*)	PA
GNP MEGA MULTI FOR WOMEN TAB*	\$0 (Tier 2*)	PA
GNP ONE DAILY MENS HEALTH TAB*	\$0 (Tier 2*)	PA
GNP ONE DAILY WOMENS HEALTH TAB*	\$0 (Tier 2*)	PA
HIGH POTENCY TAB MV/FA*	\$0 (Tier 2*)	PA
KP ADULTS 50 PLUS DAILY TAB*	\$0 (Tier 2*)	PA
MEGA MULTI TAB MEN*	\$0 (Tier 2*)	PA
MEGA MULTI TAB WOMEN*	\$0 (Tier 2*)	PA
MEGA MULTIVITAMIN FOR MEN TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN ADULT 50+ TAB*	\$0 (Tier 2*)	PA
MULT VITAMIN TAB NO IRON*	\$0 (Tier 2*)	PA
MULTI COMPLT TAB/IRON*	\$0 (Tier 2*)	PA
MULTIPLE VITAMINS WITH MINERALS LIQUID*	\$0 (Tier 2*)	PA
MULTIPLE VITAMINS WITH MINERALS LIQUID ADULTS*	\$0 (Tier 2*)	PA
MULTIVITAMIN ADULT 50 PLUS TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN TAB ADULT 50+*	\$0 (Tier 2*)	PA
MULTIVITAMIN W/ MINERALS TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN WOMEN 50+ TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN WOMEN TAB 50+*	\$0 (Tier 2*)	PA
MULTI-VITE LIQUID*	\$0 (Tier 2*)	PA
MW COMPLETE FORMULATION CAP*	\$0 (Tier 2*)	PA
MW COMPLETE FORMULATION CAP D5000*	\$0 (Tier 2*)	PA
MY-VITALIFE CAP*	\$0 (Tier 1*)	PA
OCUTABS TAB*	\$0 (Tier 2*)	PA
OCUTABS TAB LUTEIN*	\$0 (Tier 2*)	PA
ONCOVITE TAB*	\$0 (Tier 2*)	PA
ONE DAILY TAB 50+*	\$0 (Tier 2*)	PA
ONE DAILY TAB MAXIMUM*	\$0 (Tier 2*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ONE DAILY TAB MEN 50+*	\$0 (Tier 2*)	PA
ONE DAILY TAB WOMEN*	\$0 (Tier 2*)	PA
ONE DAILY TAB WOMEN 50*	\$0 (Tier 2*)	PA
ONE DAILY TAB WOMENS*	\$0 (Tier 2*)	PA
ONE-A-DAY MENS TAB*	\$0 (Tier 2*)	PA
ONE-A-DAY TAB 50+ ADV*	\$0 (Tier 2*)	PA
ONE-A-DAY TAB TEEN/HER*	\$0 (Tier 1*)	PA
ONE-A-DAY TAB TEEN/HIM*	\$0 (Tier 2*)	PA
ONE-A-DAY WOMENS 50+*	\$0 (Tier 2*)	PA
ONE-A-DAY WOMENS 50+ ADV*	\$0 (Tier 2*)	PA
PREVENT CAP*	\$0 (Tier 2*)	PA
QUINTABS-M TAB*	\$0 (Tier 2*)	PA
SENTRY SENIOR TAB*	\$0 (Tier 2*)	PA
SENTRY TAB*	\$0 (Tier 2*)	PA
SENTRY TAB SENIOR*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB MEN*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB WOMEN 50*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB ADULT 50+*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB ADULTS*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB WOMEN*	\$0 (Tier 2*)	PA
SPECTRAVITE TAB WOMEN 50+*	\$0 (Tier 2*)	PA
STRESS B-COM TAB*	\$0 (Tier 2*)	PA
STROVITE FORTE TAB*	\$0 (Tier 2*)	PA
STROVITE ONE TAB*	\$0 (Tier 2*)	PA
SUPER THERA VITE M TAB*	\$0 (Tier 2*)	PA
SUPPORT LIQUID*	\$0 (Tier 2*)	PA
SUPPORT-500 CAP*	\$0 (Tier 2*)	PA
THERA-M TAB*	\$0 (Tier 2*)	PA
THERAPEUTIC LIQUID*	\$0 (Tier 2*)	PA
THERAPEUTIC-M TAB*	\$0 (Tier 2*)	PA
THERAPEUTIC-M/LUTEIN TAB*	\$0 (Tier 2*)	PA
THERATRUM COMPLETE 50 PLUS TAB*	\$0 (Tier 1*)	PA
THERATRUM COMPLETE TAB*	\$0 (Tier 2*)	PA
THERA-VITE TAB*	\$0 (Tier 2*)	PA
V-C FORTE CAP*	\$0 (Tier 2*)	PA
VIC-FORTE CAP*	\$0 (Tier 2*)	PA
WOMENS DAILY TAB FORMULA*	\$0 (Tier 2*)	PA
YELETS TEEN TAB FORMULA*	\$0 (Tier 2*)	PA
ZINC LOZENGE*	\$0 (Tier 2*)	PA
MULTIPLE VITAMINS W/ MINERALS & FLUORIDE-IRON-FOLIC ACID		
QUFLORA FE CHEW TAB 0.25MG*	\$0 (Tier 2*)	
MULTIVITAMINS		
DAILY TAB VITAMIN*	\$0 (Tier 1*)	PA
DAILY VALUE TAB MULTIVITAMIN*	\$0 (Tier 2*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
DAILY VITE TAB*	\$0 (Tier 2*)	PA
DEKAS CAP ESSENTIAL*	\$0 (Tier 2*)	PA
DEKAS LIQUID ESSENTIAL MULTI-VITAMIN*	\$0 (Tier 2*)	PA
GNP ESSENTIAL ONE DAILY TAB*	\$0 (Tier 2*)	PA
GNP ESSENTIAL ONE DAILY TAB*	\$0 (Tier 2*)	PA
MULTIPLE VITAMIN TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN*	\$0 (Tier 2*)	PA
MULTIVITAMIN TAB*	\$0 (Tier 2*)	PA
MULTI-VITAMIN TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN TAB DAILY*	\$0 (Tier 1*)	PA
ONE-A-DAY TAB ESSENT*	\$0 (Tier 2*)	PA
ONE-DAILY MULTI VITAMIN TAB*	\$0 (Tier 2*)	PA
ONE-DAILY MULT-VITAMIN TAB*	\$0 (Tier 2*)	PA
STRESS FORMULA TAB*	\$0 (Tier 2*)	PA
THERA-TABS*	\$0 (Tier 2*)	PA
VITALEE TAB*	\$0 (Tier 2*)	PA
PED MULTI VITAMINS W/FL & FE		
MULTI-VITAMINS/FLOURIDE/FE DROPS*	\$0 (Tier 2*)	
PEDIATRIC MULTIPLE VITAMINS/FLUORIDE/IRON DROPS*	\$0 (Tier 1*)	PA
QUFLORA FE DROPS*	\$0 (Tier 2*)	PA
PED MULTIPLE VITAMINS W/ MINERALS		
DEKAS PLUS LIQ*	\$0 (Tier 2*)	PA
GUMMI BEAR CHW MULTIVIT*	\$0 (Tier 2*)	PA
MW COMPLETE FORMULATION*	\$0 (Tier 2*)	PA
MW COMPLETE FORMULATION CHEW*	\$0 (Tier 2*)	PA
VITALETS CHW*	\$0 (Tier 2*)	PA
VITALETS CHW CHILD*	\$0 (Tier 2*)	PA
PED MV W/ FLUORIDE		
FLORIVA PLUS DROPS*	\$0 (Tier 2*)	PA
MULTI VITAMIN/FLUORIDE CHEW 0.25MG*	\$0 (Tier 2*)	
MULTI VITAMIN/FLUORIDE CHEW 0.5MG*	\$0 (Tier 2*)	
MULTI VITAMIN/FLUORIDE CHEW 1MG*	\$0 (Tier 2*)	
MULTI-VITAMIN/FLOURIDE DROPS*	\$0 (Tier 2*)	
PEDIATRIC MULTIVITAMIN/FLUORIDE DROPS 0.5MG/ML*	\$0 (Tier 2*)	PA
QUFLORA DROP 0.25MG/ML*	\$0 (Tier 2*)	PA
QUFLORA PEDIATRIC CHEW TAB 0.25MG*	\$0 (Tier 2*)	
QUFLORA PEDIATRIC CHEW TAB 0.5MG*	\$0 (Tier 2*)	
QUFLORA PEDIATRIC CHEW TAB 1MG*	\$0 (Tier 2*)	
QUFLORA PEDIATRIC DROPS 0.5MG/ML*	\$0 (Tier 2*)	PA
TRI-VITAMIN/FLUORIDE DROPS 0.25MG*	\$0 (Tier 2*)	
TRI-VITAMIN/FLUORIDE DROPS 0.5MG*	\$0 (Tier 2*)	
TRI-VITAMIN/FLUORIDE SOLN*	\$0 (Tier 1*)	
VIT A/C/D/FL DRO 0.25MG*	\$0 (Tier 2*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PED MV W/ IRON		
FLINTSTONES CHW COMPLETE*	\$0 (Tier 1*)	PA
PEDIATRIC MULTIVITAMIN/IRON CHEW TAB 15MG*	\$0 (Tier 2*)	PA
POLY-VI-SOL WITH IRON DROPS*	\$0 (Tier 2*)	PA
SCOOBY-DOO CHW*	\$0 (Tier 2*)	PA
PEDIATRIC MULTIPLE VITAMINS		
ANIMAL CHEWS CHW*	\$0 (Tier 1*)	PA
CHILDRENS CHEWABLE VITAMIN*	\$0 (Tier 2*)	PA
FLINTSTONES CHW EXTRA C*	\$0 (Tier 1*)	PA
FLINTSTONES CHW MY FIRST*	\$0 (Tier 2*)	PA
GNP LITTLE ONES CHW*	\$0 (Tier 1*)	PA
LITTLE ONES CHEW TAB*	\$0 (Tier 2*)	PA
MULTIVITAMIN CHW CHILDREN*	\$0 (Tier 1*)	PA
PEDIATRIC MULTIVITAMIN WITH EXTRA VITAMIN C CHEW TAB*	\$0 (Tier 1*)	PA
POLY-VI-SOL DROPS*	\$0 (Tier 2*)	PA
PEDIATRIC MULTIPLE VITAMINS & MINERALS W/ FLUORIDE		
FLORIVA CHEW TAB*	\$0 (Tier 2*)	PA
PEDIATRIC VITAMINS		
PEDIATRIC TRI-VITAMIN DROPS*	\$0 (Tier 2*)	PA
TRI-VITE PEDIATRIC DROPS*	\$0 (Tier 2*)	PA
PRENATAL VITAMINS		
CITRANATAL BLOOM TAB*	\$0 (Tier 2*)	PA
COMPLETE NATAL DHA*	\$0 (Tier 2*)	
COMPLETENATE CHEW TAB*	\$0 (Tier 2*)	
ELITE-OB TAB*	\$0 (Tier 2*)	
FOLIVANE-OB CAP*	\$0 (Tier 2*)	
M-NATAL PLUS TAB*	\$0 (Tier 2*)	
NESTABS DHA PACK*	\$0 (Tier 2*)	
NESTABS TAB*	\$0 (Tier 2*)	
OB COMPLETE ONE CAP*	\$0 (Tier 2*)	
OB COMPLETE PETITE CAP*	\$0 (Tier 2*)	
OB COMPLETE PREMIER TAB*	\$0 (Tier 2*)	
OB COMPLETE TAB*	\$0 (Tier 2*)	
ONENATAL RX TAB*	\$0 (Tier 2*)	
PNV-DHA CAP*	\$0 (Tier 2*)	
PNV-OMEGA CAP*	\$0 (Tier 2*)	
PNV-SELECT TAB*	\$0 (Tier 2*)	
PRENATAL TAB 27-1MG*	\$0 (Tier 2*)	
PRENATE AM TAB 1MG*	\$0 (Tier 2*)	
PRENATE CHEW TAB 0.6-0.4MG*	\$0 (Tier 2*)	
PRENATE DHA CAP*	\$0 (Tier 2*)	
PRENATE ELITE TAB*	\$0 (Tier 2*)	
PRENATE ENHANCE CAP*	\$0 (Tier 2*)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PRENATE ESSENTIAL CAP*	\$0 (Tier 2*)	
PRENATE MINI CAP*	\$0 (Tier 2*)	
PRENATE PIXIE CAP*	\$0 (Tier 2*)	
PRENATE RESTORE CAP*	\$0 (Tier 2*)	
PRENATE STAR TAB 20-1MG*	\$0 (Tier 2*)	
SELECT-OB*	\$0 (Tier 2*)	
SELECT-OB PLUS DHA*	\$0 (Tier 2*)	
SE-NATAL 19 CHEW TAB*	\$0 (Tier 2*)	
TARON-C DHA CAP*	\$0 (Tier 2*)	
THRIVITE RX TAB*	\$0 (Tier 2*)	
TRICARE PRENATAL TAB*	\$0 (Tier 2*)	
TRINATAL RX 1 TAB*	\$0 (Tier 2*)	
TRISTART DHA CAP*	\$0 (Tier 2*)	
VITAFOL GUMMIES*	\$0 (Tier 2*)	
VITAFOL ULTRA CAP*	\$0 (Tier 2*)	
VITAFOL-OB PLUS DHA*	\$0 (Tier 2*)	
VITAFOL-OB TAB*	\$0 (Tier 2*)	
VITAFOL-ONE CAP*	\$0 (Tier 2*)	
WESTAB PLUS TAB 27-1MG*	\$0 (Tier 2*)	
WESTGEL DHA CAP*	\$0 (Tier 2*)	
SPECIALTY VITAMINS PRODUCTS		
CVS HAIR/SKIN/NAILS TAB*	\$0 (Tier 2*)	PA
MG PLUS PROTEIN*	\$0 (Tier 2*)	PA
VITAMIN MIXTURES		
CRANBERRY CAP*	\$0 (Tier 2*)	PA
VITAMINS W/ LIPOTROPICS		
COMPLEX B-100 TAB*	\$0 (Tier 2*)	PA
MULTI-VITAMIN HP/MINERALS CAP*	\$0 (Tier 1*)	PA
VITAMINS WITH LIPOTROPICS TAB*	\$0 (Tier 1*)	PA
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENTS - MISC.		
DEEP SEA NASAL SPRAY 0.65%*	\$0 (Tier 1*)	
NASAL ANTIALLERGY		
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	\$0 (Tier 1)	QL=60 ML/30 Days
CROMOLYN SODIUM NASAL SPRAY*	\$0 (Tier 1*)	
<i>flunisolide 0.025% (25mcg/act) nasal inhaler</i>	\$0 (Tier 2)	QL=50 ML/30 Days
<i>fluticasone propionate 50mcg/act nasal inhaler</i>	\$0 (Tier 1)	QL=32 GM/30 Days
<i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i>	\$0 (Tier 2)	QL=30 ML/30 Days
<i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i>	\$0 (Tier 2)	QL=45 ML/30 Days
<i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>	\$0 (Tier 2)	QL=30.50 GM/30 Days
NASAL STEROIDS		
BUDESONIDE SUSP 32MCG*	\$0 (Tier 1*)	
TRIAMCINOLONE SPRAY 55MCG/ACT*	\$0 (Tier 1*)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SYMPATHOMIMETIC DECONGESTANTS		
NASAL DECONGESTANT SPRAY 0.05%*	\$0 (Tier 1*)	
NASAL DECONGESTANT TAB 30MG*	\$0 (Tier 1*)	
NASAL RELIEF SPRAY 0.05%*	\$0 (Tier 1*)	PA
PSEUDOEPHEDRINE ER TAB 120MG*	\$0 (Tier 1*)	
PSEUDOEPHEDRINE TAB 30MG*	\$0 (Tier 1*)	
PSEUDOEPHEDRINE TAB 60MG*	\$0 (Tier 1*)	
SINUS RELIEF SOLN 1%*	\$0 (Tier 1*)	PA
SUDOGEST 12 HOUR ER TAB 120MG*	\$0 (Tier 1*)	
SUDOGEST MAX TAB 30MG*	\$0 (Tier 1*)	
SUDOGEST TAB 30MG*	\$0 (Tier 1*)	
SUDOGEST TAB 60MG*	\$0 (Tier 1*)	
NUTRIENTS		
MISC. NUTRITIONAL SUBSTANCES		
ALBA-LYBE NR LIQUID*	\$0 (Tier 2*)	PA
CLINIMIX 4.25/10 INJ	25% (Tier 3)	PA_BvD
CLINIMIX 4.25/5 INJ	25% (Tier 3)	PA_BvD
CLINIMIX 5/15 INJ	25% (Tier 3)	PA_BvD
CLINIMIX 5/20 INJ	25% (Tier 3)	PA_BvD
<i>clinisol 15% inj</i>	\$0 (Tier 2)	PA_BvD
DEXTROSE 10% INJ	\$0 (Tier 2)	PA_BvD
<i>electrolyte-148 inj</i>	\$0 (Tier 2)	
<i>glucose 50mg/ml inj</i>	\$0 (Tier 2)	
<i>glucose 50mg/ml/potassium chloride</i>	\$0 (Tier 2)	
<i>0.02meq/ml/sodium chloride 4.5mg/ml inj</i>		
GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ	\$0 (Tier 2)	
<i>glucose 50mg/ml/sodium chloride 4.5mg/ml inj</i>	\$0 (Tier 2)	
<i>glucose 50mg/ml/sodium chloride 9mg/ml inj</i>	\$0 (Tier 2)	
<i>glucose/potassium chloride/sodium chloride</i>	\$0 (Tier 2)	
<i>5%-10meq-0.45% inj</i>		
<i>glucose/potassium chloride/sodium chloride</i>	\$0 (Tier 2)	
<i>5%-40meq-0.45% inj</i>		
GLUCOSE/SODIUM CHLORIDE 10%-0.2% INJ	25% (Tier 3)	PA_BvD
GLUCOSE/SODIUM CHLORIDE 10%-0.45% INJ	25% (Tier 3)	PA_BvD
GLUCOSE/SODIUM CHLORIDE 2.5%-0.45% INJ	\$0 (Tier 2)	
<i>kcl/nacl 20meq-0.9% inj</i>	\$0 (Tier 2)	
<i>klor-con 10meq er tab</i>	\$0 (Tier 1)	
<i>klor-con 10meq micro er tab</i>	\$0 (Tier 1)	
<i>klor-con 15meq micro er tab</i>	\$0 (Tier 1)	
<i>klor-con 20meq micro er tab</i>	\$0 (Tier 1)	
<i>klor-con 20meq powder for oral soln</i>	\$0 (Tier 2)	
<i>klor-con 8meq er tab</i>	\$0 (Tier 1)	
<i>magnesium sulfate 500mg/ml inj</i>	\$0 (Tier 2)	
<i>magnesium sulfate 500mg/ml syringe</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>plenamine 15% inj</i>	\$0 (Tier 2)	PA_BvD
<i>potassium chloride 1.33meq/ml oral soln</i>	\$0 (Tier 2)	
<i>potassium chloride 10meq er cap</i>	\$0 (Tier 1)	
<i>potassium chloride 10meq er tab</i>	\$0 (Tier 1)	
<i>potassium chloride 10meq micro er tab</i>	\$0 (Tier 1)	
POTASSIUM CHLORIDE 10MEQ/100ML INJ	\$0 (Tier 2)	
POTASSIUM CHLORIDE 15MEQ ER TAB	\$0 (Tier 1)	
<i>potassium chloride 15meq micro er tab</i>	\$0 (Tier 1)	
<i>potassium chloride 2.67meq/ml oral soln</i>	\$0 (Tier 2)	
<i>potassium chloride 20meq er tab</i>	\$0 (Tier 1)	
<i>potassium chloride 20meq micro er tab</i>	\$0 (Tier 1)	
<i>potassium chloride 20meq powder for oral soln</i>	\$0 (Tier 2)	
POTASSIUM CHLORIDE 20MEQ/100ML INJ	\$0 (Tier 2)	
<i>potassium chloride 2meq/ml (20ml) inj</i>	\$0 (Tier 2)	
<i>potassium chloride 2meq/ml inj</i>	\$0 (Tier 2)	
<i>potassium chloride 8meq er cap</i>	\$0 (Tier 1)	
<i>potassium chloride 8meq er tab</i>	\$0 (Tier 1)	
<i>potassium chloride/sodium chloride 20meq-0.45% inj</i>	\$0 (Tier 2)	
<i>potassium chloride/sodium chloride 40meq-0.9% inj</i>	\$0 (Tier 2)	
PROSOL 20% INJ	25% (Tier 4)	PA_BvD
<i>sodium chloride 0.45% inj</i>	\$0 (Tier 2)	
<i>sodium chloride 0.9% inj</i>	\$0 (Tier 2)	
<i>sodium chloride 3% inj</i>	\$0 (Tier 2)	
<i>sodium chloride 50mg/ml inj</i>	\$0 (Tier 2)	
TPN ELECTROLYTES INJ	\$0 (Tier 2)	PA_BvD
TRAVASOL 10% INJ	25% (Tier 3)	PA_BvD
OBSTETRICAL AND GYNECOLOGICAL MEDICATIONS		
CONTRACEPTIVES		
<i>altavera tab 28-day pack</i>	\$0 (Tier 2)	
<i>alyacen 1/35 tab 28-day pack</i>	\$0 (Tier 2)	
<i>apri tab 28-day pack</i>	\$0 (Tier 2)	
ARANELLE TAB 28-DAY PACK	\$0 (Tier 2)	
<i>ashlyna tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>aubra tab 28-day pack</i>	\$0 (Tier 2)	
<i>aviane tab 28-day pack</i>	\$0 (Tier 2)	
<i>azurette tab 28-day pack</i>	\$0 (Tier 2)	
<i>blisovi 21 fe tab 1.5/30 28-day pack</i>	\$0 (Tier 2)	
<i>camila 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>camrese lo tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>cryselle tab 28-day pack</i>	\$0 (Tier 2)	
<i>cyred tab 28-day pack</i>	\$0 (Tier 2)	
<i>deblitane 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE	25% (Tier 3)	QL=.65 ML/84 Days
<i>drospirenone/ethinyl estradiol/inert ingredients</i> <i>3-0.02-1mg tab 28-day pack</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>drospirenone/ethinyl estradiol/inert ingredients</i> <i>3-0.03-1mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>eluryng 0.120-0.015mg/24hr vaginal system</i>	\$0 (Tier 2)	QL=1 EA/28 Days
<i>enilloring 0.120-0.015mg/24hr vaginal system</i>	\$0 (Tier 2)	QL=1 EA/28 Days
<i>enskyce tab 28-day pack</i>	\$0 (Tier 2)	
<i>errin 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>estarylla tab 28-day pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/ethinyl estradiol/levonorgestrel</i> <i>0.01-0.02-0.1mg tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr</i> <i>vaginal system</i>	\$0 (Tier 2)	QL=1 EA/28 Days
<i>ethinyl estradiol/inert ingredients/levonorgestrel</i> <i>0.02-1-0.1mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/inert ingredients/levonorgestrel</i> <i>0.03-1-0.15mg tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>ethinyl estradiol/inert ingredients/norgestimate</i> <i>0.035-1-0.25mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/norethindrone acetate 0.02-1mg tab</i> <i>21-day pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/norgestimate</i> <i>0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/norgestimate</i> <i>0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack</i>	\$0 (Tier 2)	
<i>falmina tab 28-day pack</i>	\$0 (Tier 2)	
<i>feirza 1.5/30 tab 28-day pack</i>	\$0 (Tier 2)	
<i>feirza 1/20 tab 28-day pack</i>	\$0 (Tier 2)	
<i>hailey fe 1/20 tab 28-day pack</i>	\$0 (Tier 2)	
<i>heather 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>iclevia tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>incassia 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>introvale tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>isibloom tab 28-day pack</i>	\$0 (Tier 2)	
<i>jaimiess tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>jasmiel tab 28-day pack</i>	\$0 (Tier 2)	
<i>juleber tab 28-day pack</i>	\$0 (Tier 2)	
<i>junel 1.5/30 tab 21-day pack</i>	\$0 (Tier 2)	
<i>junel 1/20 tab 21-day pack</i>	\$0 (Tier 2)	
<i>junel fe 1.5/30 tab 28-day pack</i>	\$0 (Tier 2)	
<i>junel fe tab 1/20 28-day pack</i>	\$0 (Tier 2)	
<i>kariva tab 28-day pack</i>	\$0 (Tier 2)	
<i>kelnor 1/35 tab 28-day pack</i>	\$0 (Tier 2)	
<i>kurvelo tab 28-day pack</i>	\$0 (Tier 2)	
<i>larin 1.5/30 tab 21-day pack</i>	\$0 (Tier 2)	
<i>larin 1/20 tab 21-day pack</i>	\$0 (Tier 2)	
<i>larin fe 1.5/30 tab 28-day pack</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>larin fe tab 1/20 28-day pack</i>	\$0 (Tier 2)	
<i>lessina tab 28-day pack</i>	\$0 (Tier 2)	
<i>levonest tab 28-day pack</i>	\$0 (Tier 2)	
<i>levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack</i>	\$0 (Tier 2)	
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM	25% (Tier 3)	
<i>lo jaimiess tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>loryna tab 28-day pack</i>	\$0 (Tier 2)	
<i>low-ogestrel tab 28-day pack</i>	\$0 (Tier 2)	
<i>luizza 1.5/30 tab 21-day pack</i>	\$0 (Tier 2)	
<i>luizza 1/20 tab 21-day pack</i>	\$0 (Tier 2)	
<i>lyleq 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>lyza 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>marlissa tab 28-day pack</i>	\$0 (Tier 2)	
<i>medroxyprogesterone acetate 150mg/ml inj</i>	\$0 (Tier 2)	QL=1 ML/90 Days
<i>medroxyprogesterone acetate 150mg/ml syringe</i>	\$0 (Tier 2)	QL=1 ML/90 Days
<i>meleya 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>microgestin 1.5/30 tab 21-day pack</i>	\$0 (Tier 2)	
<i>microgestin 1/20 tab 21-day pack</i>	\$0 (Tier 2)	
<i>microgestin fe 1.5/30 tab 28-day pack</i>	\$0 (Tier 2)	
<i>microgestin fe 1/20 tab 28-day pack</i>	\$0 (Tier 2)	
<i>mili tab 28-day pack</i>	\$0 (Tier 2)	
<i>necon 0.5/35 tab 28-day pack</i>	\$0 (Tier 2)	
NEXPLANON 68MG IMPLANT	25% (Tier 3)	
<i>nikki tab 28-day pack</i>	\$0 (Tier 2)	
<i>nora-be 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	\$0 (Tier 2)	QL=3 EA/28 Days
<i>norethindrone 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>nortrel 0.5/35 tab 28-day pack</i>	\$0 (Tier 2)	
<i>nortrel 1/35 tab 21-day pack</i>	\$0 (Tier 2)	
<i>nortrel 1/35 tab 28-day pack</i>	\$0 (Tier 2)	
<i>nortrel 7/7/7 tab 28-day pack</i>	\$0 (Tier 2)	
<i>nylia 1/35 tab 28-day pack</i>	\$0 (Tier 2)	
<i>nylia 7/7/7 tab 28-day pack</i>	\$0 (Tier 2)	
<i>orquidea 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>pimtrea tab 28-day pack</i>	\$0 (Tier 2)	
<i>portia tab 28-day pack</i>	\$0 (Tier 2)	
<i>reclipsen tab 28-day pack</i>	\$0 (Tier 2)	
<i>setlakin tab 91-day pack</i>	\$0 (Tier 2)	QL=91 EA/91 Days
<i>sharobel 0.35mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>sprintec tab 28-day pack</i>	\$0 (Tier 2)	
<i>syeda tab 28-day pack</i>	\$0 (Tier 2)	
<i>tarina fe 1/20 tab 28-day pack</i>	\$0 (Tier 2)	
<i>tri-estarylla tab 28-day pack</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>tri-lo-estarylla tab 28-day pack</i>	\$0 (Tier 2)	
<i>tri-lo-sprintec tab 28-day pack</i>	\$0 (Tier 2)	
<i>tri-mili tab 28-day pack</i>	\$0 (Tier 2)	
<i>tri-sprintec tab 28-day pack</i>	\$0 (Tier 2)	
<i>tri-vylibra lo tab 28-day pack</i>	\$0 (Tier 2)	
<i>tri-vylibra tab 28-day pack</i>	\$0 (Tier 2)	
<i>turqoz tab 28-day pack</i>	\$0 (Tier 2)	
<i>valtya 1/35 tab 28-day pack</i>	\$0 (Tier 2)	
VALTYA 1/50 TAB 28-DAY PACK	\$0 (Tier 2)	
VELIVET TAB 28-DAY PACK	\$0 (Tier 2)	
<i>vestura tab 3-0.02mg 28-day pack</i>	\$0 (Tier 2)	
<i>vienva tab 28-day pack</i>	\$0 (Tier 2)	
<i>viorele tab 28-day pack</i>	\$0 (Tier 2)	
<i>vylibra tab 28-day pack</i>	\$0 (Tier 2)	
<i>xulane 150-35mcg/24hr patch</i>	\$0 (Tier 2)	QL=3 EA/28 Days
<i>zafemy 150-35mcg/24hr patch</i>	\$0 (Tier 2)	QL=3 EA/28 Days
<i>zovia 1/35 tab 28-day pack</i>	\$0 (Tier 2)	
ESTROGEN DRUGS		
<i>abigale 1/0.5mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>abigale lo 0.5/0.1mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>conjugated estrogens 0.3mg tab</i>	\$0 (Tier 2)	
<i>conjugated estrogens 0.45mg tab</i>	\$0 (Tier 2)	
<i>conjugated estrogens 0.625mg tab</i>	\$0 (Tier 2)	
<i>conjugated estrogens 0.9mg tab</i>	\$0 (Tier 2)	
<i>conjugated estrogens 1.25mg tab</i>	\$0 (Tier 2)	
<i>dotti 0.025mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>dotti 0.0375mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>dotti 0.05mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>dotti 0.075mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>dotti 0.1mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>estradiol 0.01% vaginal cream</i>	\$0 (Tier 1)	
<i>estradiol 0.01mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>estradiol 0.025mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>estradiol 0.0375mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>estradiol 0.0375mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>estradiol 0.05mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>estradiol 0.05mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>estradiol 0.06mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>estradiol 0.075mg/24hr twice weekly patch</i>	\$0 (Tier 2)	QL=8 EA/28 Days
<i>estradiol 0.075mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>estradiol 0.1% (0.25mg/0.25gm) topical gel</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>estradiol 0.1% (0.5mg/0.5gm) topical gel</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>estradiol 0.1% (0.75mg/0.75gm) topical gel</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>estradiol 0.1% (1.25mg/1.25gm) topical gel</i>	\$0 (Tier 2)	QL=37.50 GM/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>estradiol 0.1% (1mg/gm) topical gel</i>	\$0 (Tier 2)	QL=30 GM/30 Days
<i>estradiol 0.1mg/24hr weekly patch</i>	\$0 (Tier 2)	QL=4 EA/28 Days
<i>estradiol 0.5mg tab</i>	\$0 (Tier 1)	
<i>estradiol 10mcg vaginal insert</i>	\$0 (Tier 2)	
<i>estradiol 1mg tab</i>	\$0 (Tier 1)	
<i>estradiol 2mg tab</i>	\$0 (Tier 1)	
<i>estradiol valerate 10mg/ml inj</i>	\$0 (Tier 2)	
<i>estradiol valerate 20mg/ml inj</i>	\$0 (Tier 2)	
<i>estradiol valerate 40mg/ml inj</i>	\$0 (Tier 2)	
<i>estradiol/norethindrone acetate 0.5-0.1mg tab 28-day pack</i>	\$0 (Tier 2)	
<i>estradiol/norethindrone acetate 1-0.5mg 28-day pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/norethindrone acetate 0.0025-0.5mg tab 28 day-pack</i>	\$0 (Tier 2)	
<i>ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack</i>	\$0 (Tier 2)	
<i>fyavolv 0.0025-0.5mg tab</i>	\$0 (Tier 2)	
<i>fyavolv 0.005-1mg tab</i>	\$0 (Tier 2)	
<i>jinteli 0.005-1mg tab</i>	\$0 (Tier 2)	
<i>mimvey tab 28-day pack</i>	\$0 (Tier 2)	
PREMARIN 0.625MG/GM VAGINAL CREAM	25% (Tier 3)	
PREMPHASE TAB 28-DAY PACK	25% (Tier 3)	
PREMPRO 0.3/1.5MG TAB 28-DAY PACK	25% (Tier 3)	
PREMPRO 0.45/1.5MG TAB 28-DAY PACK	25% (Tier 3)	
PREMPRO 0.625/2.5MG TAB 28-DAY PACK	25% (Tier 3)	
PREMPRO 0.625/5MG TAB 28-DAY PACK	25% (Tier 3)	
<i>yuvafem 10mcg vaginal insert</i>	\$0 (Tier 2)	
PROGESTIN DRUGS		
<i>gallifrey 5mg tab</i>	\$0 (Tier 2)	
<i>medroxyprogesterone acetate 10mg tab</i>	\$0 (Tier 1)	
<i>medroxyprogesterone acetate 2.5mg tab</i>	\$0 (Tier 1)	
<i>medroxyprogesterone acetate 5mg tab</i>	\$0 (Tier 1)	
MEGESTROL ACETATE 125MG/ML ORAL SUSP	\$0 (Tier 2)	PA
<i>norethindrone acetate 5mg tab</i>	\$0 (Tier 2)	
<i>progesterone 100mg cap</i>	\$0 (Tier 2)	
<i>progesterone 200mg cap</i>	\$0 (Tier 2)	
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
ARTIFICIAL TEARS SOLN 0.5-0.6%*	\$0 (Tier 1*)	
CARBOXYMETHYLCELLULOSE OPHTH SOLN 0.5%*	\$0 (Tier 1*)	
CARBOXYMETHYLCELLULOSE SOLN 0.5%*	\$0 (Tier 1*)	
DRY EYE RELIEF DROPS*	\$0 (Tier 1*)	
LUBRICANT EYE DROPS 0.5%*	\$0 (Tier 1*)	
LUBRICATING EYE DROPS 0.4-0.3%*	\$0 (Tier 1*)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
LUBRIFRESH OINT P.M.*	\$0 (Tier 1*)	
LUBRIFRESH OINT PM*	\$0 (Tier 1*)	
POLYVINYL ALCOHOL OPTH SOLN 1.4%*	\$0 (Tier 1*)	
REFRESH CELLUVISC OPTH SOLN*	\$0 (Tier 1*)	
REFRESH LACRI-LUBE OPTH OINT*	\$0 (Tier 1*)	
REFRESH OPTIVE SOLN MEGA-3*	\$0 (Tier 2*)	
REFRESH P.M. OPTH OINT*	\$0 (Tier 1*)	
REFRESH PLUS OPTH SOLN*	\$0 (Tier 1*)	
REFRESH RELIEVA*	\$0 (Tier 1*)	
REFRESH RELIEVA PF*	\$0 (Tier 2*)	
REFRESH RELIEVA PF XTRA*	\$0 (Tier 2*)	
REFRESH TEARS PF*	\$0 (Tier 2*)	
ULTRA EYE PF DROP 0.4-0.3%*	\$0 (Tier 1*)	
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL 0.5% OPTH SOLN	\$0 (Tier 2)	
<i>brimonidine tartrate/timolol maleate 0.2-0.5% ophth soln</i>	\$0 (Tier 2)	
CARTEOLOL 1% OPTH SOLN	\$0 (Tier 1)	
<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	\$0 (Tier 1)	
LEVOBUNOLOL 0.5% OPTH SOLN	\$0 (Tier 1)	
<i>timolol 0.25% ophth gel</i>	\$0 (Tier 2)	
<i>timolol 0.25% ophth soln</i>	\$0 (Tier 1)	
<i>timolol 0.5% ophth gel</i>	\$0 (Tier 2)	
<i>timolol 0.5% ophth soln</i>	\$0 (Tier 1)	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE 0.5% OPTH SOLN	\$0 (Tier 2)	
<i>brimonidine tartrate 0.1% ophth soln</i>	\$0 (Tier 2)	
<i>brimonidine tartrate 0.15% ophth soln</i>	\$0 (Tier 2)	
<i>brimonidine tartrate 0.2% ophth soln</i>	\$0 (Tier 1)	
SIMBRINZA 0.2-1% OPTH SUSP	25% (Tier 3)	QL=16 ML/30 Days
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN/POLYMYXIN B 3.5GM OPTH OINTMENT	\$0 (Tier 1)	QL=7 GM/7 Days
<i>ciprofloxacin 0.3% ophth soln</i>	\$0 (Tier 1)	QL=30 ML/30 Days
<i>erythromycin 0.5% ophth ointment</i>	\$0 (Tier 1)	QL=7 GM/7 Days
<i>gentamicin 0.3% ophth soln</i>	\$0 (Tier 1)	QL=10 ML/7 Days
<i>moxifloxacin 0.5% ophth soln</i>	\$0 (Tier 1)	QL=6 ML/7 Days
NATACYN 5% OPTH SUSP	25% (Tier 3)	QL=15 ML/7 Days
NEOMYCIN/BACITRACIN/POLYMYXIN 5MG-400UNIT-10000UNIT OPTH OINTMENT	\$0 (Tier 2)	QL=7 GM/7 Days
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPTH SOLN	\$0 (Tier 2)	QL=10 ML/7 Days
<i>ofloxacin 0.3% ophth soln</i>	\$0 (Tier 1)	QL=60 ML/30 Days
<i>polymyxin b/trimethoprim 10000unit/ml-0.1% ophth soln</i>	\$0 (Tier 1)	QL=10 ML/7 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SULFACETAMIDE SODIUM 10% OPTH SOLN	\$0 (Tier 1)	QL=15 ML/7 Days
<i>tobramycin 0.3% ophth soln</i>	\$0 (Tier 1)	QL=30 ML/30 Days
TRIFLURIDINE 1% OPTH SOLN	\$0 (Tier 2)	QL=15 ML/7 Days
XDEMVIY 0.25% OPTH SOLN	25% (Tier 5)	PA QL=10 ML/42 Days
OPHTHALMIC DECONGESTANTS		
EYE DROPS ADVANCED RELIEF*	\$0 (Tier 1*)	
REDNESS RELIEF DROPS*	\$0 (Tier 1*)	
OPHTHALMIC STEROIDS		
DEXAMETHASONE PHOSPHATE 0.1% OPTH SOLN	\$0 (Tier 2)	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>	\$0 (Tier 1)	
<i>dexamethasone/neomycin/polymyxin b 0.1% ophth susp</i>	\$0 (Tier 1)	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	\$0 (Tier 2)	
<i>difluprednate 0.05% ophth susp</i>	\$0 (Tier 2)	
<i>fluorometholone 0.1% ophth susp</i>	\$0 (Tier 2)	
<i>loteprednol etabonate 0.5% ophth gel</i>	\$0 (Tier 2)	
<i>loteprednol etabonate 0.5% ophth susp</i>	\$0 (Tier 2)	
NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCC RTISONE 1% OPTH OINTMENT	\$0 (Tier 2)	
PREDNISOLONE 1% OPTH SOLN	\$0 (Tier 2)	
<i>prednisolone acetate 1% ophth susp</i>	\$0 (Tier 2)	
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPTH SOLN	\$0 (Tier 1)	
OPHTHALMICS - MISC.		
<i>atropine sulfate 1% ophth soln</i>	\$0 (Tier 2)	
<i>azelastine 0.05% ophth soln</i>	\$0 (Tier 1)	
CROMOLYN SODIUM 4% OPTH SOLN	\$0 (Tier 1)	
<i>cyclosporine 0.05% ophth susp</i>	\$0 (Tier 2)	QL=60 EA/30 Days
CYSTADROPS 0.37% OPTH SOLN	25% (Tier 5)	NDS PA QL=20 ML/28 Days
<i>diclofenac sodium 0.1% ophth soln</i>	\$0 (Tier 1)	QL=20 ML/365 Days
<i>dorzolamide 2% ophth soln</i>	\$0 (Tier 1)	
EYE ITCH RELIEF DROPS 0.025%*	\$0 (Tier 1*)	
EYE ITCH RELIEF OPTH SOLN 0.025%*	\$0 (Tier 1*)	
EYE WASH SOLN*	\$0 (Tier 1*)	
FLURBIPROFEN SODIUM 0.03% OPTH SOLN	\$0 (Tier 2)	
KETOROLAC TROMETHAMINE 0.4% OPTH SOLN	\$0 (Tier 2)	QL=20 ML/365 Days
<i>ketorolac tromethamine 0.5% ophth soln</i>	\$0 (Tier 1)	
KETOTIFEN FUMURATE OPTH SOLN 0.035%*	\$0 (Tier 1*)	
LASTACAFT SOLN 0.25%*	\$0 (Tier 2*)	
MIEBO 1.338GM/ML OPTH SOLN	25% (Tier 3)	QL=3 ML/30 Days
MURO 128 OPTH SOLN 2%*	\$0 (Tier 2*)	
MURO 128 OPTH SOLN 5%*	\$0 (Tier 1*)	
OLOPATADINE OPTH DROP 0.1%*	\$0 (Tier 1*)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OLOPATADINE OPTH SOLN 0.1%*	\$0 (Tier 1*)	
OLOPATADINE OPTH SOLN 0.2%*	\$0 (Tier 1*)	
OLOPATADINE SOLN 0.7%*	\$0 (Tier 1*)	
PATADAY OPTH SOLN 0.2%*	\$0 (Tier 1*)	
PATADAY OPTH SOLN 0.7%*	\$0 (Tier 1*)	
<i>pilocarpine 1% ophth soln</i>	\$0 (Tier 2)	
<i>pilocarpine 2% ophth soln</i>	\$0 (Tier 2)	
<i>pilocarpine 4% ophth soln</i>	\$0 (Tier 2)	
RHOPRESSA 0.02% OPTH SOLN	25% (Tier 3)	QL=5 ML/30 Days
ROCKLATAN 0.02-0.005% OPTH SOLN	25% (Tier 3)	QL=5 ML/30 Days
SOD CHLORIDE OPTH OINT 5%*	\$0 (Tier 1*)	
SODIUM CHLORIDE OPTH SOLN 5%*	\$0 (Tier 1*)	
XIIDRA 5% OPTH SOLN	25% (Tier 3)	QL=60 EA/30 Days
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost 0.01% ophth soln</i>	\$0 (Tier 2)	QL=5 ML/30 Days
<i>bimatoprost 0.03% ophth soln</i>	\$0 (Tier 2)	QL=5 ML/30 Days
<i>latanoprost 0.005% ophth soln</i>	\$0 (Tier 1)	QL=5 ML/30 Days
<i>travoprost 0.004% ophth soln</i>	\$0 (Tier 2)	QL=5 ML/30 Days
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2% otic soln</i>	\$0 (Tier 1)	
<i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>	\$0 (Tier 2)	QL=7.50 ML/7 Days
EAR DROPS FOR SWIMMERS*	\$0 (Tier 1*)	
EARWAX REMOVE DROPS 6.5% OTIC*	\$0 (Tier 1*)	
<i>fluocinolone acetone 0.01% otic soln</i>	\$0 (Tier 2)	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	\$0 (Tier 2)	
<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	\$0 (Tier 2)	
<i>ofloxacin 0.3% otic soln</i>	\$0 (Tier 1)	
PASSIVE IMMUNIZING AGENTS		
IMMUNE SERUMS		
HIZENTRA INJ*	\$0 (Tier 2*)	
OCTAGAM INJ 10GM*	\$0 (Tier 2*)	
OCTAGAM INJ 1GM*	\$0 (Tier 2*)	
OCTAGAM INJ 2.5GM*	\$0 (Tier 2*)	
OCTAGAM INJ 5GM*	\$0 (Tier 2*)	
PRIVIGEN INJ 40GM/400ML*	\$0 (Tier 2*)	
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA INJ*	\$0 (Tier 2*)	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
CUTAQUIG SOLN 1GM*	\$0 (Tier 2*)	
CUTAQUIG SOLN 2GM*	\$0 (Tier 2*)	
CUTAQUIG SOLN 4GM*	\$0 (Tier 2*)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
CUTAQUIG SOLN 8GM*	\$0 (Tier 2*)	
CUVITRU INJ*	\$0 (Tier 2*)	
GAMUNEX-C INJ 40MG/400ML*	\$0 (Tier 2*)	
HIZENTRA INJ 10GM/50ML*	\$0 (Tier 2*)	
HIZENTRA INJ 1GM/5ML*	\$0 (Tier 2*)	
HIZENTRA INJ 2GM/10ML*	\$0 (Tier 2*)	
HIZENTRA SOLN 20%*	\$0 (Tier 2*)	
OCTAGAM INJ 10/100ML*	\$0 (Tier 2*)	
OCTAGAM INJ 2GM/20ML*	\$0 (Tier 2*)	
OCTAGAM INJ 5GM/50ML*	\$0 (Tier 2*)	
XEMBIFY INJ 10G/50ML*	\$0 (Tier 2*)	
XEMBIFY INJ 1GM/5ML*	\$0 (Tier 2*)	
XEMBIFY INJ 2GM/10ML*	\$0 (Tier 2*)	
XEMBIFY INJ 4GM/20ML*	\$0 (Tier 2*)	
PHARMACEUTICAL ADJUVANTS		
SEMI SOLID VEHICLES		
PETROLATUM OINT 42%*	\$0 (Tier 2*)	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ANTIDEMENTIA AGENTS		
<i>donepezil 10mg odt</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>donepezil 10mg tab</i>	\$0 (Tier 1)	
<i>donepezil 23mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>donepezil 5mg odt</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>donepezil 5mg tab</i>	\$0 (Tier 1)	
<i>galantamine 12mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>galantamine 4mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>galantamine 8mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>galantamine hydrobromide 16mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>galantamine hydrobromide 24mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN	\$0 (Tier 2)	QL=200 ML/30 Days
<i>galantamine hydrobromide 8mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
LEQEMBI IQLIK 250MG/1.25ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=10 ML/28 Days
LEQEMBI IQLIK 360MG/1.8ML AUTO-INJECTOR	25% (Tier 5)	NDS PA QL=7.20 ML/28 Days
<i>memantine 10mg tab</i>	\$0 (Tier 1)	
<i>memantine 14mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>memantine 21mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>memantine 28mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>memantine 2mg/ml oral soln</i>	\$0 (Tier 2)	QL=300 ML/30 Days
<i>memantine 5mg tab</i>	\$0 (Tier 1)	
<i>memantine 7mg er cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>rivastigmine 1.5mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>rivastigmine 13.3mg/24hr patch</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>rivastigmine 3mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>rivastigmine 4.5mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>rivastigmine 4.6mg/24hr patch</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>rivastigmine 6mg cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>rivastigmine 9.5mg/24hr patch</i>	\$0 (Tier 2)	QL=30 EA/30 Days
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12MG TAB	25% (Tier 5)	NDS PA QL=120 EA/30 Days
AUSTEDO 6MG TAB	25% (Tier 5)	NDS PA QL=120 EA/30 Days
AUSTEDO 9MG TAB	25% (Tier 5)	NDS PA QL=120 EA/30 Days
AUSTEDO XR 12MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 18MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 24MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 30MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 36MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 42MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 48MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR 6MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK (28)	25% (Tier 5)	NDS PA QL=28 EA/28 Days
INGREZZA CAP 40MG*	\$0 (Tier 2*)	
INGREZZA CAP 60MG*	\$0 (Tier 2*)	
INGREZZA CAP 80MG*	\$0 (Tier 2*)	
<i>tetrabenazine 12.5mg tab</i>	\$0 (Tier 2)	QL=90 EA/30 Days
<i>tetrabenazine 25mg tab</i>	25% (Tier 5)	NDS QL=120 EA/30 Days
MULTIPLE SCLEROSIS AGENTS		
AVONEX 30MCG/0.5ML AUTO-INJECTOR	25% (Tier 5)	NDS QL=1 EA/28 Days
AVONEX 30MCG/0.5ML SYRINGE	25% (Tier 5)	NDS QL=1 EA/28 Days
BETASERON 0.3MG INJ	25% (Tier 5)	NDS QL=14 EA/28 Days
<i>dalfampridine 10mg er tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>dimethyl fumarate 120mg dr cap</i>	\$0 (Tier 2)	QL=14 EA/7 Days
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	\$0 (Tier 2)	QL=60 EA/180 Days
<i>dimethyl fumarate 240mg dr cap</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>fingolimod 0.5mg cap</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>glatiramer acetate 20mg/ml syringe</i>	25% (Tier 5)	NDS QL=30 ML/30 Days
<i>glatiramer acetate 40mg/ml syringe</i>	25% (Tier 5)	NDS QL=12 ML/28 Days
<i>glatopa 20mg/ml syringe</i>	25% (Tier 5)	NDS QL=30 ML/30 Days
<i>glatopa 40mg/ml syringe</i>	25% (Tier 5)	NDS QL=12 ML/28 Days
KESIMPTA 20MG/0.4ML PEN INJ	25% (Tier 5)	NDS QL=1.20 ML/28 Days
MAYZENT 0.25MG TAB	25% (Tier 5)	NDS QL=112 EA/28 Days
MAYZENT 1MG TAB	25% (Tier 5)	NDS QL=30 EA/30 Days
MAYZENT 2MG TAB	25% (Tier 5)	NDS QL=30 EA/30 Days
MAYZENT TAB STARTER PACK (12)	25% (Tier 3)	QL=12 EA/28 Days
MAYZENT TAB STARTER PACK (7)	25% (Tier 3)	QL=7 EA/28 Days
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR	25% (Tier 5)	NDS QL=1 ML/28 Days
PLEGRIDY 125MCG/0.5ML SYRINGE	25% (Tier 5)	NDS QL=1 ML/28 Days
<i>teriflunomide 14mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>teriflunomide 7mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
<i>dextromethorphan hydrobromide/quinidine sulfate</i> <i>20-10mg cap</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
LYBALVI 10-10MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LYBALVI 15-10MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LYBALVI 20-10MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
LYBALVI 5-10MG TAB	25% (Tier 5)	NDS PA_NSO QL=30 EA/30 Days
<i>pimozide 1mg tab</i>	\$0 (Tier 2)	
<i>pimozide 2mg tab</i>	\$0 (Tier 2)	
SMOKING DETERRENTS		
NICOTINE GUM 4MG ORIG*	\$0 (Tier 1*)	
NICOTINE LOZENGE 2MG MINT*	\$0 (Tier 1*)	
NICOTINE LOZENGE 4MG MINT*	\$0 (Tier 1*)	
NICOTINE MINI LOZENGE 2MG*	\$0 (Tier 1*)	
NICOTINE MINI LOZENGE 4MG*	\$0 (Tier 1*)	
NICOTINE MINT LOZENGE 2MG*	\$0 (Tier 1*)	
NICOTINE MINT LOZENGE 4MG*	\$0 (Tier 1*)	
NICOTINE PATCH 14MG/24HR*	\$0 (Tier 1*)	
NICOTINE PATCH 21MG/24HR*	\$0 (Tier 1*)	
NICOTINE PATCH 7MG/24HR*	\$0 (Tier 1*)	
NICOTINE PATCH KIT*	\$0 (Tier 2*)	
NICOTINE PATCH STEP 1*	\$0 (Tier 1*)	
NICOTINE POL MINT GUM 2MG*	\$0 (Tier 1*)	
NICOTINE POL MINT GUM 4MG*	\$0 (Tier 1*)	
NICOTINE POLACRILEX GUM 2MG*	\$0 (Tier 1*)	
NICOTINE POLACRILEX GUM 4MG*	\$0 (Tier 1*)	
NICOTINE POLACRILEX LOZENGE 2MG*	\$0 (Tier 1*)	
NICOTINE POLACRILEX LOZENGE 4MG*	\$0 (Tier 1*)	
NICOTINE TD DIS 14MG/24H*	\$0 (Tier 1*)	
NICOTINE TD STEP 3*	\$0 (Tier 1*)	
RESPIRATORY TRACT AGENTS		
ANTI-HISTAMINES		
<i>cyproheptadine 0.4mg/ml oral soln</i>	\$0 (Tier 1)	
<i>cyproheptadine 4mg tab</i>	\$0 (Tier 1)	
<i>desloratadine 5mg tab</i>	\$0 (Tier 2)	
<i>levocetirizine 5mg tab</i>	\$0 (Tier 1)	
<i>promethazine 1.25mg/ml oral soln</i>	\$0 (Tier 1)	
<i>promethazine 12.5mg tab</i>	\$0 (Tier 1)	
<i>promethazine 25mg tab</i>	\$0 (Tier 1)	
<i>promethazine 50mg tab</i>	\$0 (Tier 1)	
ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS		
ALVESCO 160MCG INHALER	25% (Tier 3)	QL=12.20 GM/30 Days
ALVESCO 80MCG INHALER	25% (Tier 3)	QL=12.20 GM/30 Days
ARNUITY ELLIPTA 100MCG POWDER INHALER	25% (Tier 3)	QL=30 EA/30 Days
ARNUITY ELLIPTA 200MCG POWDER INHALER	25% (Tier 3)	QL=30 EA/30 Days

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
ARNUITY ELLIPTA 50MCG POWDER INHALER	25% (Tier 3)	QL=30 EA/30 Days
ASMANEX 100MCG HFA INHALER	25% (Tier 3)	QL=13 GM/30 Days
ASMANEX 110MCG (30ACT) TWISTHALER	25% (Tier 3)	QL=1 EA/30 Days
ASMANEX 200MCG HFA INHALER	25% (Tier 3)	QL=13 GM/30 Days
ASMANEX 220MCG (120ACT) TWISTHALER	25% (Tier 3)	QL=1 EA/30 Days
ASMANEX 220MCG (30ACT) TWISTHALER	25% (Tier 3)	QL=1 EA/30 Days
ASMANEX 220MCG (60ACT) TWISTHALER	25% (Tier 3)	QL=1 EA/30 Days
ASMANEX 50MCG HFA INHALER	25% (Tier 3)	QL=13 GM/30 Days
<i>budesonide 0.25mg/2ml inh susp</i>	\$0 (Tier 2)	PA_BvD QL=120 ML/30 Days
<i>budesonide 0.5mg/2ml inh susp</i>	\$0 (Tier 2)	PA_BvD QL=120 ML/30 Days
<i>budesonide 1mg/2ml inh susp</i>	\$0 (Tier 2)	PA_BvD QL=120 ML/30 Days
QVAR 40MCG REDIHALER	25% (Tier 3)	QL=10.60 GM/30 Days
QVAR 80MCG REDIHALER	25% (Tier 3)	QL=21.20 GM/30 Days
ANTILEUKOTRIENES		
<i>montelukast 10mg tab</i>	\$0 (Tier 1)	
<i>montelukast 4mg chew tab</i>	\$0 (Tier 1)	
<i>montelukast 5mg chew tab</i>	\$0 (Tier 1)	
<i>zafirlukast 10mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>zafirlukast 20mg tab</i>	\$0 (Tier 2)	QL=60 EA/30 Days
BRONCHODILATORS, ANTICHOLINERGIC		
ATROVENT 17MCG HFA INHALER	25% (Tier 3)	QL=25.80 GM/30 Days
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER	25% (Tier 3)	QL=30 EA/30 Days
<i>ipratropium bromide 0.5mg/2.5ml (0.02%) neb soln</i>	\$0 (Tier 2)	PA_BvD
SPIRIVA RESPIMAT 1.25MCG/ACT INHALER	25% (Tier 3)	QL=4 GM/30 Days
BRONCHODILATORS, SYMPATHOMIMETIC		
ADVAIR 115-21MCG/ACT HFA INHALER	25% (Tier 3)	QL=12 GM/30 Days
ADVAIR 230-21MCG/ACT HFA INHALER	25% (Tier 3)	QL=12 GM/30 Days
ADVAIR 45-21MCG/ACT HFA INHALER	25% (Tier 3)	QL=12 GM/30 Days
<i>albuterol 0.63mg/3ml neb soln</i>	\$0 (Tier 1)	PA_BvD
<i>albuterol 1.25mg/3ml neb soln</i>	\$0 (Tier 1)	PA_BvD
<i>albuterol 108mcg hfa inhaler (6.7gm)</i>	\$0 (Tier 1)	QL=13.40 GM/30 Days
<i>albuterol 108mcg hfa inhaler (8.5gm)</i>	\$0 (Tier 1)	QL=17 GM/30 Days
<i>albuterol 2.5mg/3ml (0.083%) neb soln</i>	\$0 (Tier 1)	PA_BvD
<i>albuterol 2mg/5ml oral soln</i>	\$0 (Tier 1)	
<i>albuterol 5mg/ml (0.05%) neb soln</i>	\$0 (Tier 1)	PA_BvD
ANORO ELLIPTA 62.5-25MCG POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
<i>arformoterol tartrate 15mcg/2ml neb soln</i>	\$0 (Tier 2)	PA_BvD QL=120 ML/30 Days
BREO ELLIPTA 100-25MCG POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
BREO ELLIPTA 200-25MCG POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
BREO ELLIPTA 50-25MCG POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
<i>breynga 160-4.5mcg/act inhaler</i>	25% (Tier 3)	QL=10.30 GM/30 Days
<i>breynga 80-4.5mcg/act inhaler</i>	25% (Tier 3)	QL=10.30 GM/30 Days
<i>budesonide/formoterol fumarate 160-4.5mcg inhaler</i>	\$0 (Tier 2)	QL=10.20 GM/30 Days
<i>budesonide/formoterol fumarate 80-4.5mcg inhaler</i>	\$0 (Tier 2)	QL=10.20 GM/30 Days

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
COMBIVENT RESPIMAT 20-100MCG/ACT INHALER	25% (Tier 3)	QL=8 GM/30 Days
DULERA 100-5MCG INHALER	25% (Tier 3)	QL=13 GM/30 Days
DULERA 200-5MCG INHALER	25% (Tier 3)	QL=13 GM/30 Days
DULERA 50-5MCG INHALER	25% (Tier 3)	QL=13 GM/30 Days
<i>epinephrine 0.15mg/0.3ml auto-injector (2pack)</i>	\$0 (Tier 1)	QL=2 EA/15 Days
<i>epinephrine 0.3mg/0.3ml auto-injector (2pack)</i>	\$0 (Tier 1)	QL=2 EA/15 Days
FLUTICASONE FUROATE/VILANTEROL 100-25MCG/INH POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
FLUTICASONE FUROATE/VILANTEROL 200-25MCG/INH POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 100-50mcg/act powder inhaler</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 250-50mcg/act powder inhaler</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>fluticasone propionate/salmeterol 500-50mcg/act powder inhaler</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>ipratropium/albuterol 0.5-2.5mg/3ml neb soln</i>	\$0 (Tier 1)	PA BvD
STIOLTO RESPIMAT 2.5-2.5MCG/ACT INHALER	25% (Tier 3)	QL=4 GM/30 Days
STRIVERDI RESPIMAT 2.5MCG/ACT INHALER	25% (Tier 3)	QL=4 GM/30 Days
TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	25% (Tier 3)	QL=60 EA/30 Days
<i>wixela 100-50mcg powder inhaler</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>wixela 250-50mcg powder inhaler</i>	\$0 (Tier 2)	QL=60 EA/30 Days
<i>wixela 500-50mcg/act powder inhaler</i>	\$0 (Tier 2)	QL=60 EA/30 Days
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5MG TAB	25% (Tier 5)	NDS PA QL=90 EA/30 Days
ADEMPAS 1.5MG TAB	25% (Tier 5)	NDS PA QL=90 EA/30 Days
ADEMPAS 1MG TAB	25% (Tier 5)	NDS PA QL=90 EA/30 Days
ADEMPAS 2.5MG TAB	25% (Tier 5)	NDS PA QL=90 EA/30 Days
ADEMPAS 2MG TAB	25% (Tier 5)	NDS PA QL=90 EA/30 Days
<i>alyq 20mg tab</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
<i>ambrisentan 10mg tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>ambrisentan 5mg tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>bosentan 125mg tab</i>	25% (Tier 5)	NDS PA QL=60 EA/30 Days
<i>bosentan 62.5mg tab</i>	25% (Tier 5)	NDS PA QL=60 EA/30 Days
<i>macitentan 10mg tab</i>	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>sildenafil 20mg tab</i>	\$0 (Tier 2)	PA QL=360 EA/30 Days
<i>tadalafil 20mg tab (pah)</i>	\$0 (Tier 2)	PA QL=60 EA/30 Days
WINREVAIR 45MG INJ	25% (Tier 5)	NDS PA QL=1 EA/21 Days
WINREVAIR 45MG INJ (2 VIAL PACK)	25% (Tier 5)	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ	25% (Tier 5)	NDS PA QL=1 EA/21 Days
WINREVAIR 60MG INJ (2 VIAL PACK)	25% (Tier 5)	NDS PA QL=1 EA/21 Days
RESPIRATORY TRACT AGENTS, OTHER		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>acetylcysteine 200mg/ml inh soln</i>	\$0 (Tier 2)	PA_BvD
<i>acetylcysteine 400mg/4ml neb soln</i>	\$0 (Tier 2)	PA_BvD
ALYFTREK 10-50-125MG TAB	25% (Tier 5)	NDS PA QL=56 EA/28 Days
ALYFTREK 4-20-50MG TAB	25% (Tier 5)	NDS PA QL=84 EA/28 Days
BRINSUPRI 10MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
BRINSUPRI 25MG TAB	25% (Tier 5)	NDS PA QL=30 EA/30 Days
<i>cromolyn sodium 20mg/2ml neb soln</i>	\$0 (Tier 2)	PA_BvD
KALYDECO 13.4MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
KALYDECO 150MG TAB	25% (Tier 5)	NDS PA QL=60 EA/30 Days
KALYDECO 25MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
KALYDECO 5.8MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
KALYDECO 50MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
KALYDECO 75MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
<i>nintedanib 100mg cap</i>	25% (Tier 5)	NDS PA QL=60 EA/30 Days
<i>nintedanib 150mg cap</i>	25% (Tier 5)	NDS PA QL=60 EA/30 Days
OFEV 100MG CAP	25% (Tier 5)	NDS PA QL=60 EA/30 Days
OFEV 150MG CAP	25% (Tier 5)	NDS PA QL=60 EA/30 Days
ORKAMBI 125-100MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
ORKAMBI 125-100MG TAB	25% (Tier 5)	NDS PA QL=112 EA/28 Days
ORKAMBI 125-200MG TAB	25% (Tier 5)	NDS PA QL=112 EA/28 Days
ORKAMBI 188-150MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
ORKAMBI 94-75MG ORAL GRANULES	25% (Tier 5)	NDS PA QL=56 EA/28 Days
<i>pirfenidone 267mg cap</i>	\$0 (Tier 2)	PA QL=270 EA/30 Days
<i>pirfenidone 267mg tab</i>	25% (Tier 5)	NDS PA QL=270 EA/30 Days
<i>pirfenidone 801mg tab</i>	25% (Tier 5)	NDS PA QL=90 EA/30 Days
PROLASTIN-C 1000MG INJ	25% (Tier 5)	NDS PA
PULMOZYME 2.5MG/2.5ML NEB SOLN	25% (Tier 5)	NDS PA_BvD QL=150 ML/30 Days
<i>roflumilast 250mcg tab</i>	\$0 (Tier 2)	QL=28 EA/365 Days
<i>roflumilast 500mcg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
SYMDEKO TAB 4-WEEK PACK (56)	25% (Tier 5)	NDS PA QL=56 EA/28 Days
SYMDEKO TAB 50-75MG/75MG PACK (56)	25% (Tier 5)	NDS PA QL=56 EA/28 Days
THEOPHYLLINE 100MG ER TAB	\$0 (Tier 2)	
THEOPHYLLINE 200MG ER TAB	\$0 (Tier 2)	
<i>theophylline 300mg er tab</i>	\$0 (Tier 2)	
<i>theophylline 400mg er tab</i>	\$0 (Tier 2)	
<i>theophylline 450mg er tab</i>	\$0 (Tier 2)	
<i>theophylline 600mg er tab</i>	\$0 (Tier 2)	
TRIKAFTA 100-50-75MG/150MG TAB PACK (84)	25% (Tier 5)	NDS PA QL=84 EA/28 Days
TRIKAFTA 100-50-75MG/75MG ORAL GRANULES PACK (56)	25% (Tier 5)	NDS PA QL=56 EA/28 Days
TRIKAFTA 50-37.5-25MG/75MG TAB PACK (84)	25% (Tier 5)	NDS PA QL=84 EA/28 Days
TRIKAFTA 80-40-60MG/59.5MG ORAL GRANULES PACK (56)	25% (Tier 5)	NDS PA QL=56 EA/28 Days
SLEEP DISORDER AGENTS		
GABA RECEPTOR MODULATORS		

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<i>eszopiclone 1mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>eszopiclone 2mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>eszopiclone 3mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>temazepam 15mg cap</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>temazepam 30mg cap</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>zaleplon 10mg cap</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>zaleplon 5mg cap</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>zolpidem tartrate 10mg tab</i>	\$0 (Tier 1)	QL=30 EA/30 Days
<i>zolpidem tartrate 12.5mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>zolpidem tartrate 5mg tab</i>	\$0 (Tier 1)	QL=60 EA/30 Days
<i>zolpidem tartrate 6.25mg er tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
SLEEP DISORDERS, OTHER		
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP	25% (Tier 5)	NDS PA QL=30 EA/30 Days
LUMRYZ 6GM GRANULES FOR ORAL SUSP	25% (Tier 5)	NDS PA QL=30 EA/30 Days
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP	25% (Tier 5)	NDS PA QL=30 EA/30 Days
LUMRYZ 9GM GRANULES FOR ORAL SUSP	25% (Tier 5)	NDS PA QL=30 EA/30 Days
LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	25% (Tier 5)	NDS PA QL=28 EA/28 Days
<i>ramelteon 8mg tab</i>	\$0 (Tier 2)	QL=30 EA/30 Days
<i>sodium oxybate 500mg/ml oral soln</i>	25% (Tier 5)	NDS PA QL=540 ML/30 Days
SUNOSI 150MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
SUNOSI 75MG TAB	25% (Tier 3)	PA QL=30 EA/30 Days
THYROID AGENTS		
THYROID HORMONES		
ARMOUR THYROID TAB 120MG*	\$0 (Tier 2*)	
ARMOUR THYROID TAB 30MG*	\$0 (Tier 2*)	
ARMOUR THYROID TAB 60MG*	\$0 (Tier 2*)	
ARMOUR THYROID TAB 90MG*	\$0 (Tier 2*)	
NP THYROID 120MG*	\$0 (Tier 2*)	
NP THYROID 15MG*	\$0 (Tier 2*)	
NP THYROID 30MG*	\$0 (Tier 2*)	
NP THYROID 60MG*	\$0 (Tier 2*)	
NP THYROID 90MG*	\$0 (Tier 2*)	
ULCER DRUGS		
H-2 ANTAGONISTS		
ACID REDUCER TAB 10MG*	\$0 (Tier 1*)	
HEARTBURN TAB RELIEF*	\$0 (Tier 1*)	
PROTON PUMP INHIBITORS		
OMEPRazole MAGNESIUM DR CAP 20.6MG*	\$0 (Tier 1*)	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
H-2 ANTAGONISTS		
ACID REDUCER TAB 10MG*	\$0 (Tier 1*)	
FAMOTIDINE TAB 10MG*	\$0 (Tier 1*)	
PROTON PUMP INHIBITORS		
ACID REDUCER DR CAP 20.6MG*	\$0 (Tier 1*)	

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
OMEPRazole DR TAB 20MG*	\$0 (Tier 1*)	
OMEPRazole TAB 20MG*	\$0 (Tier 1*)	
OMEPRazole TAB ODT 20MG*	\$0 (Tier 1*)	
ULCER THERAPY COMBINATIONS		
ACID REDUCER CHEW COMPLETE*	\$0 (Tier 1*)	
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
CLOTRIMAZOLE VAGINAL CREAM 1%*	\$0 (Tier 1*)	
MICONAZOLE 1 KIT*	\$0 (Tier 1*)	
VAGINAL PRODUCTS		
VAGINAL ANTI-INFECTIVES		
CLOTRIMAZOLE VAGINAL CREAM 1%*	\$0 (Tier 1*)	
MICONAZOLE NITRATE VAGINAL CREAM 2%*	\$0 (Tier 1*)	
VITAMINS		
OIL SOLUBLE VITAMINS		
A-10000 CAP*	\$0 (Tier 1*)	PA
BETA CAROTEN CAP 25000UNIT*	\$0 (Tier 1*)	PA
BETA CAROTENE CAP 15MG*	\$0 (Tier 2*)	PA
BETA CAROTENE CAP 25000UNIT*	\$0 (Tier 1*)	PA
CALCIDOL SOLN 8000/ML*	\$0 (Tier 1*)	PA
CVS VITAMIN A CAP 8000 UNIT*	\$0 (Tier 1*)	PA
CVS VITAMIN E 180MG*	\$0 (Tier 1*)	PA
CVS VITAMIN E CAP 400 UNIT*	\$0 (Tier 1*)	PA
CVS VITAMIN E CAP 400UNIT*	\$0 (Tier 1*)	PA
D-VI-SOL LIQUID 400 UNIT*	\$0 (Tier 1*)	PA
D-VITE PEDIA DRO 400UNIT*	\$0 (Tier 1*)	PA
E-400 CAP 400UNIT*	\$0 (Tier 1*)	PA
E-OIL OIL 3000UNIT*	\$0 (Tier 1*)	PA
EQL VIT E CAP 400UNIT*	\$0 (Tier 1*)	PA
ERGOCALCIFEROL DROPS 8000 UNIT/ML*	\$0 (Tier 1*)	PA
ERGOCALCIFEROL SOLN 8000 UNIT/ML*	\$0 (Tier 1*)	PA
GNP VIT E CAP 400UNIT*	\$0 (Tier 1*)	PA
KP VITAMIN E CAP 100UNIT*	\$0 (Tier 1*)	PA
NAT VIT E CAP 1000UNIT*	\$0 (Tier 1*)	PA
NAT VIT E CAP 400UNIT*	\$0 (Tier 1*)	PA
PEDIA D-VITE DROPS 400UNIT*	\$0 (Tier 1*)	PA
PHYTONADIONE INJ 10MG/ML*	\$0 (Tier 1*)	
PHYTONADIONE TAB 5MG*	\$0 (Tier 1*)	
VIT E D-ALPH CAP 1000UNIT*	\$0 (Tier 1*)	PA
VIT E D-ALPH CAP 400UNIT*	\$0 (Tier 1*)	PA
VIT E/D-ALPH CAP 200UNIT*	\$0 (Tier 2*)	PA
VITAMIN A CAP 10000UNIT*	\$0 (Tier 1*)	PA
VITAMIN A CAP 3 MG*	\$0 (Tier 1*)	PA
VITAMIN A CAP 3000MCG*	\$0 (Tier 1*)	PA
VITAMIN A CAP 8000UNIT*	\$0 (Tier 1*)	PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
VITAMIN D CAP 1.25MG*	\$0 (Tier 1*)	
VITAMIN D DROP 400UNIT*	\$0 (Tier 1*)	PA
VITAMIN E CAP 180MG*	\$0 (Tier 1*)	PA
VITAMIN E CAP 1000UNIT*	\$0 (Tier 2*)	PA
VITAMIN E CAP 100UNIT*	\$0 (Tier 1*)	PA
VITAMIN E CAP 180 MG*	\$0 (Tier 1*)	PA
VITAMIN E CAP 180 MG (400 UNIT)*	\$0 (Tier 1*)	PA
VITAMIN E CAP 180MG*	\$0 (Tier 1*)	PA
VITAMIN E CAP 200UNIT*	\$0 (Tier 2*)	PA
VITAMIN E CAP 400 UNIT*	\$0 (Tier 1*)	PA
VITAMIN E CAP 400UNIT*	\$0 (Tier 1*)	PA
VITAMIN E CAP 45MG*	\$0 (Tier 1*)	PA
VITAMIN E DROPS 15UNIT/0.3ML*	\$0 (Tier 2*)	PA
VITAMIN E OIL 100UNIT*	\$0 (Tier 1*)	PA
VITAMIN E/DL-ALPHA CAP 400UNIT*	\$0 (Tier 1*)	PA
VITAMIN K1 INJ 10MG/ML*	\$0 (Tier 1*)	
WATER SOLUBLE VITAMINS		
ASCORBIC ACD TAB 1000MG*	\$0 (Tier 1*)	PA
ASCORBIC ACID LIQUID 500/5ML*	\$0 (Tier 1*)	PA
ASCORBIC ACID TAB 1000MG*	\$0 (Tier 1*)	PA
ASCORBIC ACID TAB 250 MG*	\$0 (Tier 1*)	PA
ASCORBIC ACID TAB 250MG*	\$0 (Tier 1*)	PA
ASCORBIC ACID TAB 500 MG*	\$0 (Tier 1*)	PA
ASCORBIC ACID TAB 500MG*	\$0 (Tier 1*)	PA
B-1 TAB 100MG*	\$0 (Tier 1*)	PA
B-1 TAB 250MG*	\$0 (Tier 1*)	PA
B-2 TAB 100MG*	\$0 (Tier 1*)	PA
B-2 TAB 50MG*	\$0 (Tier 1*)	PA
B6 NATURAL TAB 100MG*	\$0 (Tier 1*)	PA
B-6 TAB 100MG*	\$0 (Tier 1*)	PA
BIOTIN 5MG CAP*	\$0 (Tier 1*)	PA
BIOTIN CAP 2.5MG*	\$0 (Tier 1*)	PA
BIOTIN CAP 5MG*	\$0 (Tier 1*)	PA
BIOTIN MAX CAP 5000MCG*	\$0 (Tier 1*)	PA
BIOTIN TAB 1000MCG*	\$0 (Tier 1*)	PA
C 1000 TAB 1000MG*	\$0 (Tier 1*)	PA
C/ROSE HIPS TAB 1000MG*	\$0 (Tier 1*)	PA
C/ROSE HIPS TAB 500MG*	\$0 (Tier 1*)	PA
C/ROSE HIPS TR TAB 500MG*	\$0 (Tier 1*)	PA
C/ROSEHIP TR TAB 1000MG*	\$0 (Tier 1*)	PA
C-1000 TAB 1000MG*	\$0 (Tier 1*)	PA
C-1000/RH TAB 1000MG*	\$0 (Tier 1*)	PA
C-500 CHEW TAB 500MG*	\$0 (Tier 1*)	PA
C-500 CHW 500MG*	\$0 (Tier 1*)	PA
C-500 ER TAB 500MG*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
C-500 TAB 500MG*	\$0 (Tier 1*)	PA
C-CHEWABLE CHW 500MG*	\$0 (Tier 1*)	PA
CVS B-1 TAB 100MG*	\$0 (Tier 1*)	PA
CVS B-6 TAB 100MG*	\$0 (Tier 1*)	PA
CVS C/ROSE TAB 500MG*	\$0 (Tier 1*)	PA
CVS CHEWABLE C WITH ROSE*	\$0 (Tier 1*)	PA
CVS VITAMIN C TAB 1000MG*	\$0 (Tier 1*)	PA
ENDU-C/ROSE TAB 1000MG*	\$0 (Tier 1*)	PA
ENDU-C/ROSE TAB 500MG*	\$0 (Tier 1*)	PA
ENDUR-ACIN SR TAB 250MG*	\$0 (Tier 1*)	PA
ENDUR-ACIN SR TAB 500MG*	\$0 (Tier 1*)	PA
EQL B-6 TAB 100MG*	\$0 (Tier 1*)	PA
EQL BIOTIN CAP 5000MCG*	\$0 (Tier 1*)	PA
EQL VIT C TAB 1000MG*	\$0 (Tier 1*)	PA
FRUIT C CHW 500MG*	\$0 (Tier 1*)	PA
GNP BIOTIN CAP 5000MCG*	\$0 (Tier 1*)	PA
GNP VIT C CHW 500MG*	\$0 (Tier 1*)	PA
GNP VIT C PR TAB 500MG*	\$0 (Tier 1*)	PA
GNP VIT C TAB 1000MG*	\$0 (Tier 1*)	PA
GNP VIT C/RH TAB 1000MG*	\$0 (Tier 1*)	PA
GNP VITAMIN B-6 TAB 100MG*	\$0 (Tier 1*)	PA
GNP VITAMIN C DROPS*	\$0 (Tier 1*)	PA
GNP VITAMIN C TAB 250MG*	\$0 (Tier 1*)	PA
HALLS DEFENSE LOZ VIT C*	\$0 (Tier 1*)	PA
NIACIN CR CAP 250MG*	\$0 (Tier 1*)	PA
NIACIN CR TAB 250MG*	\$0 (Tier 1*)	PA
NIACIN CR TAB 500MG*	\$0 (Tier 1*)	PA
NIACIN ER TAB 500MG*	\$0 (Tier 1*)	PA
NIACIN TAB 100MG*	\$0 (Tier 1*)	PA
NIACIN TAB 500MG*	\$0 (Tier 1*)	PA
NIACIN TAB 500MG TR*	\$0 (Tier 1*)	PA
NIACIN TAB 50MG*	\$0 (Tier 1*)	PA
NIACIN TR CAP 250MG*	\$0 (Tier 1*)	PA
NIAVASC SR TAB 500MG*	\$0 (Tier 1*)	PA
PYRIDOXINE HCL TAB 100 MG*	\$0 (Tier 1*)	PA
PYRIDOXINE HCL TAB 25 MG*	\$0 (Tier 1*)	PA
PYRIDOXINE HCL TAB 50 MG*	\$0 (Tier 1*)	PA
PYRIDOXINE TAB 100MG*	\$0 (Tier 1*)	PA
PYRIDOXINE TAB 25MG*	\$0 (Tier 1*)	PA
RIBOFLAVIN TAB 100 MG*	\$0 (Tier 1*)	PA
RIBOFLAVIN TAB 25 MG*	\$0 (Tier 1*)	PA
RIBOFLAVIN TAB 50 MG*	\$0 (Tier 1*)	PA
SLO-NIACIN CR TAB 500MG*	\$0 (Tier 1*)	PA
SLO-NIACIN ER TAB 500MG*	\$0 (Tier 1*)	PA
SM VITAMIN C TAB 1000MG*	\$0 (Tier 1*)	PA

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DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
SUPER BIOTIN CAP 5000MCG*	\$0 (Tier 1*)	PA
TRUE VITAMIN C TAB 1000MG*	\$0 (Tier 1*)	PA
VITAMIN B1 TAB 100MG*	\$0 (Tier 1*)	PA
VITAMIN B-1 TAB 100MG*	\$0 (Tier 1*)	PA
VITAMIN B1 TAB 250MG*	\$0 (Tier 1*)	PA
VITAMIN B-1 TAB 50MG*	\$0 (Tier 1*)	PA
VITAMIN B-2 TAB 100MG*	\$0 (Tier 1*)	PA
VITAMIN B-2 TAB 25MG*	\$0 (Tier 1*)	PA
VITAMIN B-2 TAB 50MG*	\$0 (Tier 1*)	PA
VITAMIN B-6 TAB*	\$0 (Tier 1*)	PA
VITAMIN B6 TAB 100 MG*	\$0 (Tier 1*)	PA
VITAMIN B-6 TAB 100MG*	\$0 (Tier 1*)	PA
VITAMIN B-6 TAB 50MG*	\$0 (Tier 1*)	PA
VITAMIN C TAB 250MG*	\$0 (Tier 1*)	PA
VITAMIN C CHEW 500MG*	\$0 (Tier 1*)	PA
VITAMIN C CHEW TAB 250MG*	\$0 (Tier 1*)	PA
VITAMIN C CHEW TAB 500MG*	\$0 (Tier 1*)	PA
VITAMIN C CHW 500MG*	\$0 (Tier 1*)	PA
VITAMIN C LIQUID 500MG/5ML*	\$0 (Tier 1*)	PA
VITAMIN C LOZ 60MG*	\$0 (Tier 1*)	PA
VITAMIN C POW*	\$0 (Tier 1*)	PA
VITAMIN C TAB 1000MG*	\$0 (Tier 1*)	PA
VITAMIN C TAB 250MG*	\$0 (Tier 1*)	PA
VITAMIN C TAB 500MG*	\$0 (Tier 1*)	PA
VITAMIN C TR CAP 500MG*	\$0 (Tier 1*)	PA
VITAMIN C TR TAB 500MG*	\$0 (Tier 1*)	PA
VITAMIN C/ROSE HIPS TAB 1000MG*	\$0 (Tier 1*)	PA
VITAMIN C/ROSE HIPS TR TAB 100MG*	\$0 (Tier 1*)	PA
VITAMIN C/ROSE TAB 1000MG*	\$0 (Tier 1*)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

Other		<i>acarbose 100mg tab</i>	31	ACETAMINOPHEN TAB	13
8HR ARTHRITS ER TAB	12	<i>acarbose 25mg tab</i>	31	500MG	
650MG		<i>acarbose 50mg tab</i>	31	ACETAMINOPHEN TAB	13
A		ACCRUFER CAP 30MG	94	650MG	
A THRU Z SEL TAB 50+	111	ACCU CHEK AVIVA	78	ACETAMINOPHEN/COD	14
ADVA		PLUS TEST STRIPS		EINE PHOSPHATE	
A THRU Z SEL TAB	112	ACCU CHEK GUIDE	78	120-12MG/5ML ORAL	
ADVANCED		TEST STRIPS		SOLN	
A THRU Z TAB	112	ACCU-CHEK GUIDE	78	ACETAMINOPHN	13
ADVANCED		TEST STRIP		LIQUID 1000MG	
A THRU Z TAB SELECT	112	ACCU-CHEK GUIDE	78	ACETAMINOPHN TAB	13
A THRU Z TAB	112	TEST STRIPS		500MG	
ULTIMATE		ACCU-CHEK	78	<i>acetazolamide 125mg tab</i>	65
A THRU Z ULT TAB	112	SMARTVIEW TEST		<i>acetazolamide 250mg tab</i>	66
MENS		STRIPS		<i>acetazolamide 500mg er</i>	66
A-10000 CAP	134	<i>accutane 10mg cap</i>	72	<i>cap</i>	
<i>abacavir 20mg/ml oral</i>	57	<i>accutane 20mg cap</i>	72	<i>acetic acid 2% otic soln</i>	126
<i>soln</i>		<i>accutane 40mg cap</i>	72	<i>acetylcysteine 200mg/ml</i>	132
<i>abacavir 300mg tab</i>	57	ACCUTREND TEST	78	<i>inh soln</i>	
<i>abacavir/lamivudine</i>	57	STRIPS		<i>acetylcysteine 400mg/4ml</i>	132
<i>600-300mg tab</i>		<i>acebutolol 200mg cap</i>	63	<i>neb soln</i>	
ABANEU-SL TAB	93	<i>acebutolol 400mg cap</i>	63	ACID GONE SUSP	15
ABC COMPLETE TAB	112	ACETAMINOPHEN ER	13	ACID REDUCER CHEW	134
SENIOR		TAB 650MG		COMPLETE	
<i>abigale 1/0.5mg tab</i>	122	ACETAMINOPHEN LIQ	13	ACID REDUCER DR CAP	133
<i>28-day pack</i>		160/5ML		20.6MG	
<i>abigale lo 0.5/0.1mg tab</i>	122	ACETAMINOPHEN	13	ACID REDUCER TAB	133
<i>28-day pack</i>		LIQUID 160MG/5ML		10MG	
ABILIFY MAINTENA	56	ACETAMINOPHEN	13	ACID REDUCER TAB	133
300MG INJ		LIQUID 500MG/15ML		10MG	
ABILIFY MAINTENA	56	ACETAMINOPHEN	13	<i>acitretin 10mg cap</i>	75
300MG/1.5ML SYRINGE		RAPID TAB 80MG		<i>acitretin 17.5mg cap</i>	75
ABILIFY MAINTENA	56	ACETAMINOPHEN	13	<i>acitretin 25mg cap</i>	75
400MG INJ		SOLN 160/5ML		ACNE MEDICATION GEI	72
ABILIFY MAINTENA	56	ACETAMINOPHEN SUPP	13	10%	
400MG/2ML SYRINGE		120MG		ACNE MEDICATION GEI	72
<i>abiraterone acetate</i>	44	ACETAMINOPHEN SUPP	13	5%	
<i>250mg tab</i>		650MG		ACNE MEDICATION	72
<i>abirtega 250mg tab</i>	44	ACETAMINOPHEN SUSP	13	LOTION 10%	
ABRYSVO	97	160MG/5ML		ACTHIB INJ	97
120MCG/0.5ML INJ		ACETAMINOPHEN SUSP	13	ACTICAL CAP	112
<i>acamprosate calcium</i>	16	650MG		ACTIMMUNE	50
<i>333mg dr tab</i>		ACETAMINOPHEN TAB	13	2000000UNIT/0.5ML INJ	
		325MG		<i>acyclovir 200mg cap</i>	59

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>acyclovir 400mg tab</i>	59	ADYNOVATE INJ	88	ALAHIST DM LIQ	68
<i>acyclovir 40mg/ml oral susp</i>	59	3000UNIT		ALA-HIST IR TAB 2MG	36
<i>acyclovir 5% topical ointment</i>	77	ADYNOVATE INJ	89	ALAHIST PE TAB 2-7.5MG	68
<i>acyclovir 50mg/ml inj</i>	59	500UNIT		ALBA-LYBE NR LIQUID	118
<i>acyclovir 800mg tab</i>	59	ADYNOVATE INJ	89	<i>albendazole 200mg tab</i>	51
ADACEL INJ	97	750UNIT		<i>albuterol 0.63mg/3ml neb soln</i>	130
ADACEL SYRINGE	97	AERCHMBR PLS MIS	103	<i>albuterol 1.25mg/3ml neb soln</i>	130
ADAPALENE GEL 0.1%	72	LRG MASK		<i>albuterol 108mcg hfa inhaler (6.7gm)</i>	130
<i>adefovir dipivoxil 10mg tab</i>	59	AERCHMBR PLS MIS	103	<i>albuterol 108mcg hfa inhaler (8.5gm)</i>	130
ADEMPAS 0.5MG TAB	131	SM MASK		<i>albuterol 2.5mg/3ml (0.083%) neb soln</i>	130
ADEMPAS 1.5MG TAB	131	AEROCHAMBER 2GO	103	<i>albuterol 2mg/5ml oral soln</i>	130
ADEMPAS 1MG TAB	131	AEROCHAMBER LG	103	<i>albuterol 5mg/ml (0.05%) neb soln</i>	130
ADEMPAS 2.5MG TAB	131	MASK		ALCLOMETASONE	75
ADEMPAS 2MG TAB	131	AEROCHAMBER MED	103	DIPROPIONATE 0.05% TOPICAL CREAM	
ADV LANCING DEVICE	99	MASK		ALCLOMETASONE	75
ADVAIR	130	AEROCHAMBER PLUS	103	DIPROPIONATE 0.05% TOPICAL OINTMENT	
115-21MCG/ACT HFA INHALER		FLOW		ALCOHOL SWAB 1X1 (INSULIN USE)	99
ADVAIR	130	AEROCHAMBER PLUS	103	ALECENSA 150MG CAP	45
230-21MCG/ACT HFA INHALER		FLOW VU		<i>alendronate 10mg tab</i>	82
ADVAIR 45-21MCG/ACT HFA INHALER	130	AEROCHAMBER SM	103	<i>alendronate 35mg tab</i>	82
ADVANTAGE ORAL	107	MASK		<i>alendronate 70mg tab</i>	82
ELECTROLYTE SOLN		AEROCHAMBR PLUS	103	<i>alfuzosin 10mg er tab</i>	88
ADVATE INJ	88	AEROVENT PLUS	103	ALHEMO INJ	89
ADVOCATE LANCING DEVICE	99	HOLDING CHAMBER		150MG/1.5ML	
ADVOCATE REDI-CODE TEST STRIPS	78	AFSTYLA INJ	89	ALHEMO INJ	89
ADVOCATE SAFETY LANCETS	99	AFSTYLA KIT 1500UNIT	89	300MG/3ML	
ADVOCATE TEST STRIP	78	AFSTYLA KIT 2500UNIT	89	ALHEMO INJ	89
ADYNOVATE INJ	88	AGAMATRIX JAZZ TEST STRIPS	78	60MG/1.5ML	
1000UNIT		AGAMATRIX PRESTO TEST STRIPS	78	<i>aliskiren 150mg tab</i>	42
ADYNOVATE INJ	88	AGAMATRIX TEST STRIPS	78	<i>aliskiren 300mg tab</i>	42
1500UNIT		AIMOVIG 140MG/ML	103	ALL DAY ALLERGY	36
ADYNOVATE INJ	88	AUTO-INJECTOR		CHILDRENS SOLN	
2000UNIT		AIMOVIG 70MG/ML	103	1MG/ML	
ADYNOVATE INJ	88	AUTO-INJECTOR			
250UNIT		AKEEGA 500-100MG TAB	44		
		TAB			
		AKEEGA 500-50MG TAB	44		
		ALAHIST CF TAB	68		
		10-2-20			

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ALL DAY ALLERGY SOLN 5MG/5ML	36	<i>allopurinol 100mg tab</i>	88	ALUNBRIG 90MG TAB	45
ALL DAY ALLERGY TAB 10MG	36	<i>allopurinol 300mg tab</i>	88	ALUNBRIG TAB	45
ALL DAY ALLERGY TAB 5-120MG	68	<i>alosetron 0.5mg tab</i>	86	INITIATION PACK (30)	
ALL DAY PAIN RELIEF TAB 220MG	11	<i>alosetron 1mg tab</i>	86	ALVESCO 160MCG	129
ALL DAY PAIN TAB 220MG	11	ALPHANATE INJ	89	INHALER	
ALLERGY CHILD SOLN 5MG/5ML	36	ALPHANATE INJ	89	ALVESCO 80MCG	129
ALLERGY CHILDRENS LIQUID 12.5/5ML	36	1000UNIT		INHALER	
ALLERGY CHILDRENS SOLN 1MG/ML	36	ALPHANATE INJ	89	<i>alyacen 1/35 tab 28-day pack</i>	119
ALLERGY D TAB 5-120MG	68	2000UNIT		ALYFTREK	132
ALLERGY MULTI SYMPTOM TAB	68	ALPHANATE INJ 250 UNIT	89	10-50-125MG TAB	
ALLERGY RELIEF CAP 25MG	36	ALPHANINE SD INJ	89	ALYFTREK 4-20-50MG TAB	132
ALLERGY RELIEF CHILDRENS 12.5MG/5ML	36	ALPHANINE SD INJ	89	<i>alyq 20mg tab</i>	131
ALLERGY RELIEF D-12 TAB 5-120MG	68	1500UNIT		<i>amantadine 100mg cap</i>	51
ALLERGY RELIEF SOLN 1MG/ML	36	ALPHANINE SD INJ	89	<i>amantadine 10mg/ml oral soln</i>	51
ALLERGY RELIEF SOLN 5MG/5ML	36	500UNIT		<i>ambrisentan 10mg tab</i>	131
ALLERGY RELIEF TAB 10MG	37	<i>alprazolam 0.25mg tab</i>	17	<i>ambrisentan 5mg tab</i>	131
ALLERGY RELIEF TAB 180MG	37	<i>alprazolam 0.5mg tab</i>	17	<i>amikacin 250mg/ml inj</i>	18
ALLERGY RELIEF TAB 25MG	36	<i>alprazolam 1mg tab</i>	17	<i>amiloride 5mg tab</i>	66
ALLERGY RELIEF TAB D-24	68	<i>alprazolam 2mg tab</i>	17	AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB	66
ALLERGY RELIEF-D TAB 10-240MG	68	ALPROLIX INJ	89	<i>amiodarone 100mg tab</i>	62
ALL-NITE COLD AND FLU LIQUID	68	ALPROLIX INJ	89	<i>amiodarone 200mg tab</i>	62
		2000UNIT		<i>amiodarone 400mg tab</i>	62
		ALPROLIX INJ 250UNIT	89	<i>amitriptyline 100mg tab</i>	30
		ALPROLIX INJ	89	<i>amitriptyline 10mg tab</i>	30
		3000UNIT		<i>amitriptyline 150mg tab</i>	30
		ALPROLIX INJ	89	<i>amitriptyline 25mg tab</i>	30
		4000UNIT		<i>amitriptyline 50mg tab</i>	30
		ALPROLIX INJ 500UNIT	89	<i>amitriptyline 75mg tab</i>	30
		<i>altavera tab 28-day pack</i>	119	<i>amlodipine 10mg tab</i>	64
		ALTUVIIIIO INJ 1000UNIT	89	<i>amlodipine 2.5mg tab</i>	64
		ALTUVIIIIO INJ 2000UNIT	89	<i>amlodipine 5mg tab</i>	64
		ALTUVIIIIO INJ 250 UNIT	89	<i>amlodipine/benazepril 10-20mg cap</i>	40
		ALTUVIIIIO INJ 3000UNIT	89	<i>amlodipine/benazepril 10-40mg cap</i>	40
		ALTUVIIIIO INJ 4000UNIT	89	<i>amlodipine/benazepril 2.5-10mg cap</i>	40
		ALTUVIIIIO INJ 500UNIT	89	<i>amlodipine/benazepril 5-10mg cap</i>	40
		ALUMINUM	15		
		HYDROXIDE GEL SUSP			
		ALUMINUM/MAGNESIUM/SIMETHICONE	15		
		ALUNBRIG 180MG TAB	45		
		ALUNBRIG 30MG TAB	45		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>amlodipine/benazepril</i>	40	<i>amnesteam 10mg cap</i>	72	<i>amphetamine/dextroamph</i>	10
<i>5-20mg cap</i>		<i>amnesteam 20mg cap</i>	72	<i>etamine 10mg tab</i>	
<i>amlodipine/benazepril</i>	40	<i>amnesteam 30mg cap</i>	72	<i>amphetamine/dextroamph</i>	10
<i>5-40mg cap</i>		<i>amnesteam 40mg cap</i>	72	<i>etamine 12.5mg tab</i>	
<i>amlodipine/hydrochloroth</i>	40	<i>amoxapine 100mg tab</i>	30	<i>amphetamine/dextroamph</i>	10
<i>iazide/olmesartan</i>		<i>amoxapine 150mg tab</i>	30	<i>etamine 15mg er cap</i>	
<i>medoxomil 10-12.5-40mg</i>		<i>amoxapine 25mg tab</i>	30	<i>amphetamine/dextroamph</i>	10
<i>tab</i>		<i>amoxapine 50mg tab</i>	30	<i>etamine 15mg tab</i>	
<i>amlodipine/hydrochloroth</i>	40	AMOXICILLIN 125MG	21	<i>amphetamine/dextroamph</i>	10
<i>iazide/olmesartan</i>		CHEW TAB		<i>etamine 20mg er cap</i>	
<i>medoxomil 10-25-40mg</i>		<i>amoxicillin 250mg cap</i>	21	<i>amphetamine/dextroamph</i>	10
<i>tab</i>		AMOXICILLIN 250MG	21	<i>etamine 20mg tab</i>	
<i>amlodipine/hydrochloroth</i>	40	CHEW TAB		<i>amphetamine/dextroamph</i>	10
<i>iazide/olmesartan</i>		<i>amoxicillin 25mg/ml oral</i>	21	<i>etamine 25mg er cap</i>	
<i>medoxomil 5-12.5-20mg</i>		<i>susp</i>		<i>amphetamine/dextroamph</i>	10
<i>tab</i>		<i>amoxicillin 40mg/ml oral</i>	21	<i>etamine 30mg er cap</i>	
<i>amlodipine/hydrochloroth</i>	40	<i>susp</i>		<i>amphetamine/dextroamph</i>	10
<i>iazide/olmesartan</i>		<i>amoxicillin 500mg cap</i>	21	<i>etamine 30mg tab</i>	
<i>medoxomil 5-12.5-40mg</i>		<i>amoxicillin 500mg tab</i>	21	<i>amphetamine/dextroamph</i>	10
<i>tab</i>		<i>amoxicillin 50mg/ml oral</i>	21	<i>etamine 5mg er cap</i>	
<i>amlodipine/hydrochloroth</i>	40	<i>susp</i>		<i>amphetamine/dextroamph</i>	10
<i>iazide/olmesartan</i>		<i>amoxicillin 80mg/ml oral</i>	21	<i>etamine 5mg tab</i>	
<i>medoxomil 5-25-40mg</i>		<i>susp</i>		<i>amphetamine/dextroamph</i>	10
<i>tab</i>		<i>amoxicillin 875mg tab</i>	21	<i>etamine 7.5mg tab</i>	
<i>amlodipine/olmesartan</i>	40	<i>amoxicillin/clavulanate</i>	21	AMPHOTERICIN B	35
<i>medoxomil 10-20mg tab</i>		<i>250-125mg tab</i>		50MG INJ	
<i>amlodipine/olmesartan</i>	40	<i>amoxicillin/clavulanate</i>	21	<i>amphotericin b liposomal</i>	35
<i>medoxomil 10-40mg tab</i>		<i>500-125mg tab</i>		<i>50mg inj</i>	
<i>amlodipine/olmesartan</i>	40	<i>amoxicillin/clavulanate</i>	21	<i>ampicillin 100mg/ml inj</i>	21
<i>medoxomil 5-20mg tab</i>		<i>875-125mg tab</i>		<i>ampicillin 1gm inj</i>	21
<i>amlodipine/olmesartan</i>	40	<i>amoxicillin/k clavulanate</i>	21	<i>ampicillin 2gm inj</i>	21
<i>medoxomil 5-40mg tab</i>		<i>200-28.5mg/5ml oral</i>		<i>ampicillin 500mg cap</i>	21
<i>amlodipine/valsartan</i>	40	<i>susp</i>		<i>ampicillin/sulbactam</i>	21
<i>10-160mg tab</i>		<i>amoxicillin/k clavulanate</i>	21	<i>1000-500mg inj</i>	
<i>amlodipine/valsartan</i>	40	<i>250-62.5mg/5ml oral</i>		<i>ampicillin/sulbactam</i>	21
<i>10-320mg tab</i>		<i>susp</i>		<i>100-50mg/ml inj</i>	
<i>amlodipine/valsartan</i>	40	<i>amoxicillin/k clavulanate</i>	21	<i>ampicillin/sulbactam</i>	21
<i>5-160mg tab</i>		<i>400-57mg/5ml oral susp</i>		<i>2000-1000mg inj</i>	
<i>amlodipine/valsartan</i>	40	<i>amoxicillin/k clavulanate</i>	21	<i>anagrelide 0.5mg cap</i>	22
<i>5-320mg tab</i>		<i>600-42.9mg/5ml oral</i>		<i>anagrelide 1mg cap</i>	22
<i>ammonium lactate 12%</i>	77	<i>susp</i>		<i>anastrozole 1mg tab</i>	44
<i>topical cream</i>		<i>amphetamine/dextroamph</i>	10	ANIMAL CHEWS CHW	116
<i>ammonium lactate 12%</i>	77	<i>etamine 10mg er cap</i>		ANLIDO 24 PAD 4%	77
<i>topical lotion</i>					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ANORO ELLIPTA 62.5-25MCG POWDER INHALER	130	ARANELLE TAB 28-DAY PACK	119	ARMOUR THYROID TAB 30MG	133
ANTACID CHEW 500MG	15	ARANESP INJ 100MCG	92	ARMOUR THYROID TAB 60MG	133
ANTACID CHEW 750MG	16	ARANESP INJ 150MCG	92	ARMOUR THYROID TAB 90MG	133
ANTACID CHEW TAB 1000MG	16	ARANESP INJ 200MCG	92	ARNUITY ELLIPTA 100MCG POWDER INHALER	129
ANTACID CHEW TAB 750MG	16	ARANESP INJ 25MCG	92	ARNUITY ELLIPTA 200MCG POWDER INHALER	129
ANTACID MAXIMUM STRENGTH SUSP	15	ARANESP INJ 300MCG	92	ARNUITY ELLIPTA 50MCG POWDER INHALER	130
ANTACID MINT SUSP	15	ARANESP INJ 40MCG	92	ARTHROITIS PAIN GEL 1% 74	
ANTACID REGULAR STRENGTH SUSP	15	ARANESP INJ 500MCG	92	ARTIFICIAL TEARS SOLN 0.5-0.6%	123
ANTACID/ANTIGAS SUSP	15	ARANESP INJ 60MCG	92	ASCORBIC ACID TAB 1000MG	135
ANTACIDE/SIMETHICON E SUSP	15	ARCALYST 220MG INJ	60	ASCORBIC ACID LIQUID 500/5ML	135
ANTI-DIARRHEAL LIQUID 1MG/7.5	34	AREXVY 120MCG/0.5ML INJ	97	ASCORBIC ACID TAB 1000MG	135
ANTI-DIARRHEAL TAB 2MG	34	<i>arformoterol tartrate 15mcg/2ml neb soln</i>	130	ASCORBIC ACID TAB 250 MG	135
ANTIFUNGAL CREAM 2%	74	ARIKAYCE 590MG/8.4ML INH SUSP	18	ASCORBIC ACID TAB 250MG	135
ANTIFUNGAL POWDER 2%	74	<i>aripiprazole 10mg odt</i>	56	ASCORBIC ACID TAB 500 MG	135
APATATE FORTE LIQUID	112	<i>aripiprazole 10mg tab</i>	56	ASCORBIC ACID TAB 500MG	135
APETEX ELIXIR	110	<i>aripiprazole 15mg odt</i>	56	<i>asenapine 10mg sl tab</i>	54
APETIGEN ELIXIR	110	<i>aripiprazole 15mg tab</i>	56	<i>asenapine 2.5mg sl tab</i>	54
APETIGEN PLUS SOLN	111	<i>aripiprazole 1mg/ml oral soln</i>	56	<i>asenapine 5mg sl tab</i>	54
APETIGEN-PLUS SOLN	111	<i>aripiprazole 20mg tab</i>	56	<i>ashlyna tab 91-day pack</i>	119
APRACLONIDINE 0.5% OPHTH SOLN	124	<i>aripiprazole 2mg tab</i>	56	ASMANEX 100MCG HFA INHALER	130
<i>aprepitant 125mg cap</i>	34	<i>aripiprazole 30mg tab</i>	56	ASMANEX 110MCG (30ACT) TWISTHALER	130
<i>aprepitant 125mg/80mg cap therapy pack (3)</i>	35	<i>aripiprazole 5mg tab</i>	56	ASMANEX 200MCG HFA INHALER	130
<i>aprepitant 40mg cap</i>	35	ARISTADA 56		ASMANEX 220MCG (120ACT) TWISTHALER	130
<i>aprepitant 80mg cap</i>	35	ARISTADA 1064MG/3.9ML SYRINGE			
<i>apri tab 28-day pack</i>	119	ARISTADA SYRINGE			
APRODINE TAB 2.5-60MG	68	ARISTADA 441MG/1.6ML SYRINGE			
APTIVUS 250MG CAP	57	ARISTADA 662MG/2.4ML SYRINGE			
		ARISTADA 882MG/3.2ML SYRINGE			
		ARISTADA INITIO			
		675MG/2.4ML SYRINGE			
		<i>armodafinil 150mg tab</i>	10		
		<i>armodafinil 200mg tab</i>	10		
		<i>armodafinil 250mg tab</i>	10		
		<i>armodafinil 50mg tab</i>	10		
		ARMOUR THYROID TAB 120MG	133		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ASMANEX 220MCG (30ACT) TWISTHALER	130	<i>atazanavir 150mg cap</i>	57	AUSTEDO 12MG TAB	128
ASMANEX 220MCG (60ACT) TWISTHALER	130	<i>atazanavir 200mg cap</i>	57	AUSTEDO 6MG TAB	128
ASMANEX 50MCG HFA INHALER	130	<i>atazanavir 300mg cap</i>	57	AUSTEDO 9MG TAB	128
ASPIRIN ADULT TAB 81MG	13	<i>atenolol 100mg tab</i>	63	AUSTEDO XR 12MG TAB	128
ASPIRIN CHEW TAB 81MG	13	<i>atenolol 25mg tab</i>	63	AUSTEDO XR 18MG TAB	128
ASPIRIN EC TAB 81MG	13	<i>atenolol 50mg tab</i>	63	AUSTEDO XR 24MG TAB	128
ASPIRIN LOW TAB 81MG	13	<i>atenolol/chlorthalidone 100-25mg tab</i>	40	AUSTEDO XR 30MG TAB	128
ASPIRIN LOW DOSE CHEW TAB 81MG	13	<i>atenolol/chlorthalidone 50-25mg tab</i>	40	AUSTEDO XR 36MG TAB	128
ASPIRIN LOW DOSE EC TAB 81MG	13	ATHLETE FOOT CREAM 1%	74	AUSTEDO XR 42MG TAB	128
ASPIRIN LOW TAB 81MG	13	ATHLETES FOOT POWDER SPRAY 2%	74	AUSTEDO XR 48MG TAB	128
ASPIRIN REGIMEN TAB 81MG	13	<i>atomoxetine 100mg cap</i>	10	AUSTEDO XR 6MG TAB	128
ASPIRIN TAB 325MG	13	<i>atomoxetine 10mg cap</i>	10	AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK (28)	100
<i>aspirin/dipyridamole 25-200mg er cap</i>	22	<i>atomoxetine 18mg cap</i>	10	AUTOLET LANC MIS DEVICE	100
ASSURE TES PLATINUM	78	<i>atomoxetine 25mg cap</i>	10	AUTOLET LANCING DEVICE	100
ASSURE 4 TEST STRIPS	78	<i>atomoxetine 40mg cap</i>	10	AUTOLET LITE LANCING DEVICE	100
ASSURE COMFORT LANCETS	100	<i>atomoxetine 60mg cap</i>	10	AUVELITY 105-45MG ER TAB	27
ASSURE LANCETS 28G	100	<i>atomoxetine 80mg cap</i>	10	<i>aviane tab 28-day pack</i>	119
ASSURE PLATINUM TEST STRIPS	78	<i>atorvastatin 10mg tab</i>	38	AVMAPKI/FAKZYNJA CO-PACK (66)	45
ASSURE PRISM MULTI TEST STRIPS	78	<i>atorvastatin 20mg tab</i>	38	AVONEX 30MCG/0.5ML AUTO-INJECTOR	128
ASSURE PRISM TEST STRIPS	78	<i>atorvastatin 40mg tab</i>	38	AVONEX 30MCG/0.5ML SYRINGE	128
ASSURE TITAN TEST STRIPS	79	<i>atorvastatin 80mg tab</i>	38	AVTOZMA 162MG/0.9ML AUTO-INJECTOR	60
ASTAGRAF XL CAP 0.5MG	110	<i>atovaquone 750mg/5ml oral susp</i>	51	AVTOZMA 162MG/0.9ML SYRINGE	60
ASTAGRAF XL CAP 1MG	110	<i>atovaquone/proguanil 250-100mg tab</i>	51	AYVAKIT 100MG TAB	50
ASTAGRAF XL CAP 5MG	110	<i>atovaquone/proguanil 62.5-25mg tab</i>	51	AYVAKIT 200MG TAB	50
		<i>atropine sulfate 1% ophth soln</i>	125	AYVAKIT 25MG TAB	50
		<i>atropine sulfate/diphenoxylate 0.025-2.5mg tab</i>	86	AYVAKIT 300MG TAB	50
		ATROVENT 17MCG HFA INHALER	130	AYVAKIT 50MG TAB	50
		ATTRUBY 356MG TAB	65	<i>azathioprine 50mg tab</i>	96
		<i>aubra tab 28-day pack</i>	119	AZATHIOPRINE TAB 100MG	110
		AUGTYRO 160MG CAP	45	AZATHIOPRINE TAB 75MG	110
		AUGTYRO 40MG CAP	45		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>azelaic acid 15% topical gel</i>	78	B-12 TAB 500MCG	91	<i>benazepril 10mg tab</i>	38
<i>azelastine 0.05% ophth soln</i>	125	B-12 TAB 50MCG	91	<i>benazepril 20mg tab</i>	38
<i>azelastine 0.1% (137mcg/act) nasal inhaler</i>	117	B-12 TR TAB 1000MCG	91	<i>benazepril 40mg tab</i>	38
<i>azithromycin 20mg/ml oral susp</i>	22	B-2 TAB 100MG	135	<i>benazepril 5mg tab</i>	38
<i>azithromycin 250mg tab</i>	22	B-2 TAB 50MG	135	<i>benazepril/hydrochlorothiazide 10-12.5mg tab</i>	40
<i>azithromycin 250mg tab pack (6)</i>	22	B6 NATURAL TAB 100MG	135	<i>benazepril/hydrochlorothiazide 20-12.5mg tab</i>	40
<i>azithromycin 40mg/ml oral susp</i>	22	B-6 TAB 100MG	135	<i>benazepril/hydrochlorothiazide 20-25mg tab</i>	40
<i>azithromycin 500mg inj</i>	22	BACITRACIN OINT 500/GM	73	<i>benazepril/hydrochlorothiazide 5-6.25mg tab</i>	40
<i>azithromycin 500mg tab pack (3)</i>	22	BACITRACIN OINT 500UNIT/GM	73	BENEFIX INJ 1000UNIT	89
<i>azithromycin 600mg tab</i>	22	BACITRACIN ZINC OINT 500/GM	73	BENEFIX INJ 2000UNIT	89
<i>aztreonam 1gm inj</i>	18	BACITRACIN/POLYMYX IN B 3.5GM OPHTH OINTMENT	124	BENEFIX INJ 250UNIT	89
<i>aztreonam 2gm inj</i>	18	<i>baclofen 10mg tab</i>	57	BENEFIX INJ 3000UNIT	89
<i>azurette tab 28-day pack</i>	119	<i>baclofen 20mg tab</i>	57	BENEFIX INJ 500UNIT	89
B		<i>baclofen 5mg tab</i>	57	BENLYSTA 200MG/ML	60
B COMPLEX CAP	110	BACMIN TAB	112	AUTO-INJECTOR	
B COMPLEX TAB	110	BALANCE B-50 TAB	110	BENLYSTA 200MG/ML	60
B COMPLEX TAB	110	<i>balsalazide disodium 750mg cap</i>	98	SYRINGE	
B COMPLEX TAB	110	BALVERSA 3MG TAB	45	BENZONATATE CAP 100MG	68
B COMPLEX TAB	110	BALVERSA 4MG TAB	45	BENZONATATE CAP 200MG	68
B COMPLEX VITAMIN CAP	110	BALVERSA 5MG TAB	45	BENZONATATE CAP 100MG	68
B COMPLEX/VITAMIN C CAP	110	BANOPHEN CAP 25MG	36	BENZONATATE CAP 200MG	68
B-1 TAB 100MG	135	BANOPHEN CAP 50MG	36	BENZOYL PEROXIDE GEL 10%	72
B-1 TAB 250MG	135	BAQSIMI 3MG/DOSE	31	BENZOYL PEROXIDE GEL 2.5%	72
B-12 DOTS TAB 500MCG	91	NASAL POWDER		BENZOYL PEROXIDE GEL 5%	72
B12 LIQUID 1000MCG/15ML	91	BAYER BREEZE 2 TEST DISC	79	BENZOYL PEROXIDE LIQUID WASH 10%	73
B-12 SLOW RELEASE TAB	91	BAYER CONTOUR NEXT TEST STRIPS	79	BENZOYL PEROXIDE LIQUID WASH 5%	73
B-12 SUB 2500MCG	91	BAYER CONTOUR TEST STRIPS	79	BENZOYL PEROXIDE WASH 10%	73
B-12 TAB 1000 CR	91	BCG LIVE TICE STRAIN 50MG INJ	97	BENZOYL PEROXIDE WASH 5%	73
B-12 TAB 1000MCG	91	B-COMPLEX CAP	110		
B-12 TAB 100MCG	91	B-COMPLEX TAB	110		
B-12 TAB 2000MCG	91	B-COMPLEX TAB	110		
		B-COMPLEX/C TAB	110		
		B-COMPLEX-C CAP	110		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>benztropine mesylate</i>	51	<i>bethanechol chloride</i>	87	<i>bismuth</i>	87
<i>0.5mg tab</i>		<i>25mg tab</i>		<i>subcitrate/metronidazole/</i>	
<i>benztropine mesylate 1mg</i>	51	<i>bethanechol chloride</i>	87	<i>tetracycline</i>	
<i>tab</i>		<i>50mg tab</i>		<i>140-125-125mg cap</i>	
<i>benztropine mesylate 2mg</i>	51	<i>bethanechol chloride 5mg</i>	87	<i>bisoprolol fumarate 10mg</i>	63
<i>tab</i>		<i>tab</i>		<i>tab</i>	
BESREMI	50	BETHKIS NEB SOLN	11	<i>bisoprolol fumarate 5mg</i>	63
500MCG/0.5ML PEN INJ		300/4ML		<i>tab</i>	
BESREMI 500MCG/ML	50	<i>bexarotene 1% topical gel</i>	74	<i>bisoprolol</i>	41
SYRINGE		<i>bexarotene 75mg cap</i>	50	<i>fumarate/hydrochlorothia</i>	
BETA CAROTEN CAP	134	BEXSERO SYRINGE	97	<i>zide 10-6.25mg tab</i>	
25000UNT		<i>bicalutamide 50mg tab</i>	44	<i>bisoprolol</i>	41
BETA CAROTENE CAP	134	BICILLIN L-A	21	<i>fumarate/hydrochlorothia</i>	
15MG		1200000UNIT/2ML		<i>zide 2.5-6.25mg tab</i>	
BETA CAROTENE CAP	134	SYRINGE		<i>bisoprolol</i>	41
25000UNIT		BICILLIN L-A	21	<i>fumarate/hydrochlorothia</i>	
<i>betamethasone 0.05%</i>	75	2400000UNIT/4ML		<i>zide 5-6.25mg tab</i>	
<i>aug topical cream</i>		SYRINGE		<i>blisovi 21 fe tab 1.5/30</i>	119
<i>betamethasone 0.05%</i>	75	BICILLIN L-A	21	<i>28-day pack</i>	
<i>aug topical lotion</i>		600000UNIT/ML		BLOOD GLUCOSE TEST	79
<i>betamethasone 0.05%</i>	75	SYRINGE		STRIPS	
<i>topical cream</i>		BIKTARVY 30-120-15MG	57	BLUE GEL 2%	73
<i>betamethasone 0.05%</i>	75	TAB		BLULINK GLUCOSE	79
<i>topical lotion</i>		BIKTARVY 50-200-25MG	57	TEST STRIP	
<i>betamethasone 0.1%</i>	75	TAB		BLULINK TEST STRIPS	79
<i>topical cream</i>		<i>bimatoprost 0.01% ophth</i>	126	BOOSTRIX SYRINGE	97
BETAMETHASONE 0.1%	75	<i>soln</i>		<i>bosentan 125mg tab</i>	131
TOPICAL LOTION		<i>bimatoprost 0.03% ophth</i>	126	<i>bosentan 62.5mg tab</i>	131
<i>betamethasone</i>	75	<i>soln</i>		BOSULIF 100MG CAP	45
<i>dipropionate 0.05% aug</i>		BIOCAL CAP	112	BOSULIF 50MG CAP	45
<i>topical ointment</i>		BIOPETIT LIQUID	110	<i>bosutinib 100mg tab</i>	45
<i>betamethasone</i>	75	BIOTIN 5MG CAP	135	<i>bosutinib 400mg tab</i>	45
<i>dipropionate 0.05%</i>		BIOTIN CAP 2.5MG	135	<i>bosutinib 500mg tab</i>	45
<i>topical ointment</i>		BIOTIN CAP 2.5MG	135	BPROTECTED MULTI	112
<i>betamethasone valerate</i>	75	BIOTIN CAP 5MG	135	VITAMIN LIQUID	
<i>0.1% topical ointment</i>		BIOTIN MAX CAP	135	BRAFTOVI 75MG CAP	45
BETASERON 0.3MG INJ	128	5000MCG		BREO ELLIPTA	130
BETAXOLOL 0.5%	124	BIOTIN TAB 1000MCG	135	100-25MCG POWDER	
OPHTH SOLN		BISACODYL DR TAB	99	INHALER	
<i>betaxolol 10mg tab</i>	63	5MG		BREO ELLIPTA	130
<i>betaxolol 20mg tab</i>	63	BISACODYL SUPP 10MG	99	200-25MCG POWDER	
<i>bethanechol chloride</i>	87	BISMUTH CHEW 262MG	34	INHALER	
<i>10mg tab</i>					

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ALPHABETICAL LISTING OF DRUGS

BREO ELLIPTA	130	BUDESONIDE SUSP	117	<i>bupropion sr (12hr)</i>	28
50-25MCG POWDER		32MCG		200mg tab	
INHALER		<i>budesonide/formoterol</i>	130	<i>bupropion xl (24hr)</i>	28
<i>breyna 160-4.5mcg/act</i>	130	<i>fumarate 160-4.5mcg</i>		150mg tab	
<i>inhaler</i>		<i>inhaler</i>		<i>bupropion xl (24hr)</i>	28
<i>breyna 80-4.5mcg/act</i>	130	<i>budesonide/formoterol</i>	130	300mg tab	
<i>inhaler</i>		<i>fumarate 80-4.5mcg</i>		<i>buspirone 10mg tab</i>	17
<i>brimonidine tartrate</i>	124	<i>inhaler</i>		<i>buspirone 15mg tab</i>	17
0.1% ophth soln		<i>bumetanide 0.25mg/ml inj</i>	66	<i>buspirone 30mg tab</i>	17
<i>brimonidine tartrate</i>	124	<i>bumetanide 0.5mg tab</i>	66	<i>buspirone 5mg tab</i>	17
0.15% ophth soln		<i>bumetanide 1mg tab</i>	66	<i>buspirone 7.5mg tab</i>	17
<i>brimonidine tartrate</i>	124	<i>bumetanide 2mg tab</i>	66	C	
0.2% ophth soln		<i>buprenorphine 10mcg/hr</i>	13	C 1000 TAB 1000MG	135
<i>brimonidine</i>	124	<i>weekly patch</i>		C COMPLEX TAB	111
<i>tartrate/timolol maleate</i>		<i>buprenorphine 15mcg/hr</i>	13	C/ROSE HIPS TAB	135
0.2-0.5% ophth soln		<i>weekly patch</i>		1000MG	
BRINSUPRI 10MG TAB	132	<i>buprenorphine 20mcg/hr</i>	13	C/ROSE HIPS TAB	135
BRINSUPRI 25MG TAB	132	<i>weekly patch</i>		500MG	
<i>brivaracetam 100mg tab</i>	24	<i>buprenorphine 2mg sl tab</i>	16	C/ROSE HIPS TR TAB	135
<i>brivaracetam 10mg tab</i>	24	<i>buprenorphine 5mcg/hr</i>	13	500MG	
<i>brivaracetam 10mg/ml</i>	24	<i>weekly patch</i>		C/ROSEHIP TR TAB	135
<i>oral soln</i>		<i>buprenorphine 7.5mcg/hr</i>	13	1000MG	
<i>brivaracetam 25mg tab</i>	24	<i>weekly patch</i>		C-1000 TAB 1000MG	135
<i>brivaracetam 50mg tab</i>	24	<i>buprenorphine 8mg sl tab</i>	16	C-1000/RH TAB 1000MG	135
<i>brivaracetam 75mg tab</i>	24	<i>buprenorphine/naloxone</i>	16	C-500 CHEW TAB	135
BROM/PSE/DM SYRUP	68	12-3mg sl film		500MG	
BROM/PSE/DM SYRUP	69	<i>buprenorphine/naloxone</i>	16	C-500 CHW 500MG	135
2-30-10		2-0.5mg sl film		C-500 ER TAB 500MG	135
<i>bromocriptine 2.5mg tab</i>	51	<i>buprenorphine/naloxone</i>	16	C-500 TAB 500MG	136
<i>bromocriptine 5mg cap</i>	51	2-0.5mg sl tab		CA CIT/VIT D TAB	104
BROMPHEN/PSE/DM	69	<i>buprenorphine/naloxone</i>	16	315MG-200UNITS	
SYRUP 2-30-10		4-1mg sl film		CA CIT/VIT D TAB	104
BROMPHEN/PSEUDOEP	69	<i>buprenorphine/naloxone</i>	16	315MG-250UNITS	
HEDRINE/DEXTROMET		8-2mg sl film		CA CITRATE +	108
HORPHAN SYRUP		<i>buprenorphine/naloxone</i>	16	MAGNESIUM TAB	
BRUKINSA 160MG TAB	45	8-2mg sl tab		<i>cabergoline 0.5mg tab</i>	84
<i>budesonide 0.25mg/2ml</i>	130	<i>bupropion (12hr) 150mg</i>	16	CABOMETYX 20MG TAE	45
<i>inh susp</i>		<i>er tab</i>		CABOMETYX 40MG TAE	46
<i>budesonide 0.5mg/2ml</i>	130	<i>bupropion 100mg tab</i>	27	CABOMETYX 60MG TAE	46
<i>inh susp</i>		<i>bupropion 75mg tab</i>	27	CAFFEINE TAB 200MG	10
<i>budesonide 1mg/2ml inh</i>	130	<i>bupropion sr (12hr)</i>	27	CALAMINE CLEAR	77
<i>susp</i>		100mg tab		LOTION 1-0.1%	
<i>budesonide 3mg dr cap</i>	83	<i>bupropion sr (12hr)</i>	27	CALAMINE PLUS	77
<i>budesonide 9mg er tab</i>	83	150mg tab		LOTION 1-8%	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

CALC 600+D TAB 600-800	104	CALCIUM ANTACID CHEW 750MG	16	CALCIUM CARBONATE/VITAMIN I TAB 500MG-200UNIT	105
CALCIDOL SOLN 8000/ML	134	CALCIUM CARB-CHOLECALCIF	104	CALCIUM CARBONATE/VITAMIN I TAB 500MG-400 UNIT	105
<i>calcipotriene 0.005% topical cream</i>	75	CHEW TAB 600 MG-20 MCG (800 UNIT)		CALCIUM CARBONATE/VITAMIN I TAB 500MG-400UNIT	105
<i>calcipotriene 0.005% topical ointment</i>	75	CALCIUM CARB-CHOLECALCIFER	105	CALCIUM CARBONATE/VITAMIN I TAB 500MG-400UNIT	105
CALCIPOTRIENE 0.005% TOPICAL SOLN	75	OL TAB 600 MG-20 MCG (800 UNIT)		CALCIUM CARBONATE/VITAMIN I TAB 600MG/200UNIT	105
<i>calcitriol 0.25mcg cap</i>	82	CALCIUM CARBONATE CHEW TAB 500MG	16	CALCIUM CARBONATE/VITAMIN I TAB 600MG/400UNIT	105
<i>calcitriol 0.5mcg cap</i>	82	CALCIUM CARBONATE PLUS VITAMIN D3 TAB	105	CALCIUM CARBONATE/VITAMIN I TAB 600MG/400UNIT	105
<i>calcitriol 1mcg/ml oral soln</i>	82	600MG-800UNIT CALCIUM CARBONATE	16	CALCIUM CARBONATE-CHOLECA LCIFEROL TAB 500 MG-5 MCG	105
CALCIUM + D3 TAB 315MG/200 UNIT	104	SUSP CALCIUM CARBONATE	105	CALCIUM CHEW 500-10	105
CALCIUM + D3 TAB 600-10	104	TAB 600MG CALCIUM CARBONATE	16	CALCIUM CHEW TAB	105
CALCIUM + D3 TAB 600-200	104	TAB 648MG CALCIUM	105	CALCIUM CHEW TAB 1250MG	105
CALCIUM 500 CHEW +D3	104	CARBONATE/CHOLECA LCIFEROL TAB		CALCIUM CHEW TAB 500MG	105
CALCIUM 500 TAB +D	104	250MG-125UNIT CALCIUM	105	CALCIUM CIT TAB	105
CALCIUM 500 TAB/VIT D3	104	CARBONATE/CHOLECA LCIFEROL TAB		CALCIUM CIT/VIT D TAI	105
CALCIUM 600 CHW +D/MINER	104	500MG-200UNIT CALCIUM	105	CALCIUM CITR TAB	105
CALCIUM 600 CHW +D/MNRLS	104	CARBONATE/CHOLECA LCIFEROL TAB		W/VIT D3 CALCIUM CITRATE + D	105
CALCIUM 600 CHW W/VIT D	104	600MG-400UNIT CALCIUM	105	TAB 315-250 CALCIUM CITRATE TAB	105
CALCIUM 600 TAB CALCIUM 600 TAB +D	104	CARBONATE/VITAMIN I TAB 500MG/200UNIT		200MG CALCIUM	105
CALCIUM 600 TAB +D	104	CALCIUM CARBONATE/VITAMIN I TAB 500MG-125UNIT	105	CITRATE/VITAMIN D TAB	105
CALCIUM 600 TAB +D/MNRLS	104	CALCIUM CARBONATE/VITAMIN I TAB 500MG-125UNIT	105	CALCIUM FOR WOMEN CHW	105
CALCIUM 600 TAB +D3	104	CALCIUM CARBONATE/VITAMIN I TAB 500MG-125UNIT	105	CALCIUM HIGH POTENCY PLUS	105
CALCIUM 600/VIT D TAB	104	CALCIUM CARBONATE/VITAMIN I TAB 500MG-125UNIT	105	VITAMIN D TAB CALCIUM PLUS D TAB	105
<i>calcium acetate 667mg cap</i>	109			600	
CALCIUM AND MAGNESIUM TAB	104				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

CALCIUM PLUS TAB 500-200	105	CALCIUM/VITAMIN D CHEW TAB	106	<i>camrese lo tab 91-day pack</i>	119
CALCIUM TAB 500/D	105	CALCIUM/VITAMIN D TAB	106	<i>candesartan cilexetil 16mg tab</i>	39
CALCIUM TAB 500+D	105	CALCIUM/VITAMIN D TAB 315MG-250UNIT	106	<i>candesartan cilexetil 32mg tab</i>	39
CALCIUM TAB 500MG	105	CALCIUM/VITAMIN D TAB 500MG-600UNIT	106	<i>candesartan cilexetil 4mg tab</i>	39
CALCIUM TAB 600MG	105	CALCIUM/VITAMIN D TAB 600MG-400UNIT	106	<i>candesartan cilexetil 8mg tab</i>	39
CALCIUM TAB VITAMIN D	106	CALCIUM/VITAMIN D TAB 600MG-800UNIT	106	<i>candesartan cilexetil/hydrochlorothiazide 16-12.5mg tab</i>	41
CALCIUM W/VITAMIN D TAB 600+D3	106	CALCIUM/VITAMIN D3 TAB 500-5	106	<i>candesartan cilexetil/hydrochlorothiazide 32-12.5mg tab</i>	41
CALCIUM/D TAB 500MG	106	CALCIUM/VITAMIN D3 TAB 600-400	106	<i>candesartan cilexetil/hydrochlorothiazide 32-25mg tab</i>	41
CALCIUM/D TAB 500MG-200UNITS	106	CALCIUM/VITAMIN D3 TAB 600MG	106	CAPECITABINE TAB 150MG	43
CALCIUM/D TAB 500MG-400UNITS	106	CALCIUM+D3 TAB 315-250	106	CAPECITABINE TAB 500MG	43
CALCIUM/D TAB 500MG-600UNITS	106	CALCIUM+D3 TAB 600-400	106	CAPLYTA 10.5MG CAP	52
CALCIUM/D TAB 600MG-200UNITS	106	CALCIUM+D3 TAB 600-800	106	CAPLYTA 21MG CAP	52
CALCIUM/D TAB 600MG-400UNITS	106	CALCIUM+D3 TAB MAXIMUM	106	CAPLYTA 42MG CAP	52
CALCIUM/D TAB 600MG-800UNITS	106	CALCIUM-FOLIC ACID PLUS D WAFER	106	CAPRELSA 100MG TAB	46
CALCIUM/D3 TAB 500MG/ 400 UNIT	106	CALCIUM + D TAB	106	CAPRELSA 300MG TAB	46
CALCIUM/D3 TAB 500MG/ 600 UNIT	106	CALLUS REMOV PAD 40%	76	CAPSAICIN CREAM 0.025%	77
CALCIUM/D3 TAB 600-800	106	CAL-MAG-ZINC-D TAB	106	<i>captopril 100mg tab</i>	38
CALCIUM/D3 TAB 600MG/ 200 UNIT	106	CALQUENCE 100MG TAB	46	<i>captopril 12.5mg tab</i>	38
CALCIUM/D3 TAB 600MG/ 400 UNIT	106	CALTRATE +D TAB 600-800	106	<i>captopril 25mg tab</i>	38
CALCIUM/D3 TAB 600MG/200 UNIT	106	CHEW CALTRATE 600 +D3	106	<i>captopril 50mg tab</i>	38
CALCIUM/D3 TAB 600MG/800UNIT	106	CHEW CALTRATE 600 CHEW 600-800	106	<i>carbamazepine 100mg chew tab</i>	24
CALCIUM/MAGNESIUM /ZINC TAB	106	CHEW CALTRATE-D SOFT CHEWS	106	<i>carbamazepine 100mg er cap</i>	24
CALCIUM/VIT D CAP 600-400	106	<i>camila 0.35mg tab 28-day pack</i>	119	<i>carbamazepine 100mg er tab</i>	24
				<i>carbamazepine 200mg er cap</i>	24
				<i>carbamazepine 200mg er tab</i>	25

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>carbamazepine 200mg tab</i>	25	CARBONATE/VITAMIN I 106	<i>caspofungin acetate 50mg inj</i>	35
<i>carbamazepine 20mg/ml oral susp</i>	25	TAB 600MG/800UNIT	<i>caspofungin acetate 70mg inj</i>	35
<i>carbamazepine 300mg er cap</i>	25	CARBOXYMETHYLCEL 123	CASTOR OIL 100%	99
<i>carbamazepine 400mg er tab</i>	25	LULOSE OPTH SOLN 0.5%	CAYSTON 75MG/ML NEB SOLN	18
<i>carbidopa 25mg tab</i>	51	CAREONE TEST STRIPS 79	C-CHEWABLE CHW 500MG	136
<i>carbidopa/entacapone/levodopa 12.5-200-50mg tab</i>	51	CARESENS LANCETS 100	CEFACLOR 250MG CAP	20
<i>carbidopa/entacapone/levodopa 18.75-200-75mg tab</i>	51	30G CARESENS N TEST STRIPS 79	CEFACLOR 500MG CAP	20
<i>carbidopa/entacapone/levodopa 25-200-100mg tab</i>	51	CARESENS S TEST STRIP 79	<i>cefadroxil 100mg/ml oral susp</i>	20
<i>carbidopa/entacapone/levodopa 31.25-200-125mg tab</i>	51	CARETOUCH BLOOD GLUCOSE T 79	<i>cefadroxil 500mg cap</i>	20
<i>carbidopa/entacapone/levodopa 37.5-200-150mg tab</i>	51	CARETOUCH LANCETS 100	<i>cefadroxil 50mg/ml oral susp</i>	20
<i>carbidopa/entacapone/levodopa 50-200-200mg tab</i>	51	28G CARETOUCH SAFETY 100	<i>cefazolin 1gm inj</i>	20
<i>carbidopa/levodopa 10-100mg odt</i>	51	LANCETS 26G CARETOUCH TEST STRIPS 79	<i>cefazolin 200mg/ml inj</i>	20
<i>carbidopa/levodopa 10-100mg tab</i>	51	CARETOUCH TWIST 28 100	<i>cefazolin 500mg inj</i>	20
<i>carbidopa/levodopa 25-100mg er tab</i>	52	CARETOUCH TWIST 30 100	<i>cefdinir 25mg/ml oral susp</i>	20
<i>carbidopa/levodopa 25-100mg odt</i>	52	CARETOUCH TWIST 30C 102	<i>cefdinir 300mg cap</i>	20
<i>carbidopa/levodopa 25-100mg tab</i>	52	LANCETS CARETOUCH TWIST 100	<i>cefdinir 50mg/ml oral susp</i>	20
<i>carbidopa/levodopa 25-250mg odt</i>	52	<i>carglumic acid 200mg tab for oral susp</i>	<i>cefepime 1gm inj</i>	20
<i>carbidopa/levodopa 25-250mg tab</i>	52	<i>carisoprodol 350mg tab</i>	<i>cefepime 2gm inj</i>	20
<i>carbidopa/levodopa 50-200mg er tab</i>	52	CARTEOLOL 1% OPTH SOLN 124	<i>cefixime 400mg cap</i>	20
		<i>cartia xt 120mg er (24hr) cap</i>	<i>cefoxitin 1gm inj</i>	20
		<i>cartia xt 180mg er (24hr) cap</i>	<i>cefoxitin 200mg/ml inj</i>	20
		<i>cartia xt 240mg er (24hr) cap</i>	<i>cefoxitin 2gm inj</i>	20
		<i>cartia xt 300mg er (24hr) cap</i>	<i>cefpodoxime 100mg tab</i>	20
		<i>carvedilol 12.5mg tab</i>	CEFPODOXIME 10MG/ML ORAL SUSP	
		<i>carvedilol 25mg tab</i>	<i>cefpodoxime 200mg tab</i>	20
		<i>carvedilol 3.125mg tab</i>	CEFPODOXIME 20MG/ML ORAL SUSP	
		<i>carvedilol 6.25mg tab</i>	<i>cefprozil 250mg tab</i>	20
			<i>cefprozil 25mg/ml oral susp</i>	20
			<i>cefprozil 500mg tab</i>	20
			<i>cefprozil 50mg/ml oral susp</i>	20
			<i>ceftaroline fosamil 400mg inj</i>	20

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>ceftaroline fosamil 600mg inj</i>	20	CENTRUM WOMEN TAB	112	CHLO TUSS LIQUID	69
<i>ceftazidime 1gm inj</i>	20	CENTURY ADULT TAB	112	<i>chlordiazepoxide 10mg cap</i>	17
CEFTAZIDIME	20	<i>cephalexin 250mg cap</i>	21	<i>chlordiazepoxide 25mg cap</i>	17
200MG/ML INJ		<i>cephalexin 25mg/ml oral susp</i>	21	<i>chlordiazepoxide 5mg cap</i>	17
<i>ceftazidime 2gm inj</i>	20	<i>cephalexin 500mg cap</i>	21	<i>chlorhexidine gluconate 0.12% mouthwash</i>	72
<i>ceftriaxone 10gm inj</i>	20	<i>cephalexin 50mg/ml oral susp</i>	21	CHLOROQUINE	51
<i>ceftriaxone 1gm inj</i>	20	CEREFOLIN TAB	82	PHOSPHATE 250MG TAB	
<i>ceftriaxone 250mg inj</i>	20	CEROVITE TAB SENIOR	112	<i>chloroquine phosphate 500mg tab</i>	51
<i>ceftriaxone 2gm inj</i>	20	CERTA PLUS TAB	112	CHLORPHENIRAMINE	36
<i>ceftriaxone 500mg inj</i>	20	CERTAVITE TAB	112	TAB 4MG	
<i>cefuroxime 1500mg inj</i>	21	ANTIOXID		<i>chlorpromazine 100mg tab</i>	55
<i>cefuroxime 250mg tab</i>	21	CERTAVITE TAB SENIOR	112	<i>chlorpromazine 100mg/ml oral soln</i>	55
<i>cefuroxime 500mg tab</i>	21	CERTAVITE/ANTIOXIDA	112	<i>chlorpromazine 10mg tab</i>	55
<i>cefuroxime 750mg inj</i>	21	NTS TAB		<i>chlorpromazine 200mg tab</i>	55
<i>celecoxib 100mg cap</i>	11	CETIRIZINE SOLN	37	<i>chlorpromazine 25mg tab</i>	55
<i>celecoxib 200mg cap</i>	11	1MG/ML		<i>chlorpromazine 30mg/ml oral soln</i>	55
<i>celecoxib 400mg cap</i>	11	CETIRIZINE SOLN	37	<i>chlorpromazine 50mg tab</i>	55
<i>celecoxib 50mg cap</i>	11	1MG/ML		<i>chlorthalidone 25mg tab</i>	66
CENTRATEX CAP	93	CETIRIZINE SYRUP	37	<i>chlorthalidone 50mg tab</i>	66
CENTRAVITES 50 PLUS TAB	112	1MG/ML		<i>chlorzoxazone 500mg tab</i>	57
CENTRUM ADULTS	112	CETIRIZINE TAB 10MG	37	<i>cholestyramine 4gm powder for oral susp</i>	37
CENTRUM ADULTS TAB	112	CETIRIZINE TAB 5MG	37	<i>cholestyramine light 4gm powder for oral susp</i>	37
CENTRUM LIQUID ADULT	112	CETIRIZINE/PSEUDOEP	69	<i>ciclopirox 0.77% topical cream</i>	74
CENTRUM MATURE TAE 50+WOMEN	112	HEDRINE TAB 5-120MG		<i>ciclopirox 0.77% topical gel</i>	74
CENTRUM MEN TAB	112	<i>cevimeline 30mg cap</i>	72	<i>ciclopirox 0.77% topical lotion</i>	74
CENTRUM MENS TAB	112	CHEST CONGESTION	69	<i>ciclopirox 1% shampoo</i>	74
CENTRUM SILVER ADULTS 50+ TAB	112	RELIEF D TAB		<i>ciclopirox 8% topical soln</i>	74
CENTRUM SILVER TAB	112	20-400MG		CILASTATIN/IMIPENEM	18
CENTRUM SILVER TAB 50+	112	CHEST CONGESTION	69	250-250MG INJ	
CENTRUM SILVER TAB 50+WOMEN	112	RELIEF DM SYRUP	71	<i>cilastatin/imipenem 500-500mg inj</i>	18
CENTRUM SILVER TAB WOMEN 50+	112	CHEST CONGESTION	71		
CENTRUM SILVER WOMEN TAB	112	TAB 400MG			
CENTRUM TAB	112	CHEST CONGESTION	69		
CENTRUM WOMEN MULTIVITAMIN	112	TAB RELIEF PE			
		CHEST RUB OINTMENT	72		
		CHEW CALCIUM CHW	106		
		CHILD PAIN CHEW	13		
		160MG			
		CHILDRENS CHEWABLE VITAMIN	116		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>cilostazol 100mg tab</i>	22	<i>clarithromycin 500mg tab</i>	22	<i>clobazam 2.5mg/ml oral</i>	24
<i>cilostazol 50mg tab</i>	22	CLARITHROMYCIN	22	<i>susp</i>	
CIMDUO 300-300MG	57	50MG/ML ORAL SUSP		<i>clobazam 20mg tab</i>	24
TAB		CLEARLAX POWDER	98	<i>clobetasol propionate</i>	75
<i>cimetidine 200mg tab</i>	87	CLEARLAX POWDER	98	<i>0.05% shampoo</i>	
<i>cimetidine 300mg tab</i>	87	CLEVER CHEK TEST	79	<i>clobetasol propionate</i>	75
<i>cimetidine 400mg tab</i>	87	STRIPS		<i>0.05% topical cream</i>	
<i>cimetidine 800mg tab</i>	87	CLEVER CHOICE TEST	79	<i>clobetasol propionate</i>	75
CIMZIA 200MG INJ	60	STRIPS		<i>0.05% topical e cream</i>	
CIMZIA 200MG/ML	60	<i>clindamycin 1% pad</i>	73	<i>clobetasol propionate</i>	75
SYRINGE		<i>clindamycin 1% topical</i>	73	<i>0.05% topical foam</i>	
CIMZIA 200MG/ML	60	<i>gel (once-daily)</i>		<i>clobetasol propionate</i>	75
SYRINGE PACK (2)		<i>clindamycin 1% topical</i>	73	<i>0.05% topical gel</i>	
CIMZIA 200MG/ML	60	<i>gel (twice-daily)</i>		<i>clobetasol propionate</i>	75
SYRINGE STARTER KIT		<i>clindamycin 1% topical</i>	73	<i>0.05% topical lotion</i>	
(6)		<i>lotion</i>		<i>clobetasol propionate</i>	75
<i>cinacalcet 30mg tab</i>	82	<i>clindamycin 1% topical</i>	73	<i>0.05% topical ointment</i>	
<i>cinacalcet 60mg tab</i>	82	<i>soln</i>		<i>clobetasol propionate</i>	75
<i>cinacalcet 90mg tab</i>	82	<i>clindamycin 150mg cap</i>	18	<i>0.05% topical soln</i>	
<i>ciprofloxacin 0.3% ophth</i>	124	<i>clindamycin 2% vaginal</i>	18	<i>clomipramine 25mg cap</i>	30
<i>soln</i>		<i>cream</i>		<i>clomipramine 50mg cap</i>	30
<i>ciprofloxacin 250mg tab</i>	18	<i>clindamycin 300mg cap</i>	18	<i>clomipramine 75mg cap</i>	30
CIPROFLOXACIN	18	<i>clindamycin 300mg/2ml</i>	18	<i>clonazepam 0.125mg odt</i>	24
2MG/ML INJ		<i>inj</i>		<i>clonazepam 0.25mg odt</i>	24
<i>ciprofloxacin 500mg tab</i>	18	<i>clindamycin 300mg/50ml</i>	18	<i>clonazepam 0.5mg odt</i>	24
<i>ciprofloxacin 750mg tab</i>	18	<i>inj</i>		<i>clonazepam 0.5mg tab</i>	24
<i>ciprofloxacin/dexamethas</i>	126	<i>clindamycin 600mg/4ml</i>	18	<i>clonazepam 1mg odt</i>	24
<i>one 0.3-0.1% otic susp</i>		<i>inj</i>		<i>clonazepam 1mg tab</i>	24
<i>citalopram 10mg tab</i>	28	<i>clindamycin 600mg/50ml</i>	18	<i>clonazepam 2mg odt</i>	24
<i>citalopram 20mg tab</i>	28	<i>inj</i>		<i>clonazepam 2mg tab</i>	24
<i>citalopram 2mg/ml oral</i>	28	<i>clindamycin 75mg cap</i>	18	<i>clonidine 0.1mg er tab</i>	10
<i>soln</i>		<i>clindamycin 75mg/5ml</i>	18	<i>clonidine 0.1mg tab</i>	39
<i>citalopram 40mg tab</i>	28	<i>oral soln</i>		<i>clonidine 0.1mg/24hr</i>	39
CITRACAL+D3 TAB	106	<i>clindamycin 900mg/50ml</i>	18	<i>weekly patch</i>	
MAXIMUM		<i>inj</i>		<i>clonidine 0.2mg tab</i>	39
CITRANATAL BLOOM	116	<i>clindamycin 900mg/6ml</i>	18	<i>clonidine 0.2mg/24hr</i>	39
TAB		<i>inj</i>		<i>weekly patch</i>	
<i>claravis 10mg cap</i>	73	CLINIMIX 4.25/10 INJ	118	<i>clonidine 0.3mg tab</i>	39
<i>claravis 20mg cap</i>	73	CLINIMIX 4.25/5 INJ	118	<i>clonidine 0.3mg/24hr</i>	40
<i>claravis 30mg cap</i>	73	CLINIMIX 5/15 INJ	118	<i>weekly patch</i>	
<i>claravis 40mg cap</i>	73	CLINIMIX 5/20 INJ	118	<i>clopidogrel 75mg tab</i>	22
<i>clarithromycin 250mg tab</i>	22	<i>clinisol 15% inj</i>	118	<i>clorazepate dipotassium</i>	17
CLARITHROMYCIN	22	<i>clobazam 10mg tab</i>	24	<i>15mg tab</i>	
25MG/ML ORAL SUSP					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>clorazepate dipotassium</i>	17	<i>codeine</i>	14	COMFORT TOUCH MIS	100
<i>3.75mg tab</i>		<i>phosphate/acetaminophe</i>		LANC 30G	
<i>clorazepate dipotassium</i>	17	<i>n 30-300mg tab</i>		COMFORT TOUCH MIS	100
<i>7.5mg tab</i>		<i>codeine</i>	14	LANC 31G	
<i>clotrimazole 1% topical</i>	74	<i>phosphate/acetaminophe</i>		COMPACT SPAC MIS	103
<i>cream</i>		<i>n 60-300mg tab</i>		CHAMBER	
<i>clotrimazole 10mg</i>	72	CODEINE/GUAIFENESIN	69	COMPACT SPACE	103
<i>lozenge</i>		SOLN 10-100/5		CHAMBER LG MASK	
CLOTTRIMAZOLE SOLN	74	<i>colchicine 0.6mg tab</i>	88	COMPACT SPACE	103
1%		<i>colchicine/probenecid</i>	88	CHAMBER MD MASK	
CLOTTRIMAZOLE	134	<i>0.5-500mg tab</i>		COMPACT SPACE	103
VAGINAL CREAM 1%		COLD AND ALLERGY	69	CHAMBER SM MASK	
CLOTTRIMAZOLE	134	CHILDRENS LIQUID		COMPANION TAB	112
VAGINAL CREAM 1%		COLD AND FLU	69	COMPLE MULTI TAB	112
<i>clotrimazole/betamethaso</i>	74	NIGHTTIME CAP		ADLT 50+	
<i>ne 1-0.05% topical cream</i>		COLD AND FLU PAK	69	COMPLETE	112
<i>clozapine 100mg odt</i>	54	DAY/NGHT		MULTIVITAMIN ADULT	
<i>clozapine 100mg tab</i>	54	COLD AND SINUS CAP	69	50+ TAB	
<i>clozapine 12.5mg odt</i>	54	30-200MG		COMPLETE NATAL DHA	116
<i>clozapine 150mg odt</i>	54	COLD/COUGH	69	COMPLETENATE CHEW	116
<i>clozapine 200mg odt</i>	54	CHILDRENS LIQUID		TAB	
<i>clozapine 200mg tab</i>	54	COLD/COUGH LIQUID	69	COMPLEX B-100 TAB	117
<i>clozapine 25mg odt</i>	54	CHILDREN		<i>compro 25mg rectal supp</i>	55
<i>clozapine 25mg tab</i>	54	COLD/FLU CAP	69	<i>conjugated estrogens</i>	122
<i>clozapine 50mg tab</i>	54	DAYTIME		<i>0.3mg tab</i>	
COAGADDEX INJ	89	COLD/FLU CAP	69	<i>conjugated estrogens</i>	122
COARTEM 20-120MG	51	NITETIME		<i>0.45mg tab</i>	
TAB		<i>colesevelam 625mg tab</i>	37	<i>conjugated estrogens</i>	122
COATS ALOE CREAM	76	<i>colestipol 1gm tab</i>	37	<i>0.625mg tab</i>	
COATS ALOE GEL	76	<i>colestipol 5000mg</i>	37	<i>conjugated estrogens</i>	122
COATS ALOE LINIMENT	76	<i>granules for oral susp</i>		<i>0.9mg tab</i>	
LOTION 10%		<i>colistin 75mg/ml inj</i>	18	<i>conjugated estrogens</i>	122
COATS ALOE	76	COMBIVENT RESPIMAT	131	<i>1.25mg tab</i>	
MOISTURIZING LOTION		20-100MCG/ACT		<i>constulose 10gm/15ml</i>	86
COBENFY 100-20MG	52	INHALER		<i>oral soln</i>	
CAP		COMETRIQ CAP 100MG	46	CONTOUR PLUS TEST	79
COBENFY 125-30MG	52	DAILY DOSE PACK (56)		STRIPS	
CAP		COMETRIQ CAP 140MG	46	COPIKTRA 15MG CAP	46
COBENFY 50-20MG CAP	52	DAILY DOSE PACK (112)		COPIKTRA 25MG CAP	46
COBENFY CAP 28-DAY	52	COMETRIQ CAP 60MG	46	CORAL CALCIUM CAP	106
STARTER PACK (56)		DAILY DOSE PACK (84)		CORIFACT INJ	89
<i>codeine</i>	14	COMFORT EZ LANCETS	100	CORN AND CALLUS	76
<i>phosphate/acetaminophe</i>		28G		LIQUID	
<i>n 15-300mg tab</i>					

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

CORN REMOVER PAD 40%	76	CRESEMBA 74.5MG CAP	35	CVS SLOW RELEASE FE TAB 45MG	94
CORVITA TAB	112	<i>cromolyn sodium</i>	132	CVS SLOW RELEASE	94
CORVITE 150 TAB	93	<i>20mg/2ml neb soln</i>		IRON TAB 45MG	
CORVITE FE TAB	93	<i>cromolyn sodium 20mg/ml oral soln</i>	109	CVS SPECTRAVITE	112
CORVITE FREE TAB	112	CROMOLYN SODIUM	125	ADVANCED TAB	
CORVITE TAB	112	4% OPTH SOLN		CVS VITAMIN A CAP	134
COSENTYX 150MG/ML SYRINGE	60	CROMOLYN SODIUM NASAL SPRAY	117	8000 UNIT	
COSENTYX	60	<i>cryselle tab 28-day pack</i>	119	CVS VITAMIN B12 TAB	91
75MG/0.5ML SYRINGE		CUTAQUIG SOLN 1GM	126	1000MCG	
COSENTYX	60	CUTAQUIG SOLN 2GM	126	CVS VITAMIN B-12 TR TAB 1000	91
SENSOREADY		CUTAQUIG SOLN 4GM	126	CVS VITAMIN C TAB	112
150MG/ML		CUTAQUIG SOLN 8GM	127	CVS VITAMIN C TAB	136
AUTO-INJECTOR		CUTTER BACKWOODS	77	1000MG	
COSENTYX UNOREADY	60	SPRAY 25%		CVS VITAMIN E 180MG	134
300MG/2ML		CUTTER LEMON	77	CVS VITAMIN E CAP 400 UNIT	134
AUTO-INJECTOR		EUCALYPTUS		CVS VITAMIN E CAP	134
COTELLIC 20MG TAB	46	CUVITRU INJ	127	400UNIT	
COUGH AND COLD TAB	69	CVS ADVANCED TEST STRIPS	79	CYANOCOBALAM INJ	91
4-30MG		CVS B COMPLEX PLUS C TAB	110	1000MCG	
COUGH DM	68	CVS B-1 TAB 100MG	136	CYANOCOBALAMIN INJ	91
CHILDRENS SUSP		CVS B12 LIQUID	91	1000MCG	
30MG/5ML		1000/15		CYANOCOBALAMIN	91
COUGH DM SUSP	68	CVS B-6 TAB 100MG	136	LIQUID 1000MCG/15ML	
COUGH DM SUSP	68	CVS C/ROSE TAB 500MG	136	CYANOCOBALAMIN	91
30MG/5ML		CVS CALCIUM TAB	106	SPRAY 500MCG	
CRANBERRY CAP	117	600MG		CYANOCOBALAMIN	91
CREON	109	CVS CHEWABLE C WITH ROSE	136	TAB 1000 MCG	
120000-24000-76000UNIT DR CAP		CVS DAILY MULTIPLE FOR WOMEN TAB	112	CYANOCOBALAMIN	91
CREON	109	CVS GLUCOSE METER TEST ST	79	TAB 500 MCG	
15000-3000-9500UNIT DR CAP		CVS HAIR/SKIN/NAILS TAB	117	<i>cyclobenzaprine 10mg tab</i>	57
CREON	109	CVS IRON TAB 27MG	94	<i>cyclobenzaprine 5mg tab</i>	57
180000-36000-114000U NIT DR CAP		CVS IRON TAB 325MG	94	<i>cyclophosphamide 25mg cap</i>	42
CREON	109	CVS MAGNESIUM TAB	108	<i>cyclophosphamide 50mg cap</i>	42
30000-6000-19000UNIT DR CAP		500MG		CYCLOPHOSPHAMIDE	42
CREON	109	CVS SELENIUM TAB	108	50MG TAB	
60000-12000-38000UNIT DR CAP		200MCG		<i>cyclosporine 0.05% ophth susp</i>	125
CRESEMBA 186MG CAP	35			<i>cyclosporine 100mg cap</i>	96

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>cyclosporine 25mg cap</i>	96	<i>dantrolene sodium 100mg cap</i>	57	DEKAS LIQUID ESSENTIAL	115
<i>cyclosporine modified 100mg cap</i>	96	<i>dantrolene sodium 25mg cap</i>	57	MULTI-VITAMIN DEKAS PLUS CAP	113
<i>cyclosporine modified 100mg/ml oral soln</i>	96	<i>dantrolene sodium 50mg cap</i>	57	DEKAS PLUS LIQ	115
<i>cyclosporine modified 25mg cap</i>	96	<i>dapagliflozin 10mg tab</i>	33	DELSTRIGO	57
<i>cyclosporine modified 50mg cap</i>	96	<i>dapagliflozin 5mg tab</i>	33	100-300-300MG TAB	
<i>cyproheptadine 0.4mg/ml oral soln</i>	129	<i>dapagliflozin/metformin 10-1000mg er tab</i>	31	DEPO-SUBQ PROVERA	119
<i>cyproheptadine 4mg tab</i>	129	<i>dapagliflozin/metformin 10-500mg er tab</i>	31	104MG/0.65ML SYRINGE	
<i>cyred tab 28-day pack</i>	119	<i>dapagliflozin/metformin 5-1000mg er tab</i>	31	DESCOVY 120-15MG TAB	57
CYSTADANE 1GM POWDER FOR ORAL SOLN	82	<i>dapagliflozin/metformin 5-500mg er tab</i>	31	DESCOVY 200-25MG TAB	57
CYSTADROPS 0.37% OPTH SOLN	125	<i>dapsone 100mg tab</i>	42	<i>desipramine 100mg tab</i>	30
CYSTAGON 150MG CAP	88	<i>dapsone 25mg tab</i>	42	<i>desipramine 10mg tab</i>	30
CYSTAGON 50MG CAP	88	DAPTACEL INJ	97	<i>desipramine 150mg tab</i>	30
D		<i>daptomycin 500mg inj</i>	18	<i>desipramine 25mg tab</i>	30
<i>dabigatran etexilate mesylate 110mg cap</i>	22	<i>darunavir 600mg tab</i>	57	<i>desipramine 50mg tab</i>	30
<i>dabigatran etexilate mesylate 150mg cap</i>	22	<i>darunavir 800mg tab</i>	57	<i>desipramine 75mg tab</i>	30
<i>dabigatran etexilate mesylate 75mg cap</i>	22	<i>dasatinib 100mg tab</i>	46	<i>desloratadine 5mg tab</i>	129
DAILY MULTIPLE VITAMINS MINERALS	112	<i>dasatinib 140mg tab</i>	46	<i>desmopressin acetate 0.01% (0.01mg/act) nasal spray</i>	84
DAILY MULTIPLE VITAMINS TAB	112	<i>dasatinib 20mg tab</i>	46	<i>desmopressin acetate 0.1mg tab</i>	84
DAILY TAB VITAMIN	114	<i>dasatinib 50mg tab</i>	46	<i>desmopressin acetate 0.2mg tab</i>	84
DAILY VALUE TAB	114	<i>dasatinib 70mg tab</i>	46	<i>desonide 0.05% topical cream</i>	75
MULTIVITAMIN		<i>dasatinib 80mg tab</i>	46	<i>desonide 0.05% topical ointment</i>	75
DAILY VIT	112	DAURISMO 100MG TAB	43	<i>desoximetasone 0.25% topical cream</i>	75
TAB+MINERAL		DAURISMO 25MG TAB	43	<i>desoximetasone 0.25% topical ointment</i>	76
DAILY VITE TAB	115	DAYTIME COLD/FLU RELIEF LIQUID 10/5/325	69	<i>desvenlafaxine succinate 100mg er tab</i>	29
DAILY WOMENS MULTIVITAMIN TAB	113	<i>deblitane 0.35mg tab 28-day pack</i>	119	<i>desvenlafaxine succinate 25mg er tab</i>	29
<i>dalfampridine 10mg er tab</i>	128	DECONEX DMX TAB	69	<i>desvenlafaxine succinate 50mg er tab</i>	29
<i>danazol 100mg cap</i>	14	DECONEX IR TAB	69	<i>dexamethasone 0.5mg tab</i>	83
<i>danazol 200mg cap</i>	14	10-385MG			
<i>danazol 50mg cap</i>	15	DEEP SEA NASAL SPRAY 0.65%	117		
		<i>deferasirox 180mg tab</i>	34		
		<i>deferasirox 360mg tab</i>	34		
		<i>deferasirox 90mg tab</i>	34		
		DEKAS CAP ESSENTIAL	115		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

DEXAMETHASONE	83	DIACOMIT 500MG	25	<i>dicloxacillin 250mg cap</i>	21
0.5MG/5ML ORAL SOLN		POWDER FOR ORAL		<i>dicloxacillin 500mg cap</i>	21
<i>dexamethasone 0.75mg tab</i>	83	SUSP		<i>dicyclomine 10mg cap</i>	86
<i>dexamethasone 1.5mg tab</i>	83	DIALYVITE 800 TAB	111	<i>dicyclomine 20mg tab</i>	86
<i>dexamethasone 1mg tab</i>	83	DIALYVITE SUPREME	113	<i>dicyclomine 2mg/ml oral soln</i>	86
<i>dexamethasone 2mg tab</i>	83	TAB		<i>diflunisal 500mg tab</i>	12
<i>dexamethasone 4mg tab</i>	83	DIALYVITE TAB	111	<i>difluprednate 0.05%</i>	125
<i>dexamethasone 6mg tab</i>	83	DIALYVITE/ZINC TAB	111	<i>ophth susp</i>	
DEXAMETHASONE	125	DIAPER RASH OIN 40%	77	<i>digoxin 0.125mg tab</i>	65
PHOSPHATE 0.1%		DIATRUE PLUS TEST	79	<i>digoxin 0.25mg tab</i>	65
OPHTH SOLN		STRIPS		<i>dihydroergotamine mesylate 0.5mg/act nasal inhaler</i>	103
<i>dexamethasone/neomycin /polymyxin b 0.1% ophth ointment</i>	125	<i>diazepam 10mg tab</i>	17	DILANTIN 30MG ER	25
<i>dexamethasone/neomycin /polymyxin b 0.1% ophth susp</i>	125	<i>diazepam 10mg/2ml rectal gel</i>	24	CAP	
<i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>	125	<i>diazepam 1mg/ml oral soln</i>	17	<i>diltiazem 120mg er (12hr) cap</i>	64
<i>dexmethylphenidate 10mg tab</i>	10	<i>diazepam 2.5mg/0.5ml rectal gel</i>	24	<i>diltiazem 120mg er (24hr) cap</i>	64
<i>dexmethylphenidate 2.5mg tab</i>	11	<i>diazepam 20mg/4ml rectal gel</i>	24	<i>diltiazem 120mg tab</i>	64
<i>dexmethylphenidate 5mg tab</i>	11	<i>diazepam 2mg tab</i>	17	<i>diltiazem 180mg er (24hr) cap</i>	64
<i>dextroamphetamine sulfate 10mg tab</i>	10	<i>diazepam 5mg tab</i>	17	<i>diltiazem 240mg er (24hr) cap</i>	64
<i>dextroamphetamine sulfate 5mg tab</i>	10	<i>diazepam 5mg/ml oral soln</i>	17	<i>diltiazem 300mg er (24hr) cap</i>	64
DEXTROMETHORPHAN	68	<i>diazoxide 50mg/ml oral susp</i>	31	<i>diltiazem 30mg tab</i>	64
CAP 15MG		DIBUCAINE OIN 1%	77	<i>diltiazem 360mg er (24hr) cap</i>	64
<i>dextromethorphan hydrobromide/quinidine sulfate 20-10mg cap</i>	129	DICLOFENAC GEL 1%	74	<i>diltiazem 420mg er (24hr) cap</i>	64
DEXTROMETHORPHAN	68	<i>diclofenac potassium 50mg tab</i>	11	<i>diltiazem 60mg er (12hr) cap</i>	64
LIQUID 30MG/5ML		<i>diclofenac sodium 0.1% ophth soln</i>	125	<i>diltiazem 60mg tab</i>	64
DEXTROSE 10% INJ	118	<i>diclofenac sodium 1.5% topical soln</i>	11	<i>diltiazem 90mg er (12hr) cap</i>	64
DIACOMIT 250MG CAP	25	<i>diclofenac sodium 100mg er tab</i>	12	<i>diltiazem 90mg tab</i>	64
DIACOMIT 250MG	25	<i>diclofenac sodium 25mg dr tab</i>	12	<i>dilt-xr 120mg cap</i>	64
POWDER FOR ORAL		<i>diclofenac sodium 3% topical gel</i>	74	<i>dilt-xr 180mg cap</i>	64
SUSP		<i>diclofenac sodium 50mg dr tab</i>	12	<i>dilt-xr 240mg cap</i>	64
DIACOMIT 500MG CAP	25	<i>diclofenac sodium 75mg dr tab</i>	12	DIMETANE CAP 25MG	36
				DIMETANE CAP 50MG	36

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>dimethyl fumarate 120mg dr cap</i>	128	DOCUSATE SODIUM	99	<i>doxycycline hyclate 100mg tab</i>	19
<i>dimethyl fumarate 120mg/240mg cap starter pack (60)</i>	128	DOCUSOL KIDS ENEMA	99	<i>doxycycline hyclate 20mg tab</i>	19
<i>dimethyl fumarate 240mg dr cap</i>	128	100MG/5ML		<i>doxycycline hyclate 50mg cap</i>	19
DIPHENHYDRAM LIQ	36	<i>dofetilide 125mcg cap</i>	62	<i>doxycycline monohydrate 100mg cap</i>	19
12.5/5ML		<i>dofetilide 250mcg cap</i>	62	<i>doxycycline monohydrate 100mg tab</i>	19
DIPHENHYDRAMINE	36	<i>dofetilide 500mcg cap</i>	62	<i>doxycycline monohydrate 50mg cap</i>	19
CAP 25MG		<i>donepezil 10mg odt</i>	127	<i>doxycycline monohydrate 50mg tab</i>	19
DIPHENHYDRAMINE	36	<i>donepezil 10mg tab</i>	127	<i>doxycycline monohydrate 5mg/ml oral susp</i>	19
CAP 50MG		<i>donepezil 23mg tab</i>	127	<i>doxycycline monohydrate 75mg tab</i>	19
DIPHENHYDRAMINE	36	<i>donepezil 5mg odt</i>	127	DRIMINATE TAB 50MG	34
LIQUID 12.5/5ML		<i>donepezil 5mg tab</i>	127	DRIZALMA 20MG DR	29
DIPHENHYDRAMINE	36	<i>dorzolamide 2% ophth soln</i>	125	SPRINKLE CAP	
LIQUID 25/10ML		<i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>	124	DRIZALMA 30MG DR	29
DIPHENHYDRAMINE	36	<i>dotti 0.025mg/24hr twice weekly patch</i>	122	SPRINKLE CAP	
TAB 25MG		<i>dotti 0.0375mg/24hr twice weekly patch</i>	122	DRIZALMA 40MG DR	29
<i>dipyridamole 25mg tab</i>	22	<i>dotti 0.05mg/24hr twice weekly patch</i>	122	SPRINKLE CAP	
<i>dipyridamole 50mg tab</i>	22	<i>dotti 0.075mg/24hr twice weekly patch</i>	122	DRIZALMA 60MG DR	29
<i>dipyridamole 75mg tab</i>	22	<i>dotti 0.1mg/24hr twice weekly patch</i>	122	SPRINKLE CAP	
<i>disopyramide 100mg cap</i>	62	DOVATO 50-300MG TAB	57	dronabinol 10mg cap	35
<i>disopyramide 150mg cap</i>	62	<i>doxazosin 1mg tab</i>	40	dronabinol 2.5mg cap	35
<i>disulfiram 250mg tab</i>	16	<i>doxazosin 2mg tab</i>	40	dronabinol 5mg cap	35
<i>divalproex sodium 125mg dr cap</i>	27	<i>doxazosin 4mg tab</i>	40	DROPLET LANCING	100
<i>divalproex sodium 125mg dr tab</i>	27	<i>doxazosin 8mg tab</i>	40	DEVICE	
<i>divalproex sodium 250mg dr tab</i>	27	<i>doxepin 100mg cap</i>	30	DROPLET PERSONAL	100
<i>divalproex sodium 250mg er tab</i>	52	<i>doxepin 10mg cap</i>	30	LANCETS	
<i>divalproex sodium 500mg dr tab</i>	27	DOXEPIN 10MG/ML	30	DROPSAFE MIS	100
<i>divalproex sodium 500mg er tab</i>	52	ORAL SOLN		LANCETS 23G	
DM/GG/PHENYL LIQUID	69	DOXEPIN 150MG CAP	30	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack</i>	119
DM/GUAIFENESIN	69	<i>doxepin 25mg cap</i>	30	<i>drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack</i>	120
LIQUID 20/200MG		<i>doxepin 50mg cap</i>	30		
DOCOSANOL CREAM	75	<i>doxepin 75mg cap</i>	30		
10%		<i>doxy 100mg inj</i>	18		
DOCUSATE MINI	99	<i>doxycycline hyclate 100mg cap</i>	18		
ENEMA 283MG		<i>doxycycline hyclate 100mg inj</i>	18		

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ALPHABETICAL LISTING OF DRUGS

DROXIA 200MG CAP	109	EASY PLUS II TEST	79	ELEMENT TEST STRIPS	79
DROXIA 300MG CAP	109	STRIPS		ELEMNT COMPANY	79
DROXIA 400MG CAP	109	EASY STEP TEST STRIPS	79	TEST STRIPS	
<i>droxidopa 100mg cap</i>	62	EASY TALK TEST STRIP	79	ELFOLATE PLUS TAB	82
<i>droxidopa 200mg cap</i>	62	EASY TALK TEST STRIP	79	ELIGARD 22.5MG	44
<i>droxidopa 300mg cap</i>	62	PLUS II		SYRINGE	
DRY EYE RELIEF DROPS	123	EASY TOUCH LANCING	100	ELIGARD 30MG	44
DULERA 100-5MCG	131	DEVICE		SYRINGE	
INHALER		EASY TOUCH TEST	79	ELIGARD 45MG	44
DULERA 200-5MCG	131	STRIPS		SYRINGE	
INHALER		EASY TRAK II TEST	79	ELIGARD 7.5MG	44
DULERA 50-5MCG	131	STRIPS		SYRINGE	
INHALER		EASY TRAK TEST STRIP	79	ELIQUIS 0.15MG	23
<i>duloxetine 20mg dr cap</i>	29	EASYGLUCO TEST	79	SPRINKLE CAP	
<i>duloxetine 30mg dr cap</i>	29	STRIPS		ELIQUIS 0.5MG TAB	23
<i>duloxetine 60mg dr cap</i>	29	EASYMAX 15 TEST	79	FOR ORAL SUSP DOSE	
DUPIXENT	60	STRIPS		PACK (112)	
200MG/1.14ML		EASYMAX TEST STRIPS	79	ELIQUIS 0.5MG TAB	23
AUTO-INJECTOR		<i>econazole nitrate 1%</i>	74	FOR ORAL SUSP DOSE	
DUPIXENT	60	<i>topical cream</i>		PACK (28)	
200MG/1.14ML		ED A-HIST DM LIQUID	69	ELIQUIS 0.5MG TAB	23
SYRINGE		ED A-HIST DM TAB	69	FOR ORAL SUSP DOSE	
DUPIXENT 300MG/2ML	60	ED A-HIST LIQUID	69	PACK (84)	
AUTO-INJECTOR		4-10MG/5ML		ELIQUIS 2.5MG TAB	23
DUPIXENT 300MG/2ML	60	ED A-HIST TAB	69	ELIQUIS 5MG TAB	23
SYRINGE		ED BRON GP LIQUID	70	ELIQUIS 5MG TAB	23
DURAFLU TAB	69	ED CHLORPED JR	36	30-DAY STARTER PACK	
DURAHIST TAB 2-60MG	69	SYRUP		(74)	
<i>dutasteride 0.5mg cap</i>	88	EDURANT 2.5MG TAB	57	ELITE-OB TAB	116
D-VI-SOL LIQUID 400	134	FOR ORAL SUSP		ELOCTATE INJ 1000UNIT	89
UNIT		<i>efavirenz 600mg tab</i>	57	ELOCTATE INJ 1500UNIT	89
D-VITE PEDIA DRO	134	<i>efavirenz/emtricitabine/te</i>	57	ELOCTATE INJ 2000UNIT	89
400UNIT		<i>nofovir disoproxil</i>		ELOCTATE INJ 250UNIT	89
E		<i>fumarate 600-200-300mg</i>		ELOCTATE INJ 3000UNIT	89
E-400 CAP 400UNIT	134	<i>tab</i>		ELOCTATE INJ 4000UNIT	89
EAR DROPS FOR	126	EFAVIRENZ/LAMIVUDIN	57	ELOCTATE INJ 5000UNIT	89
SWIMMERS		E/TENOFOVIR		ELOCTATE INJ 500UNIT	89
EARWAX REMOVE	126	DISOPROXIL		ELOCTATE INJ 6000UNIT	89
DROPS 6.5% OTIC		FUMARATE		ELOCTATE INJ 750UNIT	89
EASY COMFORT	100	400-300-300MG TAB		<i>eltrombopag olamine</i>	92
LANCETS		<i>efavirenz/lamivudine/teno</i>	57	<i>12.5mg powder for oral</i>	
EASY MINI EJECT	100	<i>fovir disoproxil fumarate</i>		<i>susp</i>	
LANCING DEVICE		<i>600-300-300mg tab</i>		<i>eltrombopag olamine</i>	92
		<i>electrolyte-148 inj</i>	118	<i>12.5mg tab</i>	

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ALPHABETICAL LISTING OF DRUGS

<i>eltrombopag olamine</i>	92	<i>emtricitabine/rilpivirine/t</i>	58	ENBUMYST	66
<i>25mg powder for oral</i>		<i>enofovir disoproxil</i>		0.5MG/0.1ML NASAL	
<i>susp</i>		<i>fumarate 200-25-300mg</i>		SPRAY	
<i>eltrombopag olamine</i>	92	<i>tab</i>		ENDACOF-DM LIQUID	70
<i>25mg tab</i>		<i>emtricitabine/tenofovir</i>	58	ENDAL LIQUID	70
<i>eltrombopag olamine</i>	92	<i>disoproxil fumarate</i>		ENDU-C/ROSE TAB	136
<i>50mg tab</i>		<i>100-150mg tab</i>		1000MG	
<i>eltrombopag olamine</i>	92	<i>emtricitabine/tenofovir</i>	58	ENDU-C/ROSE TAB	136
<i>75mg tab</i>		<i>disoproxil fumarate</i>		500MG	
<i>eluryng</i>	120	<i>133-200mg tab</i>		ENDUR-ACIN SR TAB	136
<i>0.120-0.015mg/24hr</i>		<i>emtricitabine/tenofovir</i>	58	250MG	
<i>vaginal system</i>		<i>disoproxil fumarate</i>		ENDUR-ACIN SR TAB	136
EMBRACE BLOOD	79	<i>167-250mg tab</i>		500MG	
GLUCOSE TEST		<i>emtricitabine/tenofovir</i>	58	ENEMA READY-TO-USE	98
EMBRACE LANCETS	100	<i>disoproxil fumarate</i>		ENEMEEZ KIDS ENEMA	99
21G		<i>200-300mg tab</i>		100/5ML	
EMBRACE LANCETS	100	EMTRIVA 10MG/ML	58	ENEMEEZ MINI ENEMA	99
28G		ORAL SOLN		ENEMEEZ PLUS ENEMA	99
EMBRACE LANCING	100	<i>enalapril maleate 10mg</i>	38	ENEMEEZ PLUS ENEMA	99
DEVICE		<i>tab</i>		20-283	
EMBRACE PRO TEST	79	<i>enalapril maleate 2.5mg</i>	38	ENERGIX-B	97
STRIPS		<i>tab</i>		10MCG/0.5ML SYRINGE	
EMBRACE TALK BLOOD	79	<i>enalapril maleate 20mg</i>	38	ENERGIX-B 20MCG/ML	97
GLUCOS		<i>tab</i>		INJ	
EMBRACE TALK TEST	79	<i>enalapril maleate 5mg</i>	38	ENERGIX-B 20MCG/ML	97
STRIPS		<i>tab</i>		SYRINGE	
EMBRACE TEST STRIPS	79	<i>enalapril</i>	41	<i>enilloring</i>	120
EMEND ORAL SUSP	35	<i>maleate/hydrochlorothiaz</i>		<i>0.120-0.015mg/24hr</i>	
125MG/5ML		<i>ide 10-25mg tab</i>		<i>vaginal system</i>	
EMGALITY 100MG/ML	103	<i>enalapril</i>	41	ENLYTE CAP	82
SYRINGE		<i>maleate/hydrochlorothiaz</i>		ENOB 60MG/ML	82
EMGALITY 120MG/ML	104	<i>ide 5-12.5mg tab</i>		SYRINGE	
AUTO-INJECTOR		ENBREL 25MG/0.5ML	60	<i>enoxaparin sodium</i>	23
EMGALITY 120MG/ML	104	INJ		<i>100mg/1ml syringe</i>	
SYRINGE		ENBREL 25MG/0.5ML	60	<i>enoxaparin sodium</i>	23
EMSAM 12MG/24HR	28	SYRINGE		<i>120mg/0.8ml syringe</i>	
PATCH		ENBREL 50MG/ML	60	<i>enoxaparin sodium</i>	23
EMSAM 6MG/24HR	28	CARTRIDGE		<i>150mg/1ml syringe</i>	
PATCH		ENBREL 50MG/ML	60	<i>enoxaparin sodium</i>	23
EMSAM 9MG/24HR	28	SYRINGE		<i>30mg/0.3ml syringe</i>	
PATCH		ENBREL SURECLICK	61	<i>enoxaparin sodium</i>	23
<i>emtricitabine 200mg cap</i>	57	50MG/ML		<i>40mg/0.4ml syringe</i>	
		AUTO-INJECTOR		<i>enoxaparin sodium</i>	23
				<i>60mg/0.6ml syringe</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>enoxaparin sodium</i>	23	EQ ONE DAILY TAB	113	<i>escitalopram 5mg tab</i>	28
<i>80mg/0.8ml syringe</i>		WOMENS		<i>eslicarbazepine acetate</i>	25
ENSACOVE 100MG CAP	46	EQL B COMPLX 50 TAB	111	<i>200mg tab</i>	
ENSACOVE 25MG CAP	46	EQL B-6 TAB 100MG	136	<i>eslicarbazepine acetate</i>	25
<i>enskyce tab 28-day pack</i>	120	EQL BIOTIN CAP	136	<i>400mg tab</i>	
<i>entacapone 200mg tab</i>	51	5000MCG		<i>eslicarbazepine acetate</i>	25
<i>entecavir 0.5mg tab</i>	59	EQL CALCIUM TAB	106	<i>600mg tab</i>	
<i>entecavir 1mg tab</i>	59	CITR/D3		<i>eslicarbazepine acetate</i>	25
ENTYVIO	61	EQL CALCIUM TAB	107	<i>800mg tab</i>	
108MG/0.68ML		W/VIT D		<i>esomeprazole 20mg dr</i>	87
AUTO-INJECTOR		EQL VIT C TAB 1000MG	136	<i>cap</i>	
<i>enulose 10gm/15ml oral</i>	86	EQL VIT E CAP 400UNIT	134	<i>esomeprazole 40mg dr</i>	87
<i>soln</i>		ERGOCALCIFEROL	134	<i>cap</i>	
ENVARUSUS XR 0.75MG	96	DROPS 8000 UNIT/ML		ESPEROCT INJ 1000	89
TAB		ERGOCALCIFEROL	134	UNIT	
ENVARUSUS XR 1MG TAB	96	SOLN 8000 UNIT/ML		ESPEROCT INJ 1500	90
ENVARUSUS XR 4MG TAB	96	ERIVEDGE 150MG CAP	43	UNIT	
E-OIL OIL 3000UNIT	134	ERLEADA 240MG TAB	44	ESPEROCT INJ 2000	90
EPIDIOLEX 100MG/ML	25	ERLEADA 60MG TAB	44	UNIT	
ORAL SOLN		<i>erlotinib 100mg tab</i>	43	ESPEROCT INJ 3000	90
<i>epinephrine</i>	131	<i>erlotinib 150mg tab</i>	43	UNIT	
<i>0.15mg/0.3ml</i>		<i>erlotinib 25mg tab</i>	43	ESPEROCT INJ 4000	90
<i>auto-injector (2pack)</i>		<i>errin 0.35mg tab 28-day</i>	120	UNIT	
<i>epinephrine 0.3mg/0.3ml</i>	131	<i>pack</i>		ESPEROCT INJ 500 UNIT	90
<i>auto-injector (2pack)</i>		<i>ertapenem 1gm inj</i>	19	ESSENTIA TAB	113
<i>eplerenone 25mg tab</i>	42	ERY 2% PAD	73	<i>estarylla tab 28-day pack</i>	120
<i>eplerenone 50mg tab</i>	42	<i>erythromycin 0.5% ophth</i>	124	<i>estradiol 0.01% vaginal</i>	122
EPOGEN INJ	92	<i>ointment</i>		<i>cream</i>	
10000UNIT/ML		ERYTHROMYCIN 2%	73	<i>estradiol 0.01mg/24hr</i>	122
EPOGEN INJ	92	TOPICAL GEL		<i>twice weekly patch</i>	
20000UNIT/ML		<i>erythromycin 2% topical</i>	73	<i>estradiol 0.025mg/24hr</i>	122
EPOGEN INJ	92	<i>soln</i>		<i>twice weekly patch</i>	
2000UNIT/ML		<i>erythromycin 250mg dr</i>	22	<i>estradiol 0.025mg/24hr</i>	122
EPOGEN INJ	92	<i>tab</i>		<i>weekly patch</i>	
3000UNIT/ML		<i>erythromycin 250mg tab</i>	22	<i>estradiol 0.0375mg/24hr</i>	122
EPOGEN INJ	92	<i>erythromycin 333mg dr</i>	22	<i>twice weekly patch</i>	
4000UNIT/ML		<i>tab</i>		<i>estradiol 0.0375mg/24hr</i>	122
EPOPROSTENOL INJ	67	<i>erythromycin 500mg dr</i>	22	<i>weekly patch</i>	
0.5MG		<i>tab</i>		<i>estradiol 0.05mg/24hr</i>	122
EPOPROSTENOL INJ	67	<i>erythromycin 500mg tab</i>	22	<i>twice weekly patch</i>	
1.5MG		<i>escitalopram 10mg tab</i>	28	<i>estradiol 0.05mg/24hr</i>	122
EQ COMPLETE TAB	113	<i>escitalopram 1mg/ml oral</i>	28	<i>weekly patch</i>	
ADULT		<i>soln</i>		<i>estradiol 0.06mg/24hr</i>	122
		<i>escitalopram 20mg tab</i>	28	<i>weekly patch</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>estradiol 0.075mg/24hr</i>	122	<i>ethinyl estradiol/ethinyl</i>	120	<i>etodolac 300mg cap</i>	12
<i>twice weekly patch</i>		<i>estradiol/levonorgestrel</i>		<i>etodolac 400mg tab</i>	12
<i>estradiol 0.075mg/24hr</i>	122	<i>0.01-0.02-0.1mg tab</i>		<i>etodolac 500mg tab</i>	12
<i>weekly patch</i>		<i>91-day pack</i>		ETOPOSIDE CAP 50MG	51
<i>estradiol 0.1%</i>	122	<i>ethinyl</i>	120	<i>etravirine 100mg tab</i>	58
<i>(0.25mg/0.25gm) topical</i>		<i>estradiol/etonogestrel</i>		<i>etravirine 200mg tab</i>	58
<i>gel</i>		<i>0.120-0.015 mg/24hr</i>		EUCRISA 2% TOPICAL	77
<i>estradiol 0.1%</i>	122	<i>vaginal system</i>		OINTMENT	
<i>(0.5mg/0.5gm) topical gel</i>		<i>ethinyl estradiol/inert</i>	120	EULEXIN 125MG CAP	44
<i>estradiol 0.1%</i>	122	<i>ingredients/levonorgestre</i>		EVENCARE G2 TEST	79
<i>(0.75mg/0.75gm) topical</i>		<i>l 0.02-1-0.1mg tab 28-day</i>		STRIPS	
<i>gel</i>		<i>pack</i>		EVENCARE G3 TEST	79
<i>estradiol 0.1%</i>	122	<i>ethinyl estradiol/inert</i>	120	STRIPS	
<i>(1.25mg/1.25gm) topical</i>		<i>ingredients/levonorgestre</i>		EVENCARE MINI TEST	79
<i>gel</i>		<i>l 0.03-1-0.15mg tab</i>		STRIP	
<i>estradiol 0.1% (1mg/gm)</i>	123	<i>91-day pack</i>		EVENCARE PROVIEW	79
<i>topical gel</i>		<i>ethinyl estradiol/inert</i>	120	BLOOD GL	
<i>estradiol 0.1mg/24hr</i>	123	<i>ingredients/norgestimate</i>		<i>everolimus 0.25mg tab</i>	96
<i>weekly patch</i>		<i>0.035-1-0.25mg tab</i>		<i>everolimus 0.5mg tab</i>	96
<i>estradiol 0.5mg tab</i>	123	<i>28-day pack</i>		<i>everolimus 0.75mg tab</i>	96
<i>estradiol 10mcg vaginal</i>	123	<i>ethinyl</i>	123	<i>everolimus 10mg tab</i>	46
<i>insert</i>		<i>estradiol/norethindrone</i>		<i>everolimus 1mg tab</i>	96
<i>estradiol 1mg tab</i>	123	<i>acetate 0.0025-0.5mg tab</i>		<i>everolimus 2.5mg tab</i>	46
<i>estradiol 2mg tab</i>	123	<i>28 day-pack</i>		<i>everolimus 2mg tab for</i>	46
<i>estradiol valerate</i>	123	<i>ethinyl</i>	123	<i>oral susp</i>	
<i>10mg/ml inj</i>		<i>estradiol/norethindrone</i>		<i>everolimus 3mg tab for</i>	46
<i>estradiol valerate</i>	123	<i>acetate 0.005-1mg 28-day</i>		<i>oral susp</i>	
<i>20mg/ml inj</i>		<i>pack</i>		<i>everolimus 5mg tab</i>	46
<i>estradiol valerate</i>	123	<i>ethinyl</i>	120	<i>everolimus 5mg tab for</i>	46
<i>40mg/ml inj</i>		<i>estradiol/norethindrone</i>		<i>oral susp</i>	
<i>estradiol/norethindrone</i>	123	<i>acetate 0.02-1mg tab</i>		<i>everolimus 7.5mg tab</i>	46
<i>acetate 0.5-0.1mg tab</i>		<i>21-day pack</i>		EVOLUTION TEST	79
<i>28-day pack</i>		<i>ethinyl</i>	120	STRIPS	
<i>estradiol/norethindrone</i>	123	<i>estradiol/norgestimate</i>		EVOTAZ 300-150MG	58
<i>acetate 1-0.5mg 28-day</i>		<i>0.18-25/0.215-25/0.25-25</i>		TAB	
<i>pack</i>		<i>mg-mcg tab 28-day pack</i>		EVRYSDI 0.75MG/ML	109
<i>eszopiclone 1mg tab</i>	133	<i>ethinyl</i>	120	ORAL SOLN	
<i>eszopiclone 2mg tab</i>	133	<i>estradiol/norgestimate</i>		EVRYSDI 5MG TAB	109
<i>eszopiclone 3mg tab</i>	133	<i>0.18-35/0.215-35/0.25-35</i>		<i>exemestane 25mg tab</i>	44
<i>ethambutol 100mg tab</i>	42	<i>mg-mcg tab 28-day pack</i>		EXXUA 18.2MG ER TAB	29
<i>ethambutol 400mg tab</i>	42	<i>ethosuximide 250mg cap</i>	27	EXXUA 18.2MG TAB	29
		<i>ethosuximide 50mg/ml</i>	27	TITRATION PACK (32)	
		<i>oral soln</i>		EXXUA 36.3MG ER TAB	29
		<i>etodolac 200mg cap</i>	12	EXXUA 54.5MG ER TAB	29

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

EXXUA 72.6MG ER TAB	29	FASENRA 10MG/0.5ML	61	FERIVAFA CAP 110-1MG	93
EYE DROPS ADVANCED RELIEF	125	SYRINGE		FERRALET 90 TAB	93
EYE ITCH RELIEF	125	FASENRA 30MG/ML	61	FERRETTS IPS SOLN	94
DROPS 0.025%		AUTO-INJECTOR		FERRETTS TAB	94
EYE ITCH RELIEF	125	FASENRA 30MG/ML	61	FERREX 150 CAP	94
OPHTH SOLN 0.025%		SYRINGE		FERREX 150 CAP	93
EYE WASH SOLN	125	<i>febuxostat 40mg tab</i>	88	150MG	
EZ SMART PLUS TEST STRIPS	79	<i>febuxostat 80mg tab</i>	88	FERREX 150 FORTE CAP	93
EZ SMART TEST STRIPS	79	FEIBA INJ	90	FERREX-150 CAP	94
<i>ezetimibe 10mg tab</i>	37	FEIBA NF INJ	90	FERRIMIN TAB 150MG	94
<i>ezetimibe/simvastatin 10-10mg tab</i>	37	<i>feirza 1.5/30 tab 28-day pack</i>	120	FERROUS FUMARATE	94
<i>ezetimibe/simvastatin 10-20mg tab</i>	37	<i>feirza 1/20 tab 28-day pack</i>	120	TAB 324MG	
<i>ezetimibe/simvastatin 10-40mg tab</i>	37	<i>felbamate 120mg/ml oral susp</i>	27	FERROUS GLUCONATE	94
<i>ezetimibe/simvastatin 10-80mg tab</i>	37	<i>felbamate 400mg tab</i>	27	TAB 240MG	
EZFE 200 CAP 200MG	94	<i>felbamate 600mg tab</i>	27	FERROUS GLUCONATE	94
F		<i>felodipine 10mg er tab</i>	64	TAB 324MG	
<i>falmina tab 28-day pack</i>	120	<i>felodipine 2.5mg er tab</i>	64	FERROUS SULF EC TAB	94
<i>famciclovir 125mg tab</i>	59	<i>felodipine 5mg er tab</i>	64	325MG	
<i>famciclovir 250mg tab</i>	59	<i>fenofibrate 134mg cap</i>	37	FERROUS SULF LIQ	94
<i>famciclovir 500mg tab</i>	59	<i>fenofibrate 145mg tab</i>	37	44MG/5ML	
<i>famotidine 20mg tab</i>	87	<i>fenofibrate 160mg tab</i>	37	FERROUS SULF SOLN	94
<i>famotidine 40mg tab</i>	87	<i>fenofibrate 200mg cap</i>	37	220/5ML	
FAMOTIDINE TAB 10MG	133	<i>fenofibrate 43mg cap</i>	37	FERROUS SULF SOLN	94
FANAPT 10MG TAB	53	<i>fenofibrate 48mg tab</i>	37	300/5ML	
FANAPT 12MG TAB	53	<i>fenofibrate 54mg tab</i>	37	FERROUS SULF TAB	94
FANAPT 1MG TAB	53	<i>fenofibrate 67mg cap</i>	37	325MG	
FANAPT 2MG TAB	53	<i>fenofibric acid 135mg dr cap</i>	38	FERROUS SULF TAB	94
FANAPT 4MG TAB	53	<i>fenofibric acid 45mg dr cap</i>	38	325MG EC	
FANAPT 6MG TAB	53	<i>fentanyl 100mcg/hr patch</i>	13	FERROUS SULFATE	94
FANAPT 8MG TAB	53	<i>fentanyl 12mcg/hr patch</i>	13	FERROUS SULFATE EC	94
FANAPT TAB TITRATION	53	<i>fentanyl 25mcg/hr patch</i>	13	TAB 325MG	
PACK (8)		<i>fentanyl 50mcg/hr patch</i>	13	FERROUS SULFATE	94
FANAPT TAB TITRATION	53	<i>fentanyl 75mcg/hr patch</i>	13	ELIXIR 220MG/5ML	
PACK B (12)		FEOSOL BIFER TAB	93	FERROUS SULFATE	94
FANAPT TAB TITRATION	54	28MG		LIQUID 220 MG/5ML	
PACK C (8)		FEOSOL TAB 200MG	94	FERROUS SULFATE	94
FARXIGA 10MG TAB	33	FERATE TAB 27MG	94	SYRUP	
FARXIGA 5MG TAB	33	FER-IN-SOL SOLN	94	FERROUS SULFATE	94
		FERIVA TAB 21/7	93	SYRUP 300 MG/5ML	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

FERROUS SULFATE	95	<i>fin</i> golimod 0.5mg cap	128	<i>fludrocortisone acetate</i>	84
SYRUP 300MG/5ML		FINTEPLA 2.2MG/ML	25	0.1mg tab	
FERROUS SULFATE TAB	95	ORAL SOLN		<i>flunisolide</i> 0.025%	117
324MG		FIRMAGON 120MG INJ	44	(25mcg/act) nasal inhaler	
FERROUS SULFATE TAB	95	FIRMAGON 80MG INJ	44	<i>fluocinolone acetonide</i>	126
324MG EC		<i>flecainide acetate</i> 100mg	62	0.01% otic soln	
FERROUS SULFATE TAB	95	tab		<i>fluocinolone acetonide</i>	76
325MG		<i>flecainide acetate</i> 150mg	62	0.01% topical cream	
FERROUS SULFATE TAB	95	tab		<i>fluocinolone acetonide</i>	76
EC 324 MG		<i>flecainide acetate</i> 50mg	62	0.01% topical oil	
FERROUS SULFATE TAB	95	tab		<i>fluocinolone acetonide</i>	76
EC 324 MG (65 MG FE		FLEET PEDIATRIC	98	0.01% topical soln	
EQUIVALENT)		ENEMA		<i>fluocinolone acetonide</i>	76
<i>fesoterodine fumarate</i>	87	FLEXICHAMBER	103	0.025% topical cream	
4mg er tab		FLEXICHAMBER WITH	103	<i>fluocinolone acetonide</i>	76
<i>fesoterodine fumarate</i>	87	MASK		0.025% topical ointment	
8mg er tab		FLINTSTONES CHW	116	<i>fluocinonide</i> 0.05%	76
FETZIMA 120MG ER	29	COMPLETE		topical cream	
CAP		FLINTSTONES CHW	116	<i>fluocinonide</i> 0.05%	76
FETZIMA 20MG ER CAP	29	EXTRA C		topical e cream	
FETZIMA 40MG ER CAP	29	FLINTSTONES CHW MY	116	<i>fluocinonide</i> 0.05%	76
FETZIMA 80MG ER CAP	29	FIRST		topical gel	
FETZIMA ER CAP	29	FLORIVA CHEW TAB	116	<i>fluocinonide</i> 0.05%	76
TITRATION PACK (28)		FLORIVA DROPS	108	topical ointment	
FE-VITE IRON SOLN	95	FLORIVA PLUS DROPS	115	<i>fluocinonide</i> 0.05%	76
15MG/ML		FLOWFLEX KIT HOME	79	topical soln	
FEXOFENADINE TAB	37	TEST		<i>fluocinonide</i> 0.1% topical	76
180MG		FLU HMP TAB	70	cream	
FEXOFENADINE TAB	37	10-352-2MG		<i>fluorometholone</i> 0.1%	125
60MG		<i>fluconazole</i> 100mg tab	35	<i>ophth susp</i>	
FEXOFENADINE/PSE	70	<i>fluconazole</i> 10mg/ml oral	35	FLUOROURACIL 2%	74
TAB 60-120MG		susp		TOPICAL SOLN	
FIASP 100UNIT/ML INJ	32	<i>fluconazole</i> 150mg tab	35	<i>fluorouracil</i> 5% topical	74
FIASP 100UNIT/ML PEN	32	<i>fluconazole</i> 200mg tab	35	cream	
CARTRIDGE		<i>fluconazole</i> 200mg/100ml	35	<i>fluorouracil</i> 5% topical	74
FIASP FLEXTOUCH	32	inj		soln	
100UNIT/ML PEN INJ		<i>fluconazole</i> 400mg/200ml	35	<i>fluoxetine</i> 10mg cap	28
(3ML)		inj		<i>fluoxetine</i> 20mg cap	28
FIBER LAX TAB 625MG	98	<i>fluconazole</i> 40mg/ml oral	35	<i>fluoxetine</i> 40mg cap	28
FIBER TAB 625MG	98	susp		<i>fluoxetine</i> 4mg/ml oral	28
<i>fidaxomicin</i> 200mg tab	22	<i>fluconazole</i> 50mg tab	35	soln	
FILSPARI 200MG TAB	88	<i>flucytosine</i> 250mg cap	35	<i>fluoxetine</i> 60mg tab	28
FILSPARI 400MG TAB	88	<i>flucytosine</i> 500mg cap	35	FLUPHENAZINE	55
<i>finasteride</i> 5mg tab	88			0.5MG/ML ORAL SOLN	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>fluphenazine 10mg tab</i>	55	<i>fluvoxamine maleate</i>	28	FORACARE PREMIUM	80
<i>fluphenazine 1mg tab</i>	55	<i>50mg tab</i>		TEST STRIPS	
<i>fluphenazine 2.5mg tab</i>	55	FOLBEE PLUS TAB	111	FORACARE TEST STRIPS	80
FLUPHENAZINE	55	FOLIC ACID INJ	92	FORMOTEROL NEB	17
2.5MG/ML INJ		5MG/ML		SOLN 20/2ML	
<i>fluphenazine 5mg tab</i>	55	FOLIC ACID TAB 1MG	92	FORMOTEROL NEB	17
FLUPHENAZINE	55	FOLIC ACID/VITAMIN	82	SOLN 20MCG/2ML	
5MG/ML ORAL SOLN		B-6/VITAMIN B-12 TAB		FORTAVIT CAP	113
<i>fluphenazine decanoate</i>	55	FOLIC ACID/VITAMIN	82	<i>fosamprenavir 700mg tab</i>	58
<i>25mg/ml inj</i>		B-6/VITAMIN B-12 TAB		<i>fosfomycin 3gm powder</i>	19
FLURBIPROFEN	125	FOLIC ACID/VITAMIN	82	<i>for oral soln</i>	
SODIUM 0.03% OPTH		B-6/VITAMIN B-12 TAB		<i>fosinopril sodium 10mg</i>	38
SOLN		FOLITAB 500 TAB	93	<i>tab</i>	
FLUTICASONE	131	FOLIVANE-OB CAP	116	<i>fosinopril sodium 20mg</i>	38
FUROATE/VILANTEROL		FOLTABS 800 TAB	93	<i>tab</i>	
100-25MCG/INH		FOLTANX TAB	82	<i>fosinopril sodium 40mg</i>	38
POWDER INHALER		FOLTRATE TAB	93	<i>tab</i>	
FLUTICASONE	131	<i>fondaparinux sodium</i>	23	<i>fosinopril</i>	41
FUROATE/VILANTEROL		<i>10mg/0.8ml syringe</i>		<i>sodium/hydrochlorothiazide 10-12.5mg tab</i>	
200-25MCG/INH		<i>fondaparinux sodium</i>	23	<i>fosinopril</i>	41
POWDER INHALER		<i>2.5mg/0.5ml syringe</i>		<i>sodium/hydrochlorothiazide 20-12.5mg tab</i>	
<i>fluticasone propionate</i>	76	<i>fondaparinux sodium</i>	23	FOTIVDA 0.89MG CAP	46
<i>0.005% topical ointment</i>		<i>5mg/0.4ml syringe</i>		FOTIVDA 1.34MG CAP	46
<i>fluticasone propionate</i>	76	<i>fondaparinux sodium</i>	23	FREESTYLE INSULINX	80
<i>0.05% topical cream</i>		<i>7.5mg/0.6ml syringe</i>		TEST STRIPS	
<i>fluticasone propionate</i>	117	FORA 6 CONNECT TEST	79	FREESTYLE LITE TEST	80
<i>50mcg/act nasal inhaler</i>		STRIPS		STRIPS	
<i>fluticasone</i>	131	FORA 6 CONNECT/GTEL	80	FREESTYLE PRECISION	80
<i>propionate/salmeterol</i>		BLOOD TEST STRIPS		NEO TEST STRIPS	
<i>100-50mcg/act powder</i>		FORA G20 TEST STRIPS	80	FREESTYLE TEST	80
<i>inhaler</i>		FORA GD20 TEST	80	STRIPS	
<i>fluticasone</i>	131	STRIPS		FRUIT C CHW 500MG	136
<i>propionate/salmeterol</i>		FORA GD50 TEST	80	FRUZAQLA 1MG CAP	43
<i>250-50mcg/act powder</i>		STRIPS		FRUZAQLA 5MG CAP	43
<i>inhaler</i>		FORA GTEL TEST STRIPS	80	FT ALLERGY TAB 10MG	37
<i>fluticasone</i>	131	FORA LANCETS	100	FT ARTHRITIS GEL 1%	74
<i>propionate/salmeterol</i>		FORA LANCING DEVICE	100	FT CAMPHOR SOLN	67
<i>500-50mcg/act powder</i>		FORA TEST STRIP	80	SPIRIT	
<i>inhaler</i>		FORA TEST STRIPS	80	FT CENTURY MEN	113
<i>fluvoxamine maleate</i>	28	FORA V10 TEST STRIPS	80	FT CENTURY TAB 50	113
<i>100mg tab</i>		FORA V30A TEST STRIPS	80	PLUS	
<i>fluvoxamine maleate</i>	28	FORA VOICE TEST STRIPS	80		
<i>25mg tab</i>		FORACARE GD40 TEST	80		
		STRIPS			

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

FT CENTURY TAB ADULTS	113	<i>galantamine</i> <i>hydrobromide 24mg er</i> <i>cap</i>	127	<i>gavilyte-n powder for</i> <i>oral soln</i>	86
FT CENTURY TAB WOMEN	113	GALANTAMINE	127	GAVRETO 100MG CAP	46
FT CENTURY TAB WOMEN 50 PLUS	113	HYDROBROMIDE		GE100 TEST STRIPS	80
FT ELECTROLYTE SOLN	107	4MG/ML ORAL SOLN		<i>gefitinib 250mg tab</i>	43
FT IRON TAB 65MG	95	<i>galantamine</i>	127	<i>gemfibrozil 600mg tab</i>	38
FT PINWORM SUSP 144MG/ML	16	<i>hydrobromide 8mg er cap</i>		GEMTESA 75MG TAB	87
FT SENNA-S TAB 8.6-50MG	98	<i>gallifrey 5mg tab</i>	123	<i>generlac 10gm/15ml oral</i> <i>soln</i>	86
FULPHILA 6MG/0.6ML SYRINGE	92	GAMMAGARD 10GM INJ	96	GENSTRIP 50 TEST STRIPS	80
FUNGOID TINCTURE SOLN 2%	74	GAMMAGARD	96	<i>gentamicin 0.1% topical</i> <i>cream</i>	73
<i>furosemide 10mg/ml inj</i>	66	10GM/100ML INJ		<i>gentamicin 0.1% topical</i> <i>ointment</i>	73
FUROSEMIDE 10MG/ML ORAL SOLN	66	GAMMAGARD	96	<i>gentamicin 0.3% ophth</i> <i>soln</i>	124
<i>furosemide 20mg tab</i>	66	GAMMAGARD 5GM INJ	96	GENTAMICIN 0.8MG/ML INJ	18
<i>furosemide 40mg tab</i>	66	GAMMAGARD	96	GENTAMICIN 1.2MG/ML INJ	18
<i>furosemide 80mg tab</i>	66	5GM/50ML INJ		GENTAMICIN 1.6MG/ML INJ	18
FUROSEMIDE 8MG/ML ORAL SOLN	66	GAMMAGARD ERC	96	GENTAMICIN 1MG/ML INJ	18
FUSION CAP	93	10GM/100ML INJ		<i>gentamicin 40mg/ml inj</i>	18
FUSION PLUS CAP	93	GAMMAGARD ERC	96	GENTEEL LANCETS	100
<i>fyavolv 0.0025-0.5mg tab</i>	123	5GM/50ML INJ		GENVOYA	58
<i>fyavolv 0.005-1mg tab</i>	123	GAMMAGARD ERC	96	150-150-200-10MG TAB	
G		GAMUNEX 1GM/10ML INJ	97	GERI-VITE	113
<i>gabapentin 100mg cap</i>	25	GAMUNEX-C INJ	127	GHT TEST STRIPS	80
<i>gabapentin 300mg cap</i>	25	40MG/400ML		GILOTRIF 20MG TAB	43
<i>gabapentin 400mg cap</i>	25	GARDASIL 9 INJ	97	GILOTRIF 30MG TAB	43
<i>gabapentin 50mg/ml oral</i> <i>soln</i>	25	GARDASIL 9 SYRINGE	97	GILOTRIF 40MG TAB	43
<i>gabapentin 600mg tab</i> <i>(neurontin equiv)</i>	25	GAS RELIEF CAP 125MG	85	<i>glatiramer acetate</i> <i>20mg/ml syringe</i>	128
<i>gabapentin 800mg tab</i>	25	GAS RELIEF CAP 180MG	85	<i>glatiramer acetate</i> <i>40mg/ml syringe</i>	128
<i>galantamine 12mg tab</i>	127	GAS RELIEF CHEW 125MG	85	<i>glatopa 20mg/ml syringe</i>	128
<i>galantamine 4mg tab</i>	127	GAS RELIEF CHEW 80MG	85	<i>glatopa 40mg/ml syringe</i>	128
<i>galantamine 8mg tab</i>	127	GAS RELIEF DROPS INFANT	85	<i>glimepiride 1mg tab</i>	33
<i>galantamine</i>	127	GAUZE PAD 2x2 (INSULIN USE)	100	<i>glimepiride 2mg tab</i>	33
<i>hydrobromide 16mg er</i> <i>cap</i>		GAVILAX POWDER	98	<i>glimepiride 4mg tab</i>	33
		GAVILYTE-C POWDER FOR ORAL SOLN	86	<i>glipizide 10mg er tab</i>	33
		<i>gavilyte-g powder for</i> <i>oral soln</i>	86		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>glipizide 10mg tab</i>	33	GLUCOSE/SODIUM	118	GNP ONE DAILY	113
<i>glipizide 2.5mg er tab</i>	33	CHLORIDE 10%-0.2%		WOMENS HEALTH TAB	
<i>glipizide 5mg er tab</i>	33	INJ		GNP TEST STRIPS	80
<i>glipizide 5mg tab</i>	34	GLUCOSE/SODIUM	118	GNP VIT B-12 TAB 1000	92
<i>glipizide/metformin</i>	31	CHLORIDE 10%-0.45%		PR	
<i>2.5-250mg tab</i>		INJ		GNP VIT B-12 TAB	92
<i>glipizide/metformin</i>	31	GLUCOSE/SODIUM	118	500MCG	
<i>2.5-500mg tab</i>		CHLORIDE 2.5%-0.45%		GNP VIT C CHW 500MG	136
<i>glipizide/metformin</i>	31	INJ		GNP VIT C PR TAB	136
<i>5-500mg tab</i>		<i>glyburide 1.25mg tab</i>	34	500MG	
GLUCOCARD	80	<i>glyburide 2.5mg tab</i>	34	GNP VIT C TAB 1000MG	136
EXPRESSION TEST		<i>glyburide 5mg tab</i>	34	GNP VIT C/RH TAB	136
STRIPS		<i>glyburide/metformin</i>	31	1000MG	
GLUCOCARD KIT	100	<i>1.25-250mg tab</i>		GNP VIT E CAP 400UNIT	134
GLUCOCARD SENSOR	80	<i>glyburide/metformin</i>	31	GNP VITAMIN B-6 TAB	136
PLUS TEST STRIPS		<i>2.5-500mg tab</i>		100MG	
GLUCOCARD SHINE	80	<i>glyburide/metformin</i>	31	GNP VITAMIN C DROPS	136
TEST STRIPS		<i>5-500mg tab</i>		GNP VITAMIN C TAB	136
GLUCOCARD VITAL	80	GLYCERIN SUPP 1.2GM	99	250MG	
TEST STRIPS		GLYCERIN SUPP 2GM	99	GOJJI LANCETS 30G	100
GLUCOCOM TEST	80	<i>glycopyrrolate 1mg tab</i>	86	GOJJI LANCING DEVICE	100
STRIPS		<i>glycopyrrolate 2mg tab</i>	86	GOJJI TEST STRIPS	80
GLUCONAVII TEST	80	GNP B-12 SUB	92	GOMEKLI 1MG CAP	46
STRIPS		2500MCG		GOMEKLI 1MG TAB	46
<i>glucose 50mg/ml inj</i>	118	GNP BIOTIN CAP	136	FOR ORAL SUSP	
<i>glucose</i>	118	5000MCG		GOMEKLI 2MG CAP	46
<i>50mg/ml/potassium</i>		GNP CENTURY MATURE	113	<i>granisetron 1mg tab</i>	35
<i>chloride</i>		TAB		<i>griseofulvin 125mg tab</i>	35
<i>0.02meq/ml/sodium</i>		GNP CENTURY TAB	113	<i>griseofulvin 250mg tab</i>	35
<i>chloride 4.5mg/ml inj</i>		GNP ESSENTIAL ONE	115	<i>griseofulvin 25mg/ml oral</i>	35
GLUCOSE	118	DAILY TAB		<i>susp</i>	
50MG/ML/SODIUM		GNP ESSENTIAL ONE	115	<i>griseofulvin 500mg tab</i>	35
CHLORIDE 2MG/ML INJ		DAILY TAB		GUAIFENESIN LIQUID	71
<i>glucose 50mg/ml/sodium</i>	118	GNP IRON TAB 45MG	95	100MG/5ML	
<i>chloride 4.5mg/ml inj</i>		GNP IRON TAB 65MG	95	GUAIFENESIN TAB	72
<i>glucose 50mg/ml/sodium</i>	118	GNP LANCETS 30G	100	600MG ER	
<i>chloride 9mg/ml inj</i>		GNP LANCETS 33G	100	GUAIFENESIN/CODEINE	70
<i>glucose/potassium</i>	118	GNP LITTLE ONES CHW	116	SOLN 100-10MG/5ML	
<i>chloride/sodium chloride</i>		GNP MEGA MULTI FOR	113	GUAIFENESIN/DEXTRO	70
<i>5%-10meq-0.45% inj</i>		MEN TAB		METHORPHAN SYRUP	
<i>glucose/potassium</i>	118	GNP MEGA MULTI FOR	113	100-10/5	
<i>chloride/sodium chloride</i>		WOMEN TAB		GUAIFENESIN/PSE ER	70
<i>5%-40meq-0.45% inj</i>		GNP ONE DAILY MENS	113	TAB 120/1200	
		HEALTH TAB		<i>guanfacine 1mg er tab</i>	10

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>guanfacine 1mg tab</i>	40	<i>haloperidol 2mg/ml oral soln</i>	53	HEMORRHOIDAL CREAM	15
<i>guanfacine 2mg er tab</i>	10	<i>haloperidol 5mg tab</i>	53	HEMORRHOIDAL OINT	15
<i>guanfacine 2mg tab</i>	40	<i>haloperidol 5mg/ml inj</i>	53	HEMORRHOIDAL OINTMENT	15
<i>guanfacine 3mg er tab</i>	10	<i>haloperidol decanoate 100mg/ml (1ml) inj</i>	53	HEMORRHOIDAL SUPP	15
<i>guanfacine 4mg er tab</i>	10	<i>haloperidol decanoate 100mg/ml (5ml) inj</i>	53	HEMORRHOIDAL SUPP	15
GUMMI BEAR CHW MULTIVIT	115	<i>haloperidol decanoate 50mg/ml (1ml) inj</i>	53	<i>heparin sodium porcine 10000unit/ml inj</i>	23
GVOKE 1MG/0.2ML INJ	31	<i>haloperidol decanoate 50mg/ml (5ml) inj</i>	53	<i>heparin sodium porcine 1000unit/ml inj</i>	23
GVOKE 1MG/0.2ML SYRINGE	31	HARMONY BLOOD	80	<i>heparin sodium porcine 20000unit/ml inj</i>	23
GVOKE HYPOPEN 0.5MG/0.1ML	31	GLUCOSE TES	97	<i>heparin sodium porcine 5000unit/ml inj</i>	23
AUTO-INJECTOR		HAVRIX 1440ELU/ML SYRINGE	97	HEPLISAV-B	97
GVOKE HYPOPEN 1MG/0.2ML	31	HAVRIX 720ELU/0.5ML SYRINGE	97	20MCG/0.5ML SYRINGE	
AUTO-INJECTOR		HEAD	70	HERNEXEOS 60MG TAB	50
H		CONGESTION/MUCUS TAB		HIBERIX 10MCG INJ	97
HADLIMA 40MG/0.4ML SYRINGE	61	HEALTHPRO TEST STRIPS	80	HIGH POTENCY TAB	113
HADLIMA 40MG/0.8ML SYRINGE	61	HEARTBRN REL SUSP	15	MV/FA	
HADLIMA PUSHTOUCH 40MG/0.4ML	61	CHERRY		HISTEX PD DROPS	36
AUTO-INJECTOR		HEARTBURN TAB	133	HISTEX PD DROPS	36
HADLIMA PUSHTOUCH 40MG/0.8ML	61	RELIEF		1.25MG	
AUTO-INJECTOR		<i>heather 0.35mg tab 28-day pack</i>	120	HISTEX SYRUP	36
HAEGARDA 2000UNIT INJ	96	HEMLIBRA INJ	90	HISTEX-DM SYRUP	70
HAEGARDA 3000UNIT INJ	96	105MG/0.7ML		HIZENTRA INJ	126
<i>hailey fe 1/20 tab 28-day pack</i>	120	HEMLIBRA INJ	90	HIZENTRA INJ	127
HALLS DEFENSE LOZ	136	150MG/ML		10GM/50ML	
VIT C		HEMLIBRA INJ	90	HIZENTRA INJ	127
<i>halobetasol propionate 0.05% topical cream</i>	76	300MG/2ML		1GM/5ML	
<i>halobetasol propionate 0.05% topical ointment</i>	76	HEMLIBRA INJ	90	HIZENTRA INJ	127
<i>haloperidol 0.5mg tab</i>	52	30MG/ML		2GM/10ML	
<i>haloperidol 10mg tab</i>	52	HEMLIBRA INJ	90	HIZENTRA SOLN 20%	127
<i>haloperidol 1mg tab</i>	53	60MG/0.4ML		HOLD CHAMBER	103
<i>haloperidol 20mg tab</i>	53	HEMLIBRA SOLN	90	ADULT LARGE	
<i>haloperidol 2mg tab</i>	53	12MG/0.4ML		HOLD CHAMBER	103
		HEMOCYTE PLUS CAP	93	MEDIUM	
		HEMOCYTE-F TAB	93	HOLD CHAMBER	103
		HEMOFIL M INJ	90	SMALL	
				HUMALOG 100UNIT/ML	32
				CARTRIDGE	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

HUMALOG JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	HYDRALYTE SOLUTION ORANGE	107	<i>hydrochlorothiazide/olme sartan medoxomil</i>	41
HUMALOG KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	HYDRATING PAK ELECTROLYTE	107	<i>12.5-20mg tab</i>	
HUMALOG KWIKPEN 200UNIT/ML PEN INJ (3ML)	32	HYDRATION MULTIPLIER POWDER	107	<i>hydrochlorothiazide/olme sartan medoxomil</i>	41
HUMALOG MIX (50/50) KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	<i>hydrochlorothiazide</i> <i>12.5mg cap</i>	66	<i>hydrochlorothiazide/olme sartan medoxomil</i>	41
HUMALOG MIX (75/25) 100UNIT/ML INJ	32	<i>hydrochlorothiazide</i> <i>12.5mg tab</i>	66	<i>25-40mg tab</i>	
HUMALOG MIX (75/25) KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	<i>hydrochlorothiazide</i> <i>25mg tab</i>	66	<i>hydrochlorothiazide/spiro nolactone 25-25mg tab</i>	66
HUMALOG MIX (75/25) 100UNIT/ML INJ	32	<i>hydrochlorothiazide</i> <i>50mg tab</i>	66	<i>hydrochlorothiazide/telmi sartan 12.5-40mg tab</i>	41
HUMALOG MIX (75/25) KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	<i>hydrochlorothiazide/irbes artan 12.5-150mg tab</i>	41	<i>hydrochlorothiazide/telmi sartan 12.5-80mg tab</i>	41
HUMATE-P INJ	90	<i>hydrochlorothiazide/irbes artan 12.5-300mg tab</i>	41	<i>hydrochlorothiazide/telmi sartan 25-80mg tab</i>	41
HUMULIN (70/30) 100UNIT/ML INJ	32	<i>hydrochlorothiazide/lisin opril 12.5-10mg tab</i>	41	<i>hydrochlorothiazide/tria mterene 25-37.5mg cap</i>	66
HUMULIN (70/30) KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	<i>hydrochlorothiazide/lisin opril 12.5-20mg tab</i>	41	<i>hydrochlorothiazide/tria mterene 25-37.5mg tab</i>	66
HUMULIN N 100UNIT/ML INJ	32	<i>hydrochlorothiazide/lisin opril 12.5-20mg tab</i>	41	<i>hydrochlorothiazide/tria mterene 50-75mg tab</i>	66
HUMULIN N KWIKPEN 100UNIT/ML PEN INJ (3ML)	32	<i>hydrochlorothiazide/losar tan potassium</i>	41	<i>hydrochlorothiazide/vals artan 12.5-160mg tab</i>	41
HUMULIN R 100UNIT/ML INJ	32	<i>hydrochlorothiazide/losar tan potassium 12.5-50mg tab</i>	41	<i>hydrochlorothiazide/vals artan 12.5-320mg tab</i>	41
HUMULIN R U-500 KWIKPEN 500UNIT/ML PEN INJ (3ML)	32	<i>hydrochlorothiazide/losar tan potassium 25-100mg tab</i>	41	<i>hydrochlorothiazide/vals artan 12.5-80mg tab</i>	41
<i>hydralazine 100mg tab</i>	66	<i>hydrochlorothiazide/meto prolol tartrate 25-100mg tab</i>	41	<i>hydrochlorothiazide/vals artan 25-160mg tab</i>	41
<i>hydralazine 10mg tab</i>	67	<i>hydrochlorothiazide/meto prolol tartrate 25-50mg tab</i>	41	<i>hydrochlorothiazide/vals artan 25-320mg tab</i>	42
<i>hydralazine 25mg tab</i>	67	<i>hydrochlorothiazide/meto prolol tartrate 25-50mg tab</i>	41	<i>hydrocodone</i>	14
<i>hydralazine 50mg tab</i>	67	<i>hydrochlorothiazide/meto prolol tartrate 50-100mg tab</i>	41	<i>bitartrate/acetaminophen 0.5-21.7mg/ml oral soln</i>	
HYDRALYTE POWDER ORANGE	107			<i>hydrocodone</i>	14
HYDRALYTE SOLUTION BERRY	107			<i>bitartrate/acetaminophen 10-325mg tab</i>	
HYDRALYTE SOLUTION LEMONADE	107			<i>hydrocodone</i>	14

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>hydrocodone</i>	14	HYMPAVZI INJ	90	IDELVION INJ	90
<i>bitartrate/acetaminophen</i>		150MG/ML		IDELVION SOLN	90
<i>7.5-325mg tab</i>		HYPERSAL NEB SOLN	72	3500UNIT	
<i>hydrocodone</i>	14	3.5%		IDHIFA 100MG TAB	46
<i>bitartrate/ibuprofen</i>		HYPERSAL NEB SOLN	72	IDHIFA 50MG TAB	46
<i>7.5-200mg tab</i>		7%		IDVYNZO 100-0.25MG	58
HYDROCODONE	70	HYQVIA INJ	126	TAB	
POLISTIREX/CHLORPH		HYRNUO 10MG TAB	46	IFEREX 150 CAP	95
EN CR SUSP				IFEREX 150 FORTE CAP	93
10-8MG/5ML		I		IHEALTH BLOOD TEST	80
HYDROCODONE/HOMA	68	I.L.X. B-12 ELIXIR	93	GLUCOSE	
TROPINE SYRUP		<i>ibandronate 150mg tab</i>	82	<i>imatinib 100mg tab</i>	46
5-1.5MG/5ML		IBRANCE 100MG TAB	46	<i>imatinib 400mg tab</i>	47
HYDROCODONE/HOMA	68	IBRANCE 125MG CAP	46	IMBRUVICA 140MG CAP	47
TROPINE TAB 5-1.5MG		IBRANCE 125MG TAB	46	IMBRUVICA 140MG TAB	47
<i>hydrocortisone 1%</i>	76	IBRANCE 75MG TAB	46	IMBRUVICA 280MG TAB	47
<i>topical cream</i>		IBTROZI 200MG CAP	46	IMBRUVICA 420MG TAB	47
<i>hydrocortisone 1.67mg/ml</i>	15	<i>ibu 600mg tab</i>	12	IMBRUVICA 70MG CAP	47
<i>enema</i>		<i>ibu 800mg tab</i>	12	IMBRUVICA 70MG/ML	47
<i>hydrocortisone 10mg tab</i>	83	<i>ibuprofen 400mg tab</i>	12	ORAL SUSP	
<i>hydrocortisone 2.5%</i>	15	<i>ibuprofen 600mg tab</i>	12	<i>imipramine 10mg tab</i>	30
<i>perianal cream</i>		<i>ibuprofen 800mg tab</i>	12	<i>imipramine 25mg tab</i>	30
HYDROCORTISONE	76	IBUPROFEN CAP 200MG	12	<i>imipramine 50mg tab</i>	30
2.5% TOPICAL LOTION		IBUPROFEN CHEW TAB	12	<i>imiquimod 5% topical</i>	77
<i>hydrocortisone 2.5%</i>	76	100MG		<i>cream</i>	
<i>topical ointment</i>		IBUPROFEN SUSP	12	IMKELDI 80MG/ML	47
<i>hydrocortisone 20mg tab</i>	83	100/5ML		ORAL SOLN	
<i>hydrocortisone 5mg tab</i>	83	IBUPROFEN SUSP	12	IMOVAX 2.5UNIT/ML INJ	97
<i>hydromorphone 2mg tab</i>	13	100MG/5ML		<i>incassia 0.35mg tab</i>	120
<i>hydromorphone 4mg tab</i>	13	IBUPROFEN SUSP	12	<i>28-day pack</i>	
<i>hydromorphone 8mg tab</i>	13	40MG/ML		INCONTROL LANCETS	100
<i>hydroxychloroquine</i>	51	IBUPROFEN TAB 200	12	INCRELEX 40MG/4ML	84
<i>sulfate 200mg tab</i>		MG		INJ	
<i>hydroxyurea 500mg cap</i>	50	IBUPROFEN TAB 200MG	12	INCRUSE ELLIPTA	130
<i>hydroxyzine 10mg tab</i>	17	ICAR PEDIATRIC SUSP	95	62.5MCG/INH POWDER	
<i>hydroxyzine 25mg tab</i>	17	ICAR-C TAB	93	INHALER	
<i>hydroxyzine 2mg/ml oral</i>	17	<i>icatibant 30mg/3ml</i>	96	<i>indapamide 1.25mg tab</i>	66
<i>soln</i>		<i>syringe</i>		<i>indapamide 2.5mg tab</i>	66
<i>hydroxyzine 50mg tab</i>	17	<i>iclevia tab 91-day pack</i>	120	<i>indomethacin 25mg cap</i>	12
<i>hydroxyzine pamoate</i>	17	ICLUSIG 10MG TAB	46	<i>indomethacin 50mg cap</i>	12
<i>25mg cap</i>		ICLUSIG 15MG TAB	46	<i>indomethacin 75mg er</i>	12
<i>hydroxyzine pamoate</i>	17	ICLUSIG 30MG TAB	46	<i>cap</i>	
<i>50mg cap</i>		ICLUSIG 45MG TAB	46	INFANRIX SYRINGE	97
		<i>icosapent ethyl 0.5gm cap</i>	37	INFED INJ 50MG/ML	95
		<i>icosapent ethyl 1gm cap</i>	37		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

INFINITY TEST STRIPS	80	INSULIN SYRINGE MISC	102	IRON INF-TOD DROPS	95
INGREZZA CAP 40MG	128	0.5/30G		15MG	
INGREZZA CAP 60MG	128	INSULIN SYRINGE MISC	102	IRON SLOW TAB 45MG	95
INGREZZA CAP 80MG	128	0.5/31G		IRON SUPPLEMENT TAB	95
INLURIYO 200MG TAB	44	INSULIN SYRINGES	102	IRON SUPPLMENT	95
INLYTA 1MG TAB	43	0.5ML 29G 1/2IN		DROPS 15MG/ML	
INLYTA 5MG TAB	43	INTEGRA CAP	93	IRON TAB 27MG	95
INQOVI 35-100MG TAB	45	INTEGRA F CAP	93	IRON TAB 325MG	95
PACK (5)		INTEGRA PLUS CAP	93	IRON TAB 45MG	95
INREBIC 100MG CAP	47	INTELENCE 25MG TAB	58	IRON TAB 65MG	95
INSULIN GLARGINE	32	<i>introvale tab 91-day pack</i>	120	IRON/VITAMIN C TAB	93
MAX SOLOSTAR		INVEGA SUSTENNA	54	100-250MG	
300UNIT/ML PEN INJ		117MG/0.75ML		IROSPAN 24/6 PACK	94
(3ML)		SYRINGE		ISENTRESS 100MG	58
INSULIN GLARGINE	33	INVEGA SUSTENNA	54	CHEW TAB	
SOLOSTAR 300UNIT/ML		156MG/ML SYRINGE		ISENTRESS 100MG	58
PEN INJ (1.5ML)		INVEGA SUSTENNA	54	GRANULES FOR ORAL	
INSULIN LISPRO	33	234MG/1.5ML SYRINGE		SUSP	
100UNIT/ML INJ		INVEGA SUSTENNA	54	ISENTRESS 25MG	58
INSULIN LISPRO	33	39MG/0.25ML SYRINGE		CHEW TAB	
JUNIOR KWIKPEN		INVEGA SUSTENNA	54	ISENTRESS 400MG TAB	58
100UNIT/ML PEN INJ		78MG/0.5ML SYRINGE		ISENTRESS HD 600MG	58
(3ML)		IOSAT TAB 130MG	34	TAB	
INSULIN LISPRO	33	IOSAT TAB 65MG	34	<i>isibloom tab 28-day pack</i>	120
KWIKPEN 100UNIT/ML		IPOL INJ	97	<i>isoniazid 100mg tab</i>	42
PEN INJ (3ML)		<i>ipratropium bromide</i>	117	<i>isoniazid 10mg/ml oral</i>	42
INSULIN LISPRO	33	<i>0.03% (0.021mg/act)</i>		<i>soln</i>	
PROTAMINE HUMAN		<i>nasal inhaler</i>		<i>isoniazid 300mg tab</i>	42
(75/25) 100UNIT/ML		<i>ipratropium bromide</i>	117	<i>isosorbide dinitrate 10mg</i>	67
PEN INJ (3ML)		<i>0.06% (0.042mg/act)</i>		<i>tab</i>	
INSULIN PEN NEEDLE	100	<i>nasal inhaler</i>		<i>isosorbide dinitrate 20mg</i>	67
INSULIN SYRINGE	100	<i>ipratropium bromide</i>	130	<i>tab</i>	
INSULIN SYRINGE	100	<i>0.5mg/2.5ml (0.02%) neb</i>		<i>isosorbide dinitrate 30mg</i>	67
(DISP) U-100 0.3ML		<i>soln</i>		<i>tab</i>	
INSULIN SYRINGE	100	<i>ipratropium/albuterol</i>	131	<i>isosorbide dinitrate 5mg</i>	67
(DISP) U-100 1/2ML		<i>0.5-2.5mg/3ml neb soln</i>		<i>tab</i>	
INSULIN SYRINGE	100	<i>irbesartan 150mg tab</i>	39	<i>isosorbide mononitrate</i>	67
(DISP) U-100 1ML		<i>irbesartan 300mg tab</i>	39	<i>10mg tab</i>	
INSULIN SYRINGE	102	<i>irbesartan 75mg tab</i>	39	<i>isosorbide mononitrate</i>	67
0.5/29G		IRON COMPLEX CAP	95	<i>120mg er tab</i>	
INSULIN SYRINGE	102	150MG		<i>isosorbide mononitrate</i>	67
0.5/30G		IRON DROPS 15MG/ML	95	<i>20mg tab</i>	
INSULIN SYRINGE	102	IRON INFANT/TODDLER	95	<i>isosorbide mononitrate</i>	67
0.5/31G		DROPS 15MG		<i>30mg er tab</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>isosorbide mononitrate</i>	67	<i>jinteli 0.005-1mg tab</i>	123	<i>ketoconazole 2% topical</i>	74
<i>60mg er tab</i>		JIVI INJ 1000UNIT	90	<i>cream</i>	
<i>isotretinoin 10mg cap</i>	73	JIVI INJ 2000UNIT	90	<i>ketoconazole 200mg tab</i>	35
<i>isotretinoin 20mg cap</i>	73	JIVI INJ 3000UNIT	90	KETOROLAC	125
<i>isotretinoin 30mg cap</i>	73	JIVI INJ 4000UNIT	90	TROMETHAMINE 0.4%	
<i>isotretinoin 40mg cap</i>	73	JIVI INJ 500 UNIT	90	OPHTH SOLN	
ISTURISA 1MG TAB	84	<i>juleber tab 28-day pack</i>	120	<i>ketorolac tromethamine</i>	125
ISTURISA 5MG TAB	84	JULUCA 50-25MG TAB	58	<i>0.5% ophth soln</i>	
ITOVEBI 3MG TAB	47	<i>junel 1.5/30 tab 21-day</i>	120	<i>ketorolac tromethamine</i>	12
ITOVEBI 9MG TAB	47	<i>pack</i>		<i>10mg tab</i>	
<i>itraconazole 100mg cap</i>	35	<i>junel 1/20 tab 21-day</i>	120	KETOTIFEN FUMURATE	125
<i>ivabradine 5mg tab</i>	65	<i>pack</i>		OPHTH SOLN 0.035%	
<i>ivabradine 7.5mg tab</i>	65	<i>junel fe 1.5/30 tab 28-day</i>	120	KINDERLYTE PAK	107
<i>ivermectin 3mg tab</i>	51	<i>pack</i>		KINDERLYTE PAK	107
IWILFIN 192MG TAB	50	<i>junel fe tab 1/20 28-day</i>	120	PREMAX	
IXIARO 0.006MG/0.5ML	97	<i>pack</i>		KINDERLYTE SOLUTION	107
SYRINGE		JYNNEOS 0.5ML INJ	97	KINDERLYTE SOLUTION	107
IXINITY INJ 1000UNIT	90	K		CHERRY	
IXINITY INJ 1500UNIT	90	K CITRATE/CITRIC ACID	88	KINDERLYTE SOLUTION	107
IXINITY INJ 3000UNIT	90	SOLN		FRUIT	
IXINITY INJ 500UNIT	90	KALYDECO 13.4MG	132	KINDERLYTE SOLUTION	107
J		ORAL GRANULES		GRAPE	
<i>jaimiess tab 91-day pack</i>	120	KALYDECO 150MG TAB	132	KINDERLYTE SOLUTION	107
JAKAFI 10MG TAB	47	KALYDECO 25MG ORAL	132	LEMON	
JAKAFI 15MG TAB	47	GRANULES		KINDERLYTE SOLUTION	107
JAKAFI 20MG TAB	47	KALYDECO 5.8MG	132	LEMON/LIME	
JAKAFI 25MG TAB	47	ORAL GRANULES		KINDERLYTE SOLUTION	107
JAKAFI 5MG TAB	47	KALYDECO 50MG ORAL	132	LEMONADE	
<i>jantoven 10mg tab</i>	23	GRANULES		KINDERLYTE SOLUTION	107
<i>jantoven 1mg tab</i>	23	KALYDECO 75MG ORAL	132	ORANGE	
<i>jantoven 2.5mg tab</i>	23	GRANULES		KINDERLYTE SOLUTION	107
<i>jantoven 2mg tab</i>	23	<i>kariva tab 28-day pack</i>	120	PREMAX	
<i>jantoven 3mg tab</i>	23	KCENTRA INJ	90	KINDERLYTE SOLUTION	107
<i>jantoven 4mg tab</i>	23	KCENTRA KIT 1000UNIT	90	STRAWBERRY	
<i>jantoven 5mg tab</i>	23	<i>kcl/nacl 20meq-0.9% inj</i>	118	KINERET	61
<i>jantoven 6mg tab</i>	23	<i>kelnor 1/35 tab 28-day</i>	120	100MG/0.67ML	
<i>jantoven 7.5mg tab</i>	23	<i>pack</i>		SYRINGE	
JARDIANCE 10MG TAB	33	KERENDIA 10MG TAB	84	KINRIX SYRINGE	97
JARDIANCE 25MG TAB	33	KERENDIA 20MG TAB	84	<i>kionex 15gm/60ml oral</i>	109
<i>jasmiel tab 28-day pack</i>	120	KERENDIA 40MG TAB	84	<i>susp</i>	
JAYPIRCA 100MG TAB	47	KESIMPTA 20MG/0.4ML	128	KISQALI TAB 200MG	47
JAYPIRCA 50MG TAB	47	PEN INJ		DAILY DOSE PACK (21)	
JIDEYTRO 100MG TAB	47	<i>ketoconazole 2%</i>	74	KISQALI TAB 400MG	47
JIDEYTRO 25MG TAB	47	<i>shampoo</i>		DAILY DOSE PACK (42)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

KISQALI TAB 600MG	47	labetalol 200mg tab	63	larin 1.5/30 tab 21-day	120
DAILY DOSE PACK (63)		labetalol 300mg tab	63	pack	
klor-con 10meq er tab	118	lacosamide 100mg tab	25	larin 1/20 tab 21-day	120
klor-con 10meq micro er tab	118	lacosamide 10mg/ml oral soln	25	pack	
klor-con 15meq micro er tab	118	lacosamide 150mg tab	25	larin fe 1.5/30 tab 28-day	120
klor-con 20meq micro er tab	118	lacosamide 200mg tab	25	pack	
klor-con 20meq powder for oral soln	118	lacosamide 50mg tab	25	larin fe tab 1/20 28-day	121
klor-con 8meq er tab	118	lactulose 667mg/ml oral soln	86	pack	
KLOXXADO 8MG/0.1ML	16	lamivudine 100mg tab	59	LASTACFT SOLN 0.25%	125
NASAL SPRAY		lamivudine 10mg/ml oral soln	58	latanoprost 0.005% ophth soln	126
KOATE INJ 1000UNIT	90	lamivudine 150mg tab	58	LAZCLUZE 240MG TAB	43
KOATE INJ 250UNIT	90	lamivudine 300mg tab	58	LAZCLUZE 80MG TAB	43
KOATE INJ 500 UNIT	90	lamivudine/zidovudine 150-300mg tab	58	leflunomide 10mg tab	11
KOBEE TAB	111	lamotrigine 100mg tab	25	leflunomide 20mg tab	11
KOMZIFTI 200MG CAP	50	lamotrigine 150mg tab	25	lenalidomide 10mg cap	45
KOSELUGO 10MG CAP	47	lamotrigine 200mg tab	25	lenalidomide 15mg cap	45
KOSELUGO 25MG CAP	47	lamotrigine 25mg chew tab	25	lenalidomide 2.5mg cap	45
KOSELUGO 5MG	47	lamotrigine 25mg tab	25	lenalidomide 20mg cap	45
SPRINKLE CAP		lamotrigine 5mg chew tab	25	lenalidomide 25mg cap	45
KOSELUGO 7.5MG	47	LANCET DEVICE	99	lenalidomide 5mg cap	45
SPRINKLE CAP		LANCET DEVICE	99	LENVIMA 10MG DAILY DOSE PACK (30)	43
kourzeq 0.1% oral paste	72	LANCET ULTRA MISC	100	LENVIMA 12MG DAILY DOSE PACK (90)	43
KOVALTRY INJ	90	THIN 30G		LENVIMA 14MG DAILY DOSE PACK (60)	43
KP ADULTS 50 PLUS DAILY TAB	113	LANCETS	100	LENVIMA 18MG DAILY DOSE PACK (90)	43
KP B	111	LANCETS 30G	100	LENVIMA 20MG DAILY DOSE PACK (60)	43
COMPLEX/VITAMIN C TAB		LANCETS MIS 33G	100	LENVIMA 24MG DAILY DOSE PACK (90)	43
KP VITAMIN E CAP 100UNIT	134	LANCETS ULTR MIS THIN 31G	100	LENVIMA 4MG DAILY DOSE PACK (30)	43
K-PHOS NEUTRAL	108	lansoprazole 15mg dr cap	87	LENVIMA 8MG DAILY DOSE PACK (60)	43
K-PHOS NEUTRAL TAB	108	lansoprazole 30mg dr cap	87	LEQEMBI IQLIK 127	
KRAZATI 200MG TAB	47	LANTUS 100UNIT/ML INJ	33	250MG/1.25ML AUTO-INJECTOR	
KROGER BLOOD TES GLUCOSE	80	LANTUS SOLOSTAR 100UNIT/ML PEN INJ (3ML)	33	LEQEMBI IQLIK 127	
KROGER PREMIUM TEST STRIPS	80	lapatinib ditosylate 250mg tab	47	360MG/1.8ML AUTO-INJECTOR	
kurvelo tab 28-day pack	120				
L					
labetalol 100mg tab	63				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>lessina tab 28-day pack</i>	121	<i>levonorgestrel/ethinyl</i>	121	LIFYORLI CAP 125MG	44
<i>letrozole 2.5mg tab</i>	44	<i>estradiol</i>		1-DOSE SUPPLY PACK	
<i>leucovorin 10mg tab</i>	50	<i>0.05-30/0.075-40/0.125-3</i>		(2)	
<i>leucovorin 15mg tab</i>	50	<i>0mg-mcg tab 28-day pack</i>		LIFYORLI CAP 125MG	44
<i>leucovorin 25mg tab</i>	50	<i>levothyroxine 100mcg tab</i>	84	3-DOSE SUPPLY PACK	
<i>leucovorin 5mg tab</i>	50	<i>levothyroxine 112mcg tab</i>	84	(6)	
LEUKERAN 2MG TAB	42	<i>levothyroxine 125mcg tab</i>	84	LIFYORLI CAP 125MG	44
LEUKINE 250MCG INJ	93	<i>levothyroxine 137mcg tab</i>	84	9-DOSE SUPPLY PACK	
LEVALBUTEROL NEB	17	<i>levothyroxine 150mcg tab</i>	84	(18)	
SOLN 0.31MG		<i>levothyroxine 175mcg tab</i>	84	LIFYORLI CAP 150MG	44
LEVALBUTEROL NEB	17	<i>levothyroxine 200mcg tab</i>	85	1-DOSE SUPPLY PACK	
SOLN 0.63MG		<i>levothyroxine 25mcg tab</i>	85	(3)	
LEVALBUTEROL NEB	18	<i>levothyroxine 300mcg tab</i>	85	LIFYORLI CAP 150MG	44
SOLN 1.25MG		<i>levothyroxine 50mcg tab</i>	85	3-DOSE SUPPLY PACK	
LEVALBUTEROL NEB	18	<i>levothyroxine 75mcg tab</i>	85	(9)	
SOLN 1.25MG/0.5ML		<i>levothyroxine 88mcg tab</i>	85	LIFYORLI CAP 150MG	44
<i>levetiracetam 1000mg tab</i>	25	<i>levoxyl 100mcg tab</i>	85	9-DOSE SUPPLY PACK	
<i>levetiracetam 100mg/ml</i>	25	<i>levoxyl 112mcg tab</i>	85	(27)	
<i>oral soln</i>		<i>levoxyl 125mcg tab</i>	85	LILETTA 20.1MCG/DAY	121
<i>levetiracetam 250mg tab</i>	25	<i>levoxyl 137mcg tab</i>	85	INTRAUTERINE SYSTEM	
<i>levetiracetam 500mg er</i>	25	<i>levoxyl 150mcg tab</i>	85	<i>linezolid 100mg/5ml oral</i>	19
<i>tab</i>		<i>levoxyl 175mcg tab</i>	85	<i>susp</i>	
<i>levetiracetam 500mg tab</i>	25	<i>levoxyl 200mcg tab</i>	85	<i>linezolid 600mg tab</i>	19
<i>levetiracetam 750mg er</i>	25	<i>levoxyl 25mcg tab</i>	85	<i>linezolid 600mg/300ml</i>	19
<i>tab</i>		<i>levoxyl 50mcg tab</i>	85	<i>inj</i>	
<i>levetiracetam 750mg tab</i>	25	<i>levoxyl 75mcg tab</i>	85	LINZESS 145MCG CAP	86
LEVOBUNOLOL 0.5%	124	<i>levoxyl 88mcg tab</i>	85	LINZESS 290MCG CAP	86
OPHTH SOLN		<i>l-glutamine 5gm powder</i>	109	LINZESS 72MCG CAP	86
<i>levocarnitine 100mg/ml</i>	82	<i>for oral soln</i>		<i>liomny 25mcg tab</i>	85
<i>oral soln</i>		LICE KILLING	78	<i>liomny 50mcg tab</i>	85
<i>levocarnitine 330mg tab</i>	82	SHAMPOO 0.33-4%		<i>liomny 5mcg tab</i>	85
<i>levocetirizine 5mg tab</i>	129	<i>lidocaine 4% mucous</i>	77	<i>liothyronine sodium</i>	85
<i>levofloxacin 250mg tab</i>	19	<i>membrane topical soln</i>		<i>25mcg tab</i>	
<i>levofloxacin 25mg/ml</i>	19	<i>lidocaine 5% patch</i>	77	<i>liothyronine sodium</i>	85
<i>oral soln</i>		<i>lidocaine 5% topical</i>	77	<i>50mcg tab</i>	
<i>levofloxacin 500mg tab</i>	19	<i>ointment</i>		<i>liothyronine sodium 5mcg</i>	85
<i>levofloxacin</i>	19	LIDOCAINE CREAM 5%	15	<i>tab</i>	
<i>500mg/100ml inj</i>		LIDOCAINE PA PAD 4%	77	LIQUID I.V. POWDER	107
<i>levofloxacin 750mg tab</i>	19	LIDOCAINE PAD 4%	77	POPSICLE	
<i>levofloxacin</i>	19	<i>lidocaine viscous 2%</i>	72	LIQUID I.V. POWDER	107
<i>750mg/150ml inj</i>		<i>mucous membrane topical</i>		STRAWBERRY	
<i>levonest tab 28-day pack</i>	121	<i>soln</i>		<i>lisdexamfetamine</i>	10
LEVONORGESTREL TAB	67	<i>lidocaine/prilocaine</i>	77	<i>dimesylate 10mg cap</i>	
1.5MG		<i>2.5-2.5% topical cream</i>			

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ALPHABETICAL LISTING OF DRUGS

<i>lisdexamfetamine</i>	10	LOKELMA 10GM	109	<i>losartan potassium 25mg</i>	39
<i>dimesylate 20mg cap</i>		POWDER FOR ORAL		<i>tab</i>	
<i>lisdexamfetamine</i>	10	SUSP		<i>losartan potassium 50mg</i>	39
<i>dimesylate 30mg cap</i>		LOKELMA 5GM	109	<i>tab</i>	
<i>lisdexamfetamine</i>	10	POWDER FOR ORAL		<i>loteprednol etabonate</i>	125
<i>dimesylate 40mg cap</i>		SUSP		<i>0.5% ophth gel</i>	
<i>lisdexamfetamine</i>	10	<i>lomustine 100mg cap</i>	42	<i>loteprednol etabonate</i>	125
<i>dimesylate 50mg cap</i>		<i>lomustine 10mg cap</i>	42	<i>0.5% ophth susp</i>	
<i>lisdexamfetamine</i>	10	<i>lomustine 40mg cap</i>	42	<i>lovastatin 10mg tab</i>	38
<i>dimesylate 60mg cap</i>		LONSURF 6.14-15MG	45	<i>lovastatin 20mg tab</i>	38
<i>lisdexamfetamine</i>	10	TAB		<i>lovastatin 40mg tab</i>	38
<i>dimesylate 70mg cap</i>		LONSURF 8.19-20MG	45	<i>low-ogestrel tab 28-day</i>	121
<i>lisinopril 10mg tab</i>	38	TAB		<i>pack</i>	
<i>lisinopril 2.5mg tab</i>	38	LOPER/SIMETH TAB	34	<i>loxapine 10mg cap</i>	54
<i>lisinopril 20mg tab</i>	38	2-125MG		<i>loxapine 25mg cap</i>	54
<i>lisinopril 30mg tab</i>	38	<i>loperamide 2mg cap</i>	86	<i>loxapine 50mg cap</i>	54
<i>lisinopril 40mg tab</i>	39	LOPERAMIDE LIQUID	34	<i>loxapine 5mg cap</i>	54
<i>lisinopril 5mg tab</i>	39	1MG/7.5ML		<i>lubiprostone 24mcg cap</i>	86
LITFULO 50MG CAP	77	LOPERAMIDE TAB 2MG	34	<i>lubiprostone 8mcg cap</i>	86
<i>lithium carbonate 150mg</i>	52	<i>lopinavir/ritonavir</i>	58	LUBRICANT EYE DROPS	123
<i>cap</i>		<i>100-25mg tab</i>		<i>0.5%</i>	
<i>lithium carbonate 300mg</i>	52	<i>lopinavir/ritonavir</i>	58	LUBRICATING EYE	123
<i>cap</i>		<i>200-50mg tab</i>		DROPS 0.4-0.3%	
<i>lithium carbonate 300mg</i>	52	LORATADINE ODT TAB	37	LUBRIFRESH OINT P.M.	124
<i>er tab</i>		10MG		LUBRIFRESH OINT PM	124
<i>lithium carbonate 300mg</i>	52	LORATADINE SOLN	37	<i>luizza 1.5/30 tab 21-day</i>	121
<i>tab</i>		5MG/5ML		<i>pack</i>	
<i>lithium carbonate 450mg</i>	52	LORATADINE SYRUP	37	<i>luizza 1/20 tab 21-day</i>	121
<i>er tab</i>		5MG/5ML		<i>pack</i>	
LITHIUM CARBONATE	52	LORATADINE TAB 10MG	37	LUMAKRAS 120MG TAB	47
600MG CAP		LORATADINE-D 24	70	LUMAKRAS 240MG TAB	47
<i>lithium citrate 60mg/ml</i>	52	hour TAB		LUMAKRAS 320MG TAB	47
<i>oral soln</i>		LORATADINE-D TAB	70	LUMRYZ 4.5GM	133
LITTLE ONES CHEW	116	5-120MG		GRANULES FOR ORAL	
TAB		<i>lorazepam 0.5mg tab</i>	17	SUSP	
LIVTENCITY 200MG TAF	60	<i>lorazepam 1mg tab</i>	17	LUMRYZ 6GM	133
L-METHYL-B6-B12 TAB	82	<i>lorazepam 2mg tab</i>	17	GRANULES FOR ORAL	
L-METHYL-MC TAB	82	<i>lorazepam 2mg/ml oral</i>	17	SUSP	
<i>lo jaimiess tab 91-day</i>	121	<i>soln</i>		LUMRYZ 7.5GM	133
<i>pack</i>		LORBRENA 100MG TAB	47	GRANULES FOR ORAL	
LOHIST-D LIQUID	70	LORBRENA 25MG TAB	47	SUSP	
2-30MG/5ML		<i>loryna tab 28-day pack</i>	121	LUMRYZ 9GM	133
LOHIST-DM SYRUP	70	<i>losartan potassium</i>	39	GRANULES FOR ORAL	
5-2-10MG		<i>100mg tab</i>		SUSP	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28)	133	MAG L-LACTAT TAB 84MG	108	MAVYRET 50-20MG ORAL PELLETT	59
LUPKYNIS CAP 7.9MG	110	MAG OXIDE TAB 400MG	16	MAYZENT 0.25MG TAB	128
LUPRON 11.25MG	44	MAGNESIUM CAP 300MG	108	MAYZENT 1MG TAB	128
SYRINGE (3 MONTH)		MAGNESIUM GLUCONATE TAB	108	MAYZENT 2MG TAB	128
LUPRON 3.75MG	44	550MG		MAYZENT TAB STARTEF PACK (12)	128
SYRINGE (1 MONTH)		MAGNESIUM	98	MAYZENT TAB STARTEF PACK (7)	128
<i>lurasidone 120mg tab</i>	53	HYDROXIDE SUSP		<i>meclizine 12.5mg tab</i>	35
<i>lurasidone 20mg tab</i>	53	400MG/5ML		<i>meclizine 25mg tab</i>	35
<i>lurasidone 40mg tab</i>	53	MAGNESIUM	98	MECLIZINE CHEW 25MG	34
<i>lurasidone 60mg tab</i>	53	HYDROXIDE SUSP		MEDI-PADS PAD 50%	77
<i>lurasidone 80mg tab</i>	53	400MG/5ML		<i>medroxyprogesterone acetate 10mg tab</i>	123
LYBALVI 10-10MG TAB	129	MAGNESIUM OXIDE	108	<i>medroxyprogesterone acetate 150mg/ml inj</i>	121
LYBALVI 15-10MG TAB	129	CAP (ELEMENTAL MG) 500MG		<i>medroxyprogesterone acetate 150mg/ml syringe</i>	121
LYBALVI 20-10MG TAB	129	MAGNESIUM OXIDE	16	<i>medroxyprogesterone acetate 2.5mg tab</i>	123
LYBALVI 5-10MG TAB	129	TAB 400MG		<i>medroxyprogesterone acetate 5mg tab</i>	123
<i>lyleq 0.35mg tab 28-day pack</i>	121	MAGNESIUM OXIDE	16	<i>mefloquine 250mg tab</i>	51
LYNPARZA 100MG TAB	47	TAB 420MG		MEGA MULTI TAB MEN	113
LYNPARZA 150MG TAB	47	MAGNESIUM OXIDE	16	MEGA MULTI TAB WOMEN	113
LYSODREN 500MG TAB	44	TAB 420MG		MEGA MULTIVITAMIN FOR MEN TAB	113
LYTGOBI TAB 12MG	47	<i>magnesium sulfate 500mg/ml inj</i>	118	MEGESTROL ACETATE 125MG/ML ORAL SUSP	123
DAILY DOSE PACK (21)		<i>magnesium sulfate 500mg/ml syringe</i>	118	<i>megestrol acetate 20mg tab</i>	44
LYTGOBI TAB 16MG	47	MAGNESIUM TAB	108	<i>megestrol acetate 40mg tab</i>	44
DAILY DOSE PACK (28)		500MG		<i>megestrol acetate 40mg/ml oral susp</i>	44
LYTGOBI TAB 20MG	47	MAG-TAB SR TAB 84MG	108	MEIJER PREMIUM TEST STRIPS	80
DAILY DOSE PACK (35)		<i>malathion 0.5% topical lotion</i>	77	MEKINIST 0.05MG/ML ORAL SOLN	47
LYUMJEV 100UNIT/ML INJ	33	MAPAP CAP 500MG	13	MEKINIST 0.5MG TAB	47
LYUMJEV KWIKPEN 100UNIT/ML PEN INJ (3ML)	33	MAPAP COLD FORMULA TAB	70	MEKINIST 2MG TAB	47
LYUMJEV KWIKPEN 200UNIT/ML PEN INJ (3ML)	33	MAPAP LIQUID	13		
<i>lyza 0.35mg tab 28-day pack</i>	121	<i>maraviroc 150mg tab</i>	58		
		<i>maraviroc 300mg tab</i>	58		
		<i>marlissa tab 28-day pack</i>	121		
M		MARPLAN 10MG TAB	28		
<i>macitentan 10mg tab</i>	131	MATULANE 50MG CAP	50		
MAG 440 TAB 440MG	16	MAVYRET 100-40MG TAB	59		
MAG CITRATE SOLN LEMON	99				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

MEKTOVI 15MG TAB	47	metformin/sitagliptin	31	methylphenidate 1mg/ml	11
meleya 0.35mg tab	121	phosphate 1000-100mg		oral soln	
28-day pack		er tab		methylphenidate 20mg er	11
meloxicam 15mg tab	12	metformin/sitagliptin	31	tab	
meloxicam 7.5mg tab	12	phosphate 1000-50mg er		methylphenidate 20mg	11
memantine 10mg tab	127	tab		tab	
memantine 14mg er cap	127	metformin/sitagliptin	31	methylphenidate 27mg er	11
memantine 21mg er cap	127	phosphate 1000-50mg		osmotic tab	
memantine 28mg er cap	127	tab		methylphenidate 2mg/ml	11
memantine 2mg/ml oral	127	metformin/sitagliptin	31	oral soln	
soln		phosphate 500-50mg er		methylphenidate 36mg er	11
memantine 5mg tab	127	tab		osmotic tab	
memantine 7mg er cap	127	metformin/sitagliptin	31	methylphenidate 54mg er	11
M-END DMX LIQUID	70	phosphate 500-50mg tab		osmotic tab	
MENQUADFI INJ	97	methadone 10mg tab	13	methylphenidate 5mg tab	11
MENSTRUAL TAB PAIR	12	METHADONE 1MG/ML	14	methylprednisolone 16mg	83
RLF		ORAL SOLN		tab	
MENVEO INJ	97	METHADONE 2MG/ML	14	methylprednisolone 32mg	83
mercaptopurine	43	ORAL SOLN		tab	
2000mg/100ml oral susp		methadone 5mg tab	14	methylprednisolone 4mg	83
mercaptopurine 50mg tab	43	methazolamide 25mg tab	66	tab	
meropenem 1gm inj	19	methazolamide 50mg tab	66	methylprednisolone 4mg	83
meropenem 500mg inj	19	methenamine hippurate	19	tab pack (21)	
mesalamine 1200mg dr	98	1gm tab		methylprednisolone 8mg	83
tab		methimazole 10mg tab	83	tab	
mesalamine 1gm rectal	98	methimazole 5mg tab	83	metoclopramide 10mg tab	86
supp		methocarbamol 500mg	57	metoclopramide 1mg/ml	86
mesalamine 375mg er cap	98	tab		oral soln	
MESALAMINE 400MG	98	methocarbamol 750mg	57	metoclopramide 5mg tab	86
DR CAP		tab		metolazone 10mg tab	66
mesalamine 66.7mg/ml	98	methotrexate 2.5mg tab	43	metolazone 2.5mg tab	66
enema		METHOTREXATE	43	metolazone 5mg tab	66
mesna 400mg tab	50	25MG/ML INJ		metoprolol succinate	63
METAFOLBIC TAB	82	methotrexate 50mg/2ml	43	100mg er tab	
metaxalone 800mg tab	57	inj		metoprolol succinate	63
metformin 1000mg tab	31	METHOXSALEN 10MG	75	200mg er tab	
metformin 500mg er tab	31	CAP		metoprolol succinate	63
metformin 500mg tab	31	methsuximide 300mg cap	27	25mg er tab	
metformin 750mg er tab	31	methylphenidate 10mg er	11	metoprolol succinate	63
metformin 850mg tab	31	tab		50mg er tab	
metformin/pioglitazone	31	methylphenidate 10mg	11	metoprolol tartrate	63
150-15mg tab		tab		100mg tab	
metformin/pioglitazone	31	methylphenidate 18mg er	11	metoprolol tartrate 25mg	63
850-15mg tab		osmotic tab		tab	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>metoprolol tartrate</i>	63	<i>midodrine 2.5mg tab</i>	62	<i>misoprostol 200mcg tab</i>	87
<i>37.5mg tab</i>		<i>midodrine 5mg tab</i>	62	MM LANCING DEVICE	101
<i>metoprolol tartrate 50mg</i>	63	MIEBO 1.338GM/ML	125	MM TWIST LANCETS	101
<i>tab</i>		OPHTH SOLN		M-M-R II INJ	97
<i>metoprolol tartrate 75mg</i>	63	<i>mifepristone 300mg tab</i>	31	M-NATAL PLUS TAB	116
<i>tab</i>		MIGRAINE RELIEF TAB	12	MOBI CONNECT	101
<i>metronidazole 0.75%</i>	78	<i>mili tab 28-day pack</i>	121	LANCING DEVICE	
<i>topical cream</i>		MILK OF MAGNESIA	99	MOBI CONNECT MIS	101
<i>metronidazole 0.75%</i>	78	SUSP 1200/15		LANCETS	
<i>topical gel</i>		MILRINONE IN	62	MOBI CONNECT TEST	80
<i>metronidazole 0.75%</i>	19	DEXTROSE SOLN		STRIP	
<i>vaginal gel</i>		40MG/200ML		MOBILE LANCET 30G	101
<i>metronidazole 1% topical</i>	78	MILRINONE INJ	62	<i>modafinil 100mg tab</i>	11
<i>gel</i>		10MG/10ML		<i>modafinil 200mg tab</i>	11
<i>metronidazole 250mg tab</i>	19	MILRINONE INJ	62	MODEYSO 125MG CAP	50
<i>metronidazole 500mg tab</i>	19	1MG/ML		<i>moexipril 15mg tab</i>	39
<i>metronidazole 5mg/ml inj</i>	19	MILRINONE INJ	62	<i>moexipril 7.5mg tab</i>	39
<i>metyrosine 250mg cap</i>	42	20MG/20ML		MOLINDONE 10MG TAB	53
<i>mexiletine 150mg cap</i>	62	MILRINONE INJ	62	MOLINDONE 25MG TAB	53
<i>mexiletine 200mg cap</i>	62	50MG/50ML		MOLINDONE 5MG TAB	53
<i>mexiletine 250mg cap</i>	62	MILRINONE LACTATE	62	<i>mometasone furoate 0.1%</i>	76
MG PLUS PROTEIN	117	INJ 1MG/ML		<i>topical cream</i>	
<i>micafungin sodium</i>	35	MILRINONE/DEXTROSE	62	<i>mometasone furoate 0.1%</i>	76
<i>100mg inj</i>		INJ 20MG/100ML		<i>topical lotion</i>	
<i>micafungin sodium 50mg</i>	35	MILRINONE/DEXTROSE	62	<i>mometasone furoate 0.1%</i>	76
<i>inj</i>		INJ 40MG/200ML		<i>topical ointment</i>	
MICONAZOLE 1 KIT	134	<i>mimvey tab 28-day pack</i>	123	MONOCAL TAB	108
MICONAZOLE CREAM	74	MINERAL OIL	99	<i>montelukast 10mg tab</i>	130
2%		MINERAL OIL ENEMA	99	<i>montelukast 4mg chew</i>	130
MICONAZOLE NITRATE	74	<i>minocycline 100mg cap</i>	19	<i>tab</i>	
CREAM 2%		<i>minocycline 50mg cap</i>	19	<i>montelukast 5mg chew</i>	130
MICONAZOLE NITRATE	134	<i>minocycline 75mg cap</i>	19	<i>tab</i>	
VAGINAL CREAM 2%		<i>minoxidil 10mg tab</i>	67	<i>morphine sulfate 100mg</i>	14
MICRODOT TEST STRIPS	80	<i>minoxidil 2.5mg tab</i>	67	<i>er tab</i>	
<i>microgestin 1.5/30 tab</i>	121	MINTOX PLUS CHEW	15	<i>morphine sulfate 15mg er</i>	14
<i>21-day pack</i>		TAB		<i>tab</i>	
<i>microgestin 1/20 tab</i>	121	<i>mirtazapine 15mg odt</i>	28	<i>morphine sulfate 15mg</i>	14
<i>21-day pack</i>		<i>mirtazapine 15mg tab</i>	28	<i>tab</i>	
<i>microgestin fe 1.5/30 tab</i>	121	<i>mirtazapine 30mg odt</i>	28	<i>morphine sulfate 200mg</i>	14
<i>28-day pack</i>		<i>mirtazapine 30mg tab</i>	28	<i>er tab</i>	
<i>microgestin fe 1/20 tab</i>	121	<i>mirtazapine 45mg odt</i>	28	MORPHINE SULFATE	14
<i>28-day pack</i>		<i>mirtazapine 45mg tab</i>	28	20MG/5ML ORAL SOLN	
MICROLET MIS NEXT	100	<i>mirtazapine 7.5mg tab</i>	28	<i>morphine sulfate 20mg/ml</i>	14
<i>midodrine 10mg tab</i>	62	<i>misoprostol 100mcg tab</i>	87	<i>oral soln</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>morphine sulfate 2mg/ml oral soln</i>	14	MUCUS RELIEF DM ER TAB 30-600MG	70	MULTIPLE VITAMINS WITH MINERALS LIQUID	113
<i>morphine sulfate 30mg er tab</i>	14	MUCUS RELIEF DM LIQUID 5-100/5	70	MULTIPLE VITAMINS WITH MINERALS LIQUID ADULTS	113
<i>morphine sulfate 30mg tab</i>	14	MUCUS RELIEF ER TAB 1200	72	MULTI-VIT/FE TAB	111
<i>morphine sulfate 60mg er tab</i>	14	MUCUS RELIEF ER TAB 30-600	70	MULTIVITAMIN	115
MOUNJARO 10MG/0.5ML	32	MUCUS RELIEF ER TAB 600MG	72	MULTIVITAMIN ADULT 50 PLUS TAB	113
AUTO-INJECTOR MOUNJARO 12.5MG/0.5ML	32	MUCUS RELIEF TAB 10-400MG	70	MULTIVITAMIN CHW CHILDREN	116
AUTO-INJECTOR MOUNJARO 15MG/0.5ML	32	MUCUS RELIEF TAB 60-1200	70	MULTI-VITAMIN HP/MINERALS CAP	117
AUTO-INJECTOR MOUNJARO 2.5MG/0.5ML	32	MUCUS RELIEF TAB 60-1200MG	70	MULTIVITAMIN TAB	113
AUTO-INJECTOR MOUNJARO 5MG/0.5ML	32	MUCUS RELIEF-D 120-1200	70	MULTIVITAMIN TAB	113
AUTO-INJECTOR MOUNJARO 7.5MG/0.5ML	32	MAXIMUM TAB 50+ TAB	70	MULTI-VITAMIN TAB	115
MOVANTIK 12.5MG TAB	86	MULTIVITAMIN ADULT 50+ TAB	113	MULTIVITAMIN TAB DAILY	115
MOVANTIK 25MG TAB	86	MULT VITAMIN TAB NO IRON	113	MULTIVITAMIN W/ MINERALS TAB	113
<i>moxifloxacin 0.5% ophth soln</i>	124	MULTAQ 400MG TAB	62	MULTIVITAMIN WOMEN 50+ TAB	113
MOXIFLOXACIN 1.6MG/ML INJ	19	MULTI COMPLT TAB/IRON	113	MULTIVITAMIN WOMEN TAB 50+	113
<i>moxifloxacin 400mg tab</i>	19	MULTI CHEW 0.25MG	115	MULTI-VITAMIN/FLOUR IDE DROPS	115
M-PAP LIQUID 160/5ML	13	MULTI CHEW 0.5MG	115	MULTI-VITAMINS/FLOU RIDE/FE DROPS	115
MRESVIA 50MCG/0.5ML SYRINGE	97	VITAMIN/FLUORIDE CHEW 1MG		MULTI-VITE LIQUID	113
MTX SUPPORT TAB	94	MULTI-LANCET KIT	101	<i>mupirocin 2% topical ointment</i>	73
MUCUS AND CHEST LIQUID 200/10ML	72	MULTIPLE VITAMIN TAI	115	MURO 128 OPTH	125
MUCUS RELIEF D TAB 60-600MG	70	MULTIPLE VITAMINS WITH IRON TAB	111	MURO 128 OPTH SOLN 2%	125
MUCUS RELIEF DM COUGH TAB	70	MULTIPLE VITAMINS WITH IRON TAB	111	SOLN 5%	
MUCUS RELIEF DM ER TAB 30-600	70			MW COMPLETE FORMULATION	115
				MW COMPLETE FORMULATION CAP	113

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

MW COMPLETE FORMULATION CAP D5000	113	NALOXONE HCL SPRAY 4MG	34	NEFAZODONE 150MG TAB	29
MW COMPLETE FORMULATION CHEW	115	NALOXONE SPRAY 4MG	34	NEFAZODONE 200MG TAB	29
MY WAY TAB 1.5MG	67	<i>naltrexone 50mg tab</i>	16	NEFAZODONE 250MG TAB	29
<i>mycophenolate mofetil 200mg/ml oral susp</i>	96	<i>naproxen 250mg tab</i>	12	NEFAZODONE 50MG TAB	29
<i>mycophenolate mofetil 250mg cap</i>	96	<i>naproxen 375mg dr tab</i>	12	NEMLUVIO 30MG AUTO-INJECTOR	61
<i>mycophenolate mofetil 500mg tab</i>	96	<i>naproxen 375mg tab</i>	12	<i>neomycin sulfate 500mg tab</i>	18
<i>mycophenolic acid 180mg dr tab</i>	96	<i>naproxen 500mg tab</i>	12	NEOMYCIN/BACITRACIN 124	
<i>mycophenolic acid 360mg dr tab</i>	96	NAPROXEN SODIUM TAB 220MG	12	N/POLYMYXIN 5MG-400UNIT-10000UNIT OPHTH OINTMENT	
MYFERON 150 CAP	95	NAPROXEN TAB 220MG	12	NEOMYCIN/BACITRACIN 73	
MYFERON 150 FORTE CAP	94	<i>naratriptan 1mg tab</i>	104	N/POLYMYXIN OINT	
MYGLUCOHEALTH TEST STRIPS	80	<i>naratriptan 2.5mg tab</i>	104	NEOMYCIN/POLYMYXIN 124	
MYNEPHROCAPS	111	NARCAN SPRAY 4MG	34	N B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN	
MYNEPHRON CAP	111	NASAL DECONGESTANT SPRAY 0.05%	118	NEOMYCIN/POLYMYXIN 125	
MYRBETRIQ 25MG ER TAB	87	NASAL DECONGESTANT TAB 30MG	118	N/BACITRACIN/HYDROCORTISONE 1% OPHTH OINTMENT	
MYRBETRIQ 50MG ER TAB	87	NASAL RELIEF SPRAY 0.05%	118	<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i>	126
MY-VITALIFE CAP	113	NASCOBAL NASAL SPRAY 500MCG	92	<i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i>	126
N		NAT VIT E CAP 1000UNIT	134	NEPHPLEX RX TAB	111
<i>nabumetone 500mg tab</i>	12	NAT VIT E CAP 400UNIT	134	NEPHRO VITAMINS TAB	111
<i>nabumetone 750mg tab</i>	12	NATACYN 5% OPHTH SUSP	124	NEPHRON FA TAB	94
<i>nadolol 20mg tab</i>	63	<i>nateglinide 120mg tab</i>	31	NEPHRONEX	111
<i>nadolol 40mg tab</i>	63	<i>nateglinide 60mg tab</i>	31	NEPHRO-VITE TAB	111
<i>nadolol 80mg tab</i>	63	NATRAPEL 12-HOUR SPRAY 20%	77	NERLYNX 40MG TAB	47
<i>nafcillin 100mg/ml inj</i>	21	NAYZILAM 5MG/0.1ML NASAL SPRAY	24	NESTABS DHA PACK	116
<i>nafcillin 1gm inj</i>	21	<i>nebivolol 10mg tab</i>	63	NESTABS TAB	116
<i>nafcillin 2gm inj</i>	21	<i>nebivolol 2.5mg tab</i>	63	NEURIN-SL TAB	94
NALOXONE 0.4MG/ML CARTRIDGE	16	<i>nebivolol 20mg tab</i>	63		
<i>naloxone 0.4mg/ml inj</i>	16	<i>nebivolol 5mg tab</i>	63		
<i>naloxone 0.4mg/ml syringe</i>	16	NEBUSAL NEB SOLN 3%	72		
<i>naloxone 2mg/2ml syringe</i>	16	NEBUSAL NEB SOLN 6%	72		
		<i>necon 0.5/35 tab 28-day pack</i>	121		
		NEFAZODONE 100MG TAB	29		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

NEUTEK 2TEK TEST STRIPS	80	NICOTINE PATCH 7MG/24HR	129	<i>nitro-bid 2% topical ointment</i>	67
NEVIRAPINE 10MG/ML ORAL SUSP	58	NICOTINE PATCH KIT	129	<i>nitrofurantoin</i>	19
<i>nevirapine 200mg tab</i>	58	NICOTINE PATCH STEP 1	129	<i>macro/nitrofurantoin mono 100mg cap</i>	
<i>nevirapine 400mg er tab</i>	58	NICOTINE POL MINT GUM 2MG	129	<i>nitrofurantoin</i>	19
NEW DAY TAB 1.5MG	67	NICOTINE POL MINT GUM 4MG	129	<i>macrocrystals 100mg cap</i>	
NEXLETOL 180MG TAB	37	NICOTINE POLACRILEX GUM 2MG	129	<i>nitrofurantoin</i>	19
NEXLIZET 180-10MG TAB	37	NICOTINE POLACRILEX GUM 4MG	129	<i>macrocrystals 50mg cap</i>	
NEXPLANON 68MG IMPLANT	121	NICOTINE POLACRILEX GUM 4MG	129	<i>nitroglycerin 0.1mg/hr patch</i>	67
<i>niacin 1000mg er tab</i>	37	NICOTINE POLACRILEX	129	<i>nitroglycerin 0.2mg/hr patch</i>	67
<i>niacin 500mg er tab</i>	37	LOZENGE 2MG		<i>nitroglycerin 0.3mg sl tab</i>	67
<i>niacin 750mg er tab</i>	37	NICOTINE POLACRILEX	129	<i>nitroglycerin 0.4% rectal ointment</i>	15
NIACIN CR CAP 250MG	136	LOZENGE 4MG		<i>nitroglycerin 0.4mg sl tab</i>	67
NIACIN CR TAB 250MG	136	NICOTINE TD DIS 14MG/24H	129	<i>nitroglycerin 0.4mg/hr patch</i>	67
NIACIN CR TAB 500MG	136	NICOTINE TD STEP 3	129	<i>nitroglycerin 0.6mg sl tab</i>	67
NIACIN ER TAB 500MG	136	NICOTROL 10MG/ML	16	<i>nitroglycerin 0.6mg/hr patch</i>	67
NIACIN TAB 100MG	136	NASAL INHALER		NIVESTYM	93
NIACIN TAB 500MG	136	<i>nifedipine 30mg er tab</i>	64	300MCG/0.5ML	
NIACIN TAB 500MG TR	136	<i>nifedipine 30mg osmotic er tab</i>	64	SYRINGE	
NIACIN TR CAP 250MG	136	<i>nifedipine 60mg er tab</i>	64	NIVESTYM 300MCG/ML	93
NIAVASC SR TAB 500MG	136	<i>nifedipine 60mg osmotic er tab</i>	65	INJ	
NICOTINE GUM 4MG ORIG	129	<i>nifedipine 90mg er tab</i>	65	NIVESTYM	93
NICOTINE LOZENGE 2MG MINT	129	<i>nifedipine 90mg osmotic er tab</i>	65	480MCG/0.8ML	
NICOTINE LOZENGE 4MG MINT	129	<i>nikki tab 28-day pack</i>	121	SYRINGE	
NICOTINE MINI LOZENGE 2MG	129	<i>nilotinib 150mg cap</i>	47	NIVESTYM	93
NICOTINE MINI LOZENGE 4MG	129	<i>nilotinib 200mg cap</i>	48	480MCG/1.6ML INJ	
NICOTINE MINT LOZENGE 2MG	129	<i>nilotinib 50mg cap</i>	48	NO CODING TEST STRIP	80
NICOTINE MINT LOZENGE 4MG	129	NILUTAMIDE 150MG TAB	44	NOHIST-DM LIQUID	70
NICOTINE PATCH 14MG/24HR	129	<i>nimodipine 30mg cap</i>	65	<i>nora-be 0.35mg tab</i>	121
NICOTINE PATCH 21MG/24HR	129	NINJACOF LIQUID	70	28-day pack	
		NINLARO 2.3MG CAP	48	NORDITROPIN	84
		NINLARO 3MG CAP	48	10MG/1.5ML PEN INJ	
		NINLARO 4MG CAP	48	NORDITROPIN	84
		<i>nintedanib 100mg cap</i>	132	15MG/1.5ML PEN INJ	
		<i>nintedanib 150mg cap</i>	132	NORDITROPIN	84
		<i>nitazoxanide 500mg tab</i>	51	5MG/1.5ML PEN INJ	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch</i>	121	NOVOLIN R 100UNIT/ML INJ	33	<i>nyamyc 100000unit/gm topical powder</i>	74
<i>norethindrone 0.35mg tab 28-day pack</i>	121	NOVOLIN R FLEXPEN 100UNIT/ML PEN INJ (3ML)	33	<i>nylia 1/35 tab 28-day pack</i>	121
<i>norethindrone acetate 5mg tab</i>	123	NOVOLOG 100UNIT/ML CARTRIDGE	33	<i>nylia 7/7/7 tab 28-day pack</i>	121
<i>nortrel 0.5/35 tab 28-day pack</i>	121	NOVOLOG 100UNIT/ML INJ	33	<i>nystatin 100000unit/gm topical ointment</i>	74
<i>nortrel 1/35 tab 21-day pack</i>	121	NOVOLOG FLEXPEN 100UNIT/ML PEN INJ (3ML)	33	<i>nystatin 100000unit/gm topical powder</i>	74
<i>nortrel 1/35 tab 28-day pack</i>	121	NOVOLOG MIX (70/30) 100UNIT/ML INJ	33	<i>nystatin 100000unit/ml oral susp</i>	72
<i>nortrel 7/7/7 tab 28-day pack</i>	121	NOVOLOG MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML)	33	<i>nystatin 100000unit/ml topical cream</i>	74
<i>nortriptyline 10mg cap</i>	30	NOVOLOG MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML)	33	<i>nystatin 500000unit tab</i>	35
<i>nortriptyline 25mg cap</i>	30	NOVOSEVEN RT INJ	90	<i>nystatin/triamcinolone acetonide</i>	74
<i>nortriptyline 2mg/ml oral soln</i>	30	NP THYROID 120MG	133	<i>100000-0.1unit/gm-% topical cream</i>	
<i>nortriptyline 50mg cap</i>	30	NP THYROID 15MG	133	<i>nystatin/triamcinolone acetonide</i>	74
<i>nortriptyline 75mg cap</i>	30	NP THYROID 30MG	133	<i>100000-0.1unit/gm-% topical ointment</i>	
NOVA MAX TEST STRIPS	80	NP THYROID 60MG	133	<i>nystop 100000unit/gm topical powder</i>	74
NOVOEIGHT INJ 1000UNIT	90	NP THYROID 90MG	133		
NOVOEIGHT INJ 1500UNIT	90	NUBEQA 300MG TAB	44		
NOVOEIGHT INJ 2000UNIT	90	NUCALA 100MG INJ	61		
NOVOEIGHT INJ 250UNIT	90	NUCALA 100MG/ML	61		
NOVOEIGHT INJ 3000UNIT	90	AUTO-INJECTOR			
NOVOEIGHT INJ 500UNIT	90	NUCALA 100MG/ML SYRINGE	61		
NOVOLIN MIX (70/30) 100UNIT/ML INJ	33	NUCALA 40MG/0.4ML SYRINGE	61		
NOVOLIN MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML)	33	NU-IRON 150 CAP	95		
NOVOLIN N 100UNIT/ML INJ	33	NUPLAZID 10MG TAB	53		
NOVOLIN N FLEXPEN 100UNIT/ML PEN INJ (3ML)	33	NUPLAZID 34MG CAP	53		
		NUTRIVIT LIQUID 800-15-1MG/15ML	111		
		NUWIQ INJ 1000UNIT	90		
		NUWIQ INJ 2000UNIT	90		
		NUWIQ INJ 250UNIT	90		
		NUWIQ INJ 500UNIT	90		
		NUWIQ KIT 1500UNIT	90		
		NUWIQ KIT 2500UNIT	91		
		NUWIQ KIT 3000UNIT	91		
		NUWIQ KIT 4000UNIT	91		

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OB COMPLETE ONE CAP	116
OB COMPLETE PETITE CAP	116
OB COMPLETE PREMIER TAB	116
OB COMPLETE TAB	116
OBIZUR INJ 500 UNIT	91
OCTAGAM INJ 10/100ML	127
OCTAGAM INJ 10GM	126
OCTAGAM INJ 1GM	126
OCTAGAM INJ 2.5GM	126
OCTAGAM INJ 2GM/20ML	127
OCTAGAM INJ 5GM	126
OCTAGAM INJ 5GM/50ML	127

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>octreotide 0.05mg/ml inj</i>	84	<i>olanzapine 15mg odt</i>	55	OMNITROPE	84
<i>octreotide 0.1mg/ml inj</i>	84	<i>olanzapine 15mg tab</i>	55	10MG/1.5ML	
<i>octreotide 0.2mg/ml inj</i>	84	<i>olanzapine 2.5mg tab</i>	55	CARTRIDGE	
<i>octreotide 0.5mg/ml inj</i>	84	<i>olanzapine 20mg odt</i>	55	OMNITROPE 5.8MG INJ	84
<i>octreotide 1mg/ml inj</i>	84	<i>olanzapine 20mg tab</i>	55	OMNITROPE	84
OCUTABS TAB	113	<i>olanzapine 5mg odt</i>	55	5MG/1.5ML CARTRIDGE	
OCUTABS TAB LUTEIN	113	<i>olanzapine 5mg tab</i>	55	ON CALL EXPRESS TEST	80
ODEFSEY 200-25-25MG	58	<i>olanzapine 7.5mg tab</i>	55	STRIPS	
TAB		<i>olmesartan medoxomil</i>	39	ONCOVITE TAB	113
ODOMZO 200MG CAP	44	<i>20mg tab</i>		<i>ondansetron 0.8mg/ml</i>	35
OFEV 100MG CAP	132	<i>olmesartan medoxomil</i>	39	<i>oral soln</i>	
OFEV 150MG CAP	132	<i>40mg tab</i>		<i>ondansetron 4mg odt</i>	35
OFF DEEP WDS SPR	77	<i>olmesartan medoxomil</i>	39	<i>ondansetron 4mg tab</i>	35
25%		<i>5mg tab</i>		<i>ondansetron 8mg odt</i>	35
OFF DEEP WOODS DRY	77	<i>olopatadine 0.6%</i>	117	<i>ondansetron 8mg tab</i>	35
SPRAY 25%		<i>(0.665mg/act) nasal</i>		ONE DAILY TAB 50+	113
OFF DEEP WOODS	77	<i>inhaler</i>		ONE DAILY TAB	113
SPORTSMEN SPRAY 25%		OLOPATADINE OPHTH	125	MAXIMUM	
OFF DEEP WOODS	77	DROP 0.1%		ONE DAILY TAB MEN	114
SPRAY 25%		OLOPATADINE OPHTH	126	50+	
<i>ofloxacin 0.3% ophth soln</i>	124	SOLN 0.1%		ONE DAILY TAB	114
<i>ofloxacin 0.3% otic soln</i>	126	OLOPATADINE OPHTH	126	WOMEN	
OGSIVEO 100MG TAB	48	SOLN 0.2%		ONE DAILY TAB	114
7-DAY PACK (14)		OLOPATADINE SOLN	126	WOMEN 50	
OGSIVEO 150MG TAB	48	0.7%		ONE DAILY TAB	114
7-DAY PACK (14)		OLUMIANT 1MG TAB	11	WOMENS	
OJEMDA 100MG TAB	48	OLUMIANT 2MG TAB	11	ONE-A-DAY MENS TAB	114
PACK (400MG ONCE		OLUMIANT 4MG TAB	11	ONE-A-DAY TAB 50+	114
WEEKLY) (16)		<i>omega-3 acid ethyl esters</i>	37	ADV	
OJEMDA 100MG TAB	48	<i>(usp) 1gm cap</i>		ONE-A-DAY TAB ESSEN	115
PACK (500MG ONCE		<i>omeprazole 10mg dr cap</i>	87	ONE-A-DAY TAB	114
WEEKLY) (20)		<i>omeprazole 20mg dr cap</i>	87	TEEN/HER	
OJEMDA 100MG TAB	48	<i>omeprazole 40mg dr cap</i>	87	ONE-A-DAY TAB	114
PACK (600MG ONCE		OMEPRAZOLE DR TAB	134	TEEN/HIM	
WEEKLY) (24)		20MG		ONE-A-DAY WOMENS	114
OJEMDA 25MG/ML	48	OMEPRAZOLE	133	50+	
POWDER FOR ORAL		MAGNESIUM DR CAP		ONE-A-DAY WOMENS	114
SUSP		20.6MG		50+ ADV	
OJJAARA 100MG TAB	48	OMEPRAZOLE TAB	134	ONE-A-DAY WOMENS	111
OJJAARA 150MG TAB	48	20MG		TAB	
OJJAARA 200MG TAB	48	OMEPRAZOLE TAB ODT	134	ONE-DAILY MULTI	115
<i>olanzapine 10mg inj</i>	54	20MG		VITAMIN TAB	
<i>olanzapine 10mg odt</i>	55			ONE-DAILY	115
<i>olanzapine 10mg tab</i>	55			MULT-VITAMIN TAB	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ONENATAL RX TAB	116	ORAZINC TAB 110MG	109	<i>oxacillin 100mg/ml inj</i>	21
ONETOUCH DELICA	101	ORENCIA 125MG/ML	61	<i>oxacillin 1gm inj</i>	22
LANCET DEVICE		SYRINGE		<i>oxacillin 2gm inj</i>	22
ONETOUCH DELICA	101	ORENCIA 50MG/0.4ML	61	<i>oxcarbazepine 150mg tab</i>	25
LANCETS		SYRINGE		<i>oxcarbazepine 300mg tab</i>	25
ONETOUCH DELICA	101	ORENCIA 87.5MG/0.7ML	61	<i>oxcarbazepine 600mg tab</i>	25
LANCETS 30G		SYRINGE		<i>oxcarbazepine 60mg/ml</i>	25
ONETOUCH DELICA	101	ORENCIA CLICKJECT	61	<i>oral susp</i>	
LANCING DEVICE		125MG/ML		<i>oxybutynin chloride 10mg</i>	87
ONETOUCH DELICA MIS	101	AUTO-INJECTOR		<i>er tab</i>	
LANCET DEVICE		ORGOVYX 120MG TAB	44	<i>oxybutynin chloride 15mg</i>	87
ONETOUCH DELICA MIS	101	ORKAMBI 125-100MG	132	<i>er tab</i>	
PLUS 30G		ORAL GRANULES		<i>oxybutynin chloride</i>	87
ONETOUCH DELICA MIS	101	ORKAMBI 125-100MG	132	<i>1mg/ml oral soln</i>	
PLUS 33G		TAB		<i>oxybutynin chloride 5mg</i>	87
ONETOUCH ULTRA	80	ORKAMBI 125-200MG	132	<i>er tab</i>	
ONETOUCH ULTRA	80	TAB		<i>oxybutynin chloride 5mg</i>	87
BLUE TEST STRIPS		ORKAMBI 188-150MG	132	<i>tab</i>	
ONETOUCH ULTRASOFT	101	ORAL GRANULES		<i>oxycodone 10mg tab</i>	14
2 LANCETS		ORKAMBI 94-75MG	132	<i>oxycodone 15mg tab</i>	14
ONETOUCH VERIO TEST	80	ORAL GRANULES		<i>oxycodone 1mg/ml oral</i>	14
STRIP		<i>orphenadrine citrate</i>	57	<i>soln</i>	
ONETOUCH VERIO TEST	81	<i>100mg er tab</i>		<i>oxycodone 20mg tab</i>	14
STRIPS		<i>orquidea 0.35mg tab</i>	121	<i>oxycodone 30mg tab</i>	14
ONEVITE CALC TAB	107	<i>28-day pack</i>		<i>oxycodone 5mg tab</i>	14
600MG		ORSERDU 345MG TAB	44	<i>oxycodone/acetaminophe</i>	14
ONEVITE TAB	107	ORSERDU 86MG TAB	44	<i>n 10-325mg tab</i>	
500-5MCG		<i>oseltamivir 30mg cap</i>	60	<i>oxycodone/acetaminophe</i>	14
ONEVITE TAB 600-5	107	<i>oseltamivir 45mg cap</i>	60	<i>n 2.5-325mg tab</i>	
ONUREG 200MG TAB	43	<i>oseltamivir 6mg/ml oral</i>	60	<i>oxycodone/acetaminophe</i>	14
ONUREG 300MG TAB	43	<i>susp</i>		<i>n 5-325mg tab</i>	
OPILL TAB 0.075MG	67	<i>oseltamivir 75mg cap</i>	60	<i>oxycodone/acetaminophe</i>	14
OPIZA 10MG ORAL	56	OTEZLA 10/20/30MG	75	<i>n 7.5-325mg tab</i>	
FILM		TAB 28-DAY STARTER		OYST SHELL/D TAB	107
OPIZA 2MG ORAL	56	PACK (55)		250-125	
FILM		OTEZLA 10/20MG TAB	75	OYST SHELL/D TAB	107
OPIZA 5MG ORAL	56	28-DAY STARTER PACK		500MG-200UNIT	
FILM		(55)		OYSTER SHELL	107
OPTIUMEZ TEST STRIPS	81	OTEZLA 20MG TAB	75	CALCIUM TAB 500MG	
OPVEE 2.7MG/0.1ML	16	OTEZLA 30MG TAB	75	OYSTER SHELL	107
NASAL SPRAY		OTEZLA XR 75MG TAB	75	CALCIUM/D TAB 500MG	
ORAL ELECTROLYTE	107	OTEZLA/OTEZLA XR	75	OYSTER SHELL	107
SOLN		28-DAY 10/20/30/75MG		CALCIUM/VITAMIN D	
ORALYTE SOLN	107	STARTER PACK (41)		TAB	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

OYSTER SHELL TAB 1250MG	107	PATADAY OPTH SOLN 0.7%	126	PEDIATRIC ELECTROLYTE	108
OYSTER SHELL TAB 500MG	107	PAXLOVID 150MG/100MG TAB	60	SOLUTION PINEAPPLE PEDIATRIC	108
OYSTER SHELL/VITAMIN D TAB	107	PACK (20) PAXLOVID	60	ELECTROLYTE SOLUTION STRAWBRY	108
500-5MCG		150MG/100MG TAB		PEDIATRIC	108
OZEMPIC 1.5MG TAB	32	PACK (30)		ELECTROLYTE	
OZEMPIC 2MG/3ML	32	PAXLOVID	60	SOLUTION UNFLAVOR	
PEN INJ		300MG/100MG AND		PEDIATRIC	108
OZEMPIC 4MG TAB	32	150MG/100MG TAB		ELECTROLYTE SOLN	
OZEMPIC 4MG/3ML	32	DOSE PACK (11)		PEDIATRIC	108
PEN INJ		<i>pazopanib 200mg tab</i>	48	ELECTROLYTE	
OZEMPIC 8MG/3ML	32	PEDIA D-VITE DROPS	134	SOLUTION	
PEN INJ		400UNIT		PEDIATRIC IRON DROPS	95
OZEMPIC 9MG TAB	32	PEDIA IRON DROPS	95	PEDIATRIC MASK	103
P		15MG/ML		PEDIATRIC MASK	103
PAIN RELIEVING CREAM	76	PEDIACLEAR 8	36	PEDIATRIC MULTIPLE	115
<i>paliperidone 1.5mg er tab</i>	54	CHILDRENS LIQUID		VITAMINS/FLUORIDE/IR	
<i>paliperidone 3mg er tab</i>	54	PEDIACLEAR	36	ON DROPS	
<i>paliperidone 6mg er tab</i>	54	CHILDRENS LIQUID		PEDIATRIC	116
<i>paliperidone 9mg er tab</i>	54	0.625/ML		MULTIVITAMIN WITH	
PANRETIN 0.1%	74	PEDIALYTE SOL ADV	107	EXTRA VITAMIN C	
TOPICAL GEL		CARE		CHEW TAB	
<i>pantoprazole 20mg dr tab</i>	87	PEDIALYTE SOLN	107	PEDIATRIC	115
<i>pantoprazole 40mg dr tab</i>	87	PEDIALYTE SOLUTION	107	MULTIVITAMIN/FLUORI	
PARI VORTEX ADULT MASK	103	PEDIALYTE SOLUTION	107	DE DROPS 0.5MG/ML	
<i>paricalcitol 1mcg cap</i>	82	PEDIALYTE SOLUTION	107	PEDIATRIC	116
<i>paricalcitol 2mcg cap</i>	82	GRAPE		MULTIVITAMIN/IRON	
<i>paricalcitol 4mcg cap</i>	82	PEDIARIX SYRINGE	97	CHEW TAB 15MG	
<i>paroxetine 10mg tab</i>	28	PEDIATRIC	107	PEDIATRIC TRI-VITAMIN	116
PAROXETINE	28	ELECTROLYTE		DROPS	
10MG/5ML ORAL SUSP		SOLUTION		PEDVAXHIB	97
<i>paroxetine 12.5mg er tab</i>	28	PEDIATRIC	108	7.5MCG/0.5ML INJ	
<i>paroxetine 20mg tab</i>	28	ELECTROLYTE		PEG 3350 POW	99
<i>paroxetine 25mg er tab</i>	28	SOLUTION APPLE		PEG 3350 POW	99
<i>paroxetine 30mg tab</i>	28	PEDIATRIC	108	PEG 3350 POWDER	99
<i>paroxetine 37.5mg er tab</i>	28	ELECTROLYTE		<i>peg 3350 powder for oral</i>	86
<i>paroxetine 40mg tab</i>	28	SOLUTION FRUIT		<i>soln (100gm moviprep</i>	
PATADAY OPTH SOLN 0.2%	126	PEDIATRIC	108	<i>equiv)</i>	
		ELECTROLYTE		<i>peg 3350/electrolyte</i>	86
		SOLUTION GRAPE		<i>powder for oral soln</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i>	86	<i>perampanel 2mg tab</i>	26	PHENOBARBITAL 60MG	26
PEG3350 POWDER	99	<i>perampanel 4mg tab</i>	26	TAB	
PEGASYS	59	<i>perampanel 6mg tab</i>	26	PHENOBARBITAL	26
180MCG/0.5ML		<i>perampanel 8mg tab</i>	26	64.8MG TAB	
SYRINGE		PERFECT POINT	101	PHENOBARBITAL	26
PEGASYS 180MCG/ML	59	LANCET 28G		97.2MG TAB	
INJ		PERFECT POINT	101	PHENYLEPHRINE/BRO	70
PEMAZYRE 13.5MG TAB	48	LANCET 30G		MPHENIRAMINE/DM	
PEMAZYRE 4.5MG TAB	48	PERFOROMIST NEB	18	LIQ 10-4-20MG/5ML	
PEMAZYRE 9MG TAB	48	SOLN 20MCG		<i>phenytek 200mg er cap</i>	26
PEN NEEDLES	102	PERIDIN-C TAB	111	<i>phenytek 300mg er cap</i>	26
PEN NEEDLES 30G X	102	PERINDOPRIL	39	<i>phenytoin 25mg/ml oral susp</i>	26
5/16		ERBUMINE 2MG TAB		<i>phenytoin 50mg chew tab</i>	26
PENBRAYA INJ	97	<i>perindopril erbumine 4mg tab</i>	39	<i>phenytoin sodium 100mg er cap</i>	26
<i>penicillamine 250mg tab</i>	34	PERINDOPRIL	39	PHILLIPS TAB 500MG	99
<i>penicillin g potassium 1000000unit/ml inj</i>	22	ERBUMINE 8MG TAB		PHOSPHA 250 NEUTRAL	108
PENICILLIN G SODIUM	22	<i>periogard 0.12% mouthwash</i>	72	TAB	
100000UNIT/ML INJ		<i>permethrin 5% topical cream</i>	77	PHOSPHA 250 TAB	108
<i>penicillin v potassium 250mg tab</i>	22	<i>perphenazine 16mg tab</i>	55	NEUTRAL	
PENICILLIN V	22	<i>perphenazine 2mg tab</i>	55	PHOSPHA 250 TAB	108
POTASSIUM 25MG/ML		<i>perphenazine 4mg tab</i>	55	NEUTRAL	
ORAL SOLN		<i>perphenazine 8mg tab</i>	56	PHOSPHOROUS TAB	108
<i>penicillin v potassium 500mg tab</i>	22	PETROLATUM OINT 42%	127	PHOSPHO-TRIN TAB 250	108
PENICILLIN V	22	PHARMACIST CHOICE	81	NEUT	
POTASSIUM 50MG/ML		TEST STRIPS		PHOSPHO-TRIN TAB	108
ORAL SOLN		PHARMACIST CHOICE	101	K500	
PENMENVY INJ	97	ULTRA THIN LANCETS		PHYTONADIONE INJ	134
PENTACEL INJ	97	PHENELZINE 15MG TAB	28	10MG/ML	
<i>pentamidine isethionate 300mg inj</i>	51	PHENOBARBITAL	26	PHYTONADIONE TAB	134
<i>pentamidine isethionate 300mg/6ml inh soln</i>	51	100MG TAB		5MG	
<i>pentoxifylline 400mg er tab</i>	65	PHENOBARBITAL 15MG	26	PIFELTRO 100MG TAB	58
<i>perampanel 0.5mg/ml oral susp</i>	25	TAB		<i>pilocarpine 1% ophth soln</i>	126
<i>perampanel 10mg tab</i>	26	PHENOBARBITAL	26	<i>pilocarpine 2% ophth soln</i>	126
<i>perampanel 12mg tab</i>	26	16.2MG TAB		<i>pilocarpine 4% ophth soln</i>	126
		PHENOBARBITAL 30MG	26	<i>pilocarpine 5mg tab</i>	72
		TAB		<i>pilocarpine 7.5mg tab</i>	72
		PHENOBARBITAL	26	<i>pimecrolimus 1% topical cream</i>	77
		32.4MG TAB		<i>pimozide 1mg tab</i>	129
		PHENOBARBITAL	26		
		4MG/ML ORAL SOLN			

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>pimozide 2mg tab</i>	129	POLY HIST FORTE TAB	70	<i>posaconazole 40mg/ml</i>	36
<i>pimtreea tab 28-day pack</i>	121	10.5-10		<i>oral susp</i>	
<i>pindolol 10mg tab</i>	63	POLYETHYLENE	99	<i>potassium chloride</i>	119
<i>pindolol 5mg tab</i>	63	GLYCOL 3350 POWDER		<i>1.33meq/ml oral soln</i>	
<i>pioglitazone 15mg tab</i>	31	POLYETHYLENE	99	<i>potassium chloride</i>	119
<i>pioglitazone 30mg tab</i>	31	GLYCOL NF POWDER		<i>10meq er cap</i>	
<i>pioglitazone 45mg tab</i>	31	3350		<i>potassium chloride</i>	119
PIP BLOOD GLUCOSE	81	POLYETHYLENE	99	<i>10meq er tab</i>	
TEST STRIPS		GLYCOL POW 3350 NF		<i>potassium chloride</i>	119
PIP LANCETS 28G	101	POLYETHYLENE	99	<i>10meq micro er tab</i>	
PIP LANCETS 30G	101	GLYCOL POWDER 3350		POTASSIUM CHLORIDE	119
<i>piperacillin/tazobactam</i>	22	POLYETHYLENE	99	10MEQ/100ML INJ	
<i>2000-250mg inj</i>		GLYCOL POWDER 3350		POTASSIUM CHLORIDE	119
<i>piperacillin/tazobactam</i>	22	NF		15MEQ ER TAB	
<i>3000-375mg inj</i>		POLY-IRON 150 FORTE	94	<i>potassium chloride</i>	119
<i>piperacillin/tazobactam</i>	22	CAP		<i>15meq micro er tab</i>	
<i>36-4.5gm inj</i>		POLY-IRON CAP 150MG	95	<i>potassium chloride</i>	119
<i>piperacillin/tazobactam</i>	22	<i>polymyxin b/trimethoprim</i>	124	<i>2.67meq/ml oral soln</i>	
<i>4000-500mg inj</i>		<i>10000unit/ml-0.1% ophth</i>		<i>potassium chloride</i>	119
PIQRAY TAB 200MG	48	<i>soln</i>		<i>20meq er tab</i>	
DAILY DOSE PACK (28)		POLYSACCHARIDE-IRO	95	<i>potassium chloride</i>	119
PIQRAY TAB 250MG	48	N CAP 150MG		<i>20meq micro er tab</i>	
DAILY DOSE PACK (56)		POLYTUSSIN DM LIQ	70	<i>potassium chloride</i>	119
PIQRAY TAB 300MG	48	POLY-VENT DM TAB	71	<i>20meq powder for oral</i>	
DAILY DOSE PACK (56)		60-20-380MG		<i>soln</i>	
<i>pirfenidone 267mg cap</i>	132	POLY-VENT IR TAB	71	POTASSIUM CHLORIDE	119
<i>pirfenidone 267mg tab</i>	132	60-380MG		20MEQ/100ML INJ	
<i>pirfenidone 801mg tab</i>	132	POLYVINYL ALCOHOL	124	<i>potassium chloride</i>	119
<i>piroxicam 10mg cap</i>	12	OPHTH SOLN 1.4%		<i>2meq/ml (20ml) inj</i>	
<i>piroxicam 20mg cap</i>	12	POLY-VI-SOL DROPS	116	<i>potassium chloride</i>	119
PLEGRIDY	128	POLY-VI-SOL WITH	116	<i>2meq/ml inj</i>	
125MCG/0.5ML		IRON DROPS		<i>potassium chloride 8meq</i>	119
AUTO-INJECTOR		<i>pomalidomide 1mg cap</i>	45	<i>er cap</i>	
PLEGRIDY	128	<i>pomalidomide 2mg cap</i>	45	<i>potassium chloride 8meq</i>	119
125MCG/0.5ML		<i>pomalidomide 3mg cap</i>	45	<i>er tab</i>	
SYRINGE		<i>pomalidomide 4mg cap</i>	45	<i>potassium</i>	119
<i>plenamine 15% inj</i>	119	POMALYST 1MG CAP	45	<i>chloride/sodium chloride</i>	
PNV-DHA CAP	116	POMALYST 2MG CAP	45	<i>20meq-0.45% inj</i>	
PNV-OMEGA CAP	116	POMALYST 3MG CAP	45	<i>potassium</i>	119
PNV-SELECT TAB	116	POMALYST 4MG CAP	45	<i>chloride/sodium chloride</i>	
PODOFILOX 0.5%	77	<i>portia tab 28-day pack</i>	121	<i>40meq-0.9% inj</i>	
TOPICAL SOLN		<i>posaconazole 100mg dr</i>	35	<i>potassium citrate 10meq</i>	88
POLY BACITRACIN OIN	73	<i>tab</i>		<i>er tab</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>potassium citrate 15meq er tab</i>	88	PREDNISOLONE ODT TAB 30MG	68	PREMIUM BLOOD GLUCOSE TEST STRIPS	81
<i>potassium citrate 5meq er tab</i>	88	PREDNISOLONE SOLN 10MG/5ML	68	PREMIUM GLUCOSE TEST STRIPS	81
POVIDONE/IODINE SOLN 10%	56	PREDNISOLONE SOLN 20MG/5ML	68	PREMPHASE TAB 28-DAY PACK	123
<i>pramipexole 0.125mg tab</i>	52	PREDNISOLONE TAB 5MG	68	PREMPRO 0.3/1.5MG TAB 28-DAY PACK	123
<i>pramipexole 0.25mg tab</i>	52	<i>prednisone 10mg tab</i>	83	PREMPRO 0.45/1.5MG TAB 28-DAY PACK	123
<i>pramipexole 0.5mg tab</i>	52	<i>prednisone 10mg tab (21)</i>	83	PREMPRO 0.625/2.5MG TAB 28-DAY PACK	123
<i>pramipexole 0.75mg tab</i>	52	<i>prednisone 10mg tab pack (48)</i>	83	PREMPRO 0.625/5MG TAB 28-DAY PACK	123
<i>pramipexole 1.5mg tab</i>	52	<i>prednisone 1mg tab</i>	83	PRENATAL TAB 27-1MG	116
<i>prasugrel 10mg tab</i>	23	PREDNISONE 1MG/ML ORAL SOLN	83	PRENATE AM TAB 1MG	116
<i>prasugrel 5mg tab</i>	23	<i>prednisone 2.5mg tab</i>	83	PRENATE CHEW TAB 0.6-0.4MG	116
<i>pravastatin sodium 10mg tab</i>	38	<i>prednisone 20mg tab</i>	83	PRENATE DHA CAP	116
<i>pravastatin sodium 20mg tab</i>	38	<i>prednisone 50mg tab</i>	83	PRENATE ELITE TAB	116
<i>pravastatin sodium 40mg tab</i>	38	<i>prednisone 5mg tab</i>	83	PRENATE ENHANCE CAP	116
<i>pravastatin sodium 80mg tab</i>	38	<i>prednisone 5mg tab pack (21)</i>	83	PRENATE ESSENTIAL CAP	117
<i>praziquantel 600mg tab</i>	51	<i>prednisone 5mg tab pack (48)</i>	83	PRENATE MINI CAP	117
<i>prazosin 1mg cap</i>	40	PREDNISONE DR TAB 1MG	68	PRENATE PIXIE CAP	117
<i>prazosin 2mg cap</i>	40	PREDNISONE DR TAB 1MG	68	PRENATE RESTORE CAP	117
<i>prazosin 5mg cap</i>	40	PREDNISONE DR TAB 2MG	68	PRENATE STAR TAB 20-1MG	117
PRECISION TEST STRIPS	81	PREDNISONE INTENSOI CONC	68	PRETOMANID 200MG TAB	42
PRECISIONS XTRA TEST STRIPS	81	<i>pregabalin 100mg cap</i>	26	PREVENT CAP	114
PREDNISOLONE 1% OPHTH SOLN	125	<i>pregabalin 150mg cap</i>	26	PREVYMIS 120MG ORAL PELLETT	60
<i>prednisolone 1mg/ml oral soln</i>	83	<i>pregabalin 200mg cap</i>	26	PREVYMIS 240MG TAB	60
<i>prednisolone 3mg/ml oral soln</i>	83	<i>pregabalin 20mg/ml oral soln</i>	26	PREVYMIS 480MG TAB	60
<i>prednisolone 5mg/ml oral soln</i>	83	<i>pregabalin 225mg cap</i>	26	PREZCOBIX 150-675MG TAB	58
<i>prednisolone acetate 1% ophth susp</i>	125	<i>pregabalin 25mg cap</i>	26	PREZCOBIX 150-800MG TAB	58
PREDNISOLONE ODT TAB 10MG	68	<i>pregabalin 300mg cap</i>	26	PREZISTA 100MG/ML ORAL SUSP	58
		<i>pregabalin 50mg cap</i>	26	PREZISTA 150MG TAB	58
		<i>pregabalin 75mg cap</i>	26	PREZISTA 75MG TAB	58
		PREMARIN 0.625MG/GM VAGINAL CREAM	123		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

PRIMAQUINE	51	PROCTOZONE-B SUPP	99	<i>propafenone 425mg er cap</i>	63
PHOSPHATE 26.3MG		10MG			
TAB		PROCTOZONE-G SUPP	99	<i>propranolol 10mg tab</i>	63
<i>primidone 250mg tab</i>	26	2GM		<i>propranolol 120mg er cap</i>	63
<i>primidone 50mg tab</i>	26	PRODIGY SAFETY	101		
PRIORIX INJ	97	LANCETS		<i>propranolol 160mg er cap</i>	63
PRIVIGEN 20GM/200ML	97	PRODIGY TEST STRIPS	81		
INJ		PROFE CAP 180MG	95	<i>propranolol 20mg tab</i>	63
PRIVIGEN INJ	126	PROFERRIN ES TAB	95	<i>propranolol 20mg/5ml oral soln</i>	63
40GM/400ML		12MG			
PRO COMFORT	101	PROFERRIN-FORTE TAB	94	<i>propranolol 40mg tab</i>	64
LANCET 30G		12-1MG		<i>propranolol 60mg er cap</i>	64
PRO FE 180 MG	95	PROFILNINE INJ	91	<i>propranolol 60mg tab</i>	64
CAPSULE		1000UNIT		<i>propranolol 80mg er cap</i>	64
PRO VOICE TEST STRIPS	81	PROFILNINE INJ	91	<i>propranolol 80mg tab</i>	64
<i>probenecid 500mg tab</i>	88	500UNIT		PROPRANOLOL	64
PROCARE SPACER	103	<i>progesterone 100mg cap</i>	123	8MG/ML ORAL SOLN	
CHAMBER ADULT		<i>progesterone 200mg cap</i>	123	<i>propylthiouracil 50mg tab</i>	83
PROCARE SPACER	103	PROGRAF 0.2MG	96		
CHAMBER CHILD		GRANULES FOR ORAL		PROQUAD INJ	97
<i>prochlorperazine 10mg tab</i>	56	SUSP		PROSOL 20% INJ	119
<i>prochlorperazine 25mg rectal supp</i>	56	PROGRAF 1MG	96	PROTECTIRON TAB	94
<i>prochlorperazine 5mg tab</i>	56	GRANULES FOR ORAL		60-1MG	
PROCRIT INJ	93	SUSP		<i>protriptyline 10mg tab</i>	30
10000UNIT/ML		PROLASTIN-C 1000MG	132	<i>protriptyline 5mg tab</i>	30
PROCRIT INJ	93	INJ		<i>prucalopride 1mg tab</i>	86
20000UNIT/ML		<i>promethazine 1.25mg/ml oral soln</i>	129	<i>prucalopride 2mg tab</i>	86
PROCRIT INJ	93	<i>promethazine 12.5mg tab</i>	129	PSEUDOEPHEDRINE ER	118
2000UNIT/ML		<i>promethazine 25mg tab</i>	129	TAB 120MG	
PROCRIT INJ	93	<i>promethazine 50mg tab</i>	129	PSEUDOEPHEDRINE	118
3000UNIT/ML		PROMETHAZINE DM	71	TAB 30MG	
PROCRIT INJ	93	SOLN		PSEUDOEPHEDRINE	118
40000UNIT/ML		PROMETHAZINE SYRUP	71	TAB 60MG	
PROCRIT INJ	93	DM		PSEUDOEPHEDRINE/G	71
4000UNIT/ML		PROMETHAZINE/CODEI	71	UAIFENESIN ER TAB	
<i>procto-med hc 2.5% perianal cream</i>	15	NE SOLN 6.25/10		60-600MG	
<i>proctosol 2.5% perianal cream</i>	15	<i>propafenone 150mg tab</i>	62	PSEUDOEPHEDRINE/G	71
		<i>propafenone 225mg er cap</i>	62	UAIFENESIN TAB	
		<i>propafenone 225mg tab</i>	62	60-375MG	
<i>proctozone hc 2.5% perianal cream</i>	15	<i>propafenone 300mg tab</i>	63	PSEUDOEPHEDRINE/G	71
		<i>propafenone 325mg er cap</i>	63	UAIFENESIN TAB	
				60-600MG	
				PULMOSAL NEB SOLN	72
				7%	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

PULMOZYME	132	QUFLORA DROP	115	RALDESY 10MG/ML	29
2.5MG/2.5ML NEB SOLN		0.25MG/ML		ORAL SOLN	
PURE CALCIUM	107	QUFLORA FE CHEW	114	<i>raloxifene 60mg tab</i>	84
CARBONATE		TAB 0.25MG		<i>ramelteon 8mg tab</i>	133
PURE COMFORT	101	QUFLORA FE DROPS	115	<i>ramipril 1.25mg cap</i>	39
LANCETS 30G		QUFLORA PEDIATRIC	115	<i>ramipril 10mg cap</i>	39
PURE COMFORT	103	CHEW TAB 0.25MG		<i>ramipril 2.5mg cap</i>	39
SPACER		QUFLORA PEDIATRIC	115	<i>ramipril 5mg cap</i>	39
PX LANCETS 28G	101	CHEW TAB 0.5MG		<i>ranolazine 1000mg er tab</i>	65
PX LANCETS MIS 33G	101	QUFLORA PEDIATRIC	115	<i>ranolazine 500mg er tab</i>	65
<i>pyrazinamide 500mg tab</i>	42	CHEW TAB 1MG		<i>rasagiline 0.5mg tab</i>	52
<i>pyridostigmine bromide</i>	57	QUFLORA PEDIATRIC	115	<i>rasagiline 1mg tab</i>	52
<i>60mg tab</i>		DROPS 0.5MG/ML		REBINYN INJ 3000UNIT	91
PYRIDOXINE HCL TAB	136	QUICKVUE HOME KIT	81	REBINYN SOLN	91
100 MG		COVID-19		1000UNIT	
PYRIDOXINE HCL TAB	136	QUICKVUE KIT SARS	81	REBINYN SOLN	91
25 MG		ANT		2000UNIT	
PYRIDOXINE HCL TAB	136	<i>quinapril 10mg tab</i>	39	REBINYN SOLN	91
50 MG		<i>quinapril 20mg tab</i>	39	500UNIT	
PYRIDOXINE TAB	136	<i>quinapril 40mg tab</i>	39	<i>reclipsen tab 28-day pack</i>	121
100MG		<i>quinapril 5mg tab</i>	39	RECOMBINATE INJ	91
PYRIDOXINE TAB 25MG	136	QUINIDINE SULFATE	63	RECOMBIVAX	97
PYRILAMINE/DEXTRO	71	200MG TAB		10MCG/ML INJ	
METHORPHAN DM		QUINIDINE SULFATE	63	RECOMBIVAX	97
LIQUID		300MG TAB		40MCG/ML INJ	
<i>pyrimethamine 25mg tab</i>	51	<i>quinine sulfate 324mg</i>	51	RECOMBIVAX	97
Q		<i>cap</i>		5MCG/0.5ML INJ	
QC LANCING DEVICE	101	QUINTABS-M TAB	114	RECOMBIVAX HB	97
QFITLIA INJ 20/0.2ML	91	QUINTET TEST STRIPS	81	10MCG/ML SYRINGE	
QFITLIA INJ 50/0.5ML	91	QULIPTA 10MG TAB	104	RECOMBIVAX HB	98
QINLOCK 50MG TAB	48	QULIPTA 30MG TAB	104	5MCG/0.5ML SYRINGE	
QUADRACEL INJ	97	QULIPTA 60MG TAB	104	REDEMPLO	82
QUADRACEL SYRINGE	97	QVAR 40MCG	130	25MG/0.5ML SYRINGE	
<i>quetiapine 100mg tab</i>	55	REDIHALER		REDNESS RELIEF	125
<i>quetiapine 150mg er tab</i>	55	QVAR 80MCG	130	DROPS	
<i>quetiapine 200mg er tab</i>	55	REDIHALER		REFRESH CELLUVISC	124
<i>quetiapine 200mg tab</i>	55	R		OPHTH SOLN	
<i>quetiapine 25mg tab</i>	55	RABAVERT 2.5UNIT/ML	97	REFRESH LACRI-LUBE	124
<i>quetiapine 300mg er tab</i>	55	INJ		OPHTH OINT	
<i>quetiapine 300mg tab</i>	55	<i>rabeprazole sodium 20mg</i>	87	REFRESH OPTIVE SOLN	124
<i>quetiapine 400mg er tab</i>	55	<i>dr tab</i>		MEGA-3	
<i>quetiapine 400mg tab</i>	55	RADICAVA 105MG/5ML	109	REFRESH P.M. OPHTH	124
<i>quetiapine 50mg er tab</i>	55	ORAL SUSP		OINT	
<i>quetiapine 50mg tab</i>	55				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

REFRESH PLUS OPHTH SOLN	124	REPATHA SURECLICK 140MG/ML	37	REYATAZ 50MG ORAL POWDER	58
REFRESH RELIEVA	124	AUTO-INJECTOR		REZDIFFRA 100MG TAB	109
REFRESH RELIEVA PF	124	REPEL HUNTERS SPRAY 25%	77	REZDIFFRA 60MG TAB	109
REFRESH RELIEVA PF XTRA	124	REPEL LEMON	78	REZDIFFRA 80MG TAB	109
REFRESH TEARS PF	124	EUCALYPTUS SPRAY		REZLIDHIA 150MG CAP	48
REFUAH PLUS TEST STRIPS	81	REPEL SPORTSMEN MAX SPRAY 40%	78	REZUROCK 200MG TAB	109
RELENZA DISKHALER 5MG/BLISTER POWDER INHALER	60	REPEL SPORTSMEN SPRAY 25%	78	RHAPSIDO 25MG TAB	109
RELION KIT LANCING	101	RETACRIT INJ 4000UNIT	93	RHOPRESSA 0.02%	126
RELION LANCET	101	RETACRIT 10000UNIT/ML INJ	93	OPHTH SOLN	
RELION LANCETS 30G	101	RETACRIT 20000UNIT/2ML INJ	93	RIBAVIRIN 200MG CAP	59
RELION LANCETS 33G	101	RETACRIT 20000UNIT/ML INJ	93	RIBAVIRIN 200MG TAB	59
RELION LANCETS THIN 26G	101	RETACRIT 2000UNIT/ML INJ	93	RIBOFLAVIN TAB 100 MG	136
RELION METRIX TEST STRIPS	81	RETACRIT 3000UNIT/ML INJ	93	RIBOFLAVIN TAB 25 MG	136
RELION PREMIER TEST STRIPS	81	RETACRIT 4000UNIT/ML INJ	93	RIBOFLAVIN TAB 50 MG	136
RELION PRIME TEST STRIPS	81	RETEVMO 120MG TAB	48	<i>rifabutin 150mg cap</i>	42
RELION TEST STRIPS	81	RETEVMO 160MG TAB	48	<i>rifampin 150mg cap</i>	42
RELION ULTRA THIN LANCETS	101	RETEVMO 40MG TAB	48	<i>rifampin 300mg cap</i>	42
RELION ULTRA THIN LANCETS 30G	101	RETEVMO 80MG TAB	48	<i>rifampin 600mg inj</i>	42
RENAL SOFTGEL CAP	111	REVCovi 2.4MG/1.5ML INJ	82	<i>rifapentine 150mg tab</i>	42
RENAL VITAMIN TAB	111	REVEAL TEST STRIPS	81	RIGHTEST GS550 TEST STRIPS	81
RENAL-VITE TAB	111	REVUFORJ 110MG TAB	50	RIGHTEST TEST STRIP	81
RENA-VITE RX TAB	111	REVUFORJ 160MG TAB	50	RIGHTEST TEST STRIPS	81
RENA-VITE TAB	111	REVUFORJ 25MG TAB	50	<i>rilpivirine 25mg tab</i>	58
RENO CAP	111	REXALL TEST STRIPS	81	<i>riluzole 50mg tab</i>	109
RENO CAPS	111	REXULTI 0.25MG TAB	56	RIMANTADINE 100MG TAB	60
<i>repaglinide 0.5mg tab</i>	31	REXULTI 0.5MG TAB	56	RINVOQ 15MG ER TAB	11
<i>repaglinide 1mg tab</i>	31	REXULTI 1MG TAB	56	RINVOQ 1MG/ML ORAL SOLN	11
<i>repaglinide 2mg tab</i>	31	REXULTI 2MG TAB	56	RINVOQ 30MG ER TAB	11
REPATHA 140MG/ML SYRINGE	37	REXULTI 3MG TAB	56	RINVOQ 45MG ER TAB	11
		REXULTI 4MG TAB	56	<i>risedronate sodium 150mg tab</i>	82
				<i>risedronate sodium 30mg tab</i>	82
				<i>risedronate sodium 35mg tab</i>	82
				<i>risedronate sodium 35mg tab pack (12)</i>	82
				<i>risedronate sodium 35mg tab pack (4)</i>	82

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>risedronate sodium 5mg tab</i>	82	ROBAFEN CF	71	<i>rufinamide 40mg/ml oral susp</i>	26
RISPERIDONE 0.25MG ODT	54	MULTI-SYMTOM LIQUID		RUKOBIA 600MG ER TAB	59
<i>risperidone 0.25mg tab</i>	54	ROBAFEN DM LIQUID	71	RYDAPT 25MG CAP	48
<i>risperidone 0.5mg odt</i>	54	20-200MG		RYNEX DM LIQUID	71
<i>risperidone 0.5mg tab</i>	54	ROCKLATAN	126	RYNEX PE ELIXIR	71
<i>risperidone 1mg odt</i>	54	0.02-0.005% OPTH SOLN		RYNEX PSE ELIXIR	71
<i>risperidone 1mg tab</i>	54	<i>roflumilast 250mcg tab</i>	132	S	
<i>risperidone 1mg/ml oral soln</i>	54	<i>roflumilast 500mcg tab</i>	132	S2 NEB SOLN 2.2.5%	18
<i>risperidone 2mg odt</i>	54	ROMVIMZA 14MG CAP	48	<i>sacubitril/valsartan 24-26mg tab</i>	65
<i>risperidone 2mg tab</i>	54	ROMVIMZA 20MG CAP	48	<i>sacubitril/valsartan 49-51mg tab</i>	65
<i>risperidone 3mg odt</i>	54	ROMVIMZA 30MG CAP	48	<i>sacubitril/valsartan 97-103mg tab</i>	65
<i>risperidone 3mg tab</i>	54	<i>ropinirole 0.25mg tab</i>	52	SAFETY 21G MISC LANCETS	101
<i>risperidone 4mg odt</i>	54	<i>ropinirole 0.5mg tab</i>	52	SAFETY 23G MISC LANCETS	101
<i>risperidone 4mg tab</i>	54	<i>ropinirole 1mg tab</i>	52	SAFETY 28G MISC LANCETS	101
<i>risperidone microspheres 12.5mg inj</i>	54	<i>ropinirole 2mg tab</i>	52	SAFETY LANCETS 28G	101
<i>risperidone microspheres 25mg inj</i>	54	<i>ropinirole 3mg tab</i>	52	SAFETY LANCETS 30G	101
<i>risperidone microspheres 37.5mg inj</i>	54	<i>ropinirole 4mg tab</i>	52	<i>salmon calcitonin 200unit/act nasal spray</i>	82
<i>risperidone microspheres 50mg inj</i>	54	<i>ropinirole 5mg tab</i>	52	SANCUSO PATCH 3.1MG	34
<i>ritonavir 100mg tab</i>	58	<i>rosuvastatin calcium 10mg tab</i>	38	SANTYL 250UNIT/GM TOPICAL OINTMENT	78
<i>rivaroxaban 2.5mg tab</i>	23	<i>rosuvastatin calcium 20mg tab</i>	38	<i>sapropterin 100mg powder for oral soln</i>	83
<i>rivastigmine 1.5mg cap</i>	127	<i>rosuvastatin calcium 40mg tab</i>	38	<i>sapropterin 100mg tab</i>	83
<i>rivastigmine 13.3mg/24hr patch</i>	127	<i>rosuvastatin calcium 50mg tab</i>	38	<i>sapropterin 500mg powder for oral soln</i>	83
<i>rivastigmine 3mg cap</i>	127	ROTARIX	98	SAPS HEALTH LANCETS	101
<i>rivastigmine 4.5mg cap</i>	127	667000UNIT/ML ORAL SUSP		SAPS HEALTH TWIST LANCETS	101
<i>rivastigmine 4.6mg/24hr patch</i>	128	ROTATEQ ORAL SUSP	98	LANCETS	
<i>rivastigmine 6mg cap</i>	128	<i>roweepra 500mg tab</i>	26	SAPS TWIST LANCETS 30G	101
<i>rivastigmine 9.5mg/24hr patch</i>	128	ROZLYTREK 100MG CAP	48	SAWYER INSECT REPELLENT 20%	78
RIVIVE SPRAY	34	ROZLYTREK 200MG CAP	48	SCEMBLIX 100MG TAB	48
3MG/0.1ML		ROZLYTREK 50MG ORAL PELLET	48	SCEMBLIX 20MG TAB	48
RIXUBIS INJ	91	RUBRACA 200MG TAB	48	SCEMBLIX 40MG TAB	48
<i>rizatriptan 10mg odt</i>	104	RUBRACA 250MG TAB	48		
<i>rizatriptan 10mg tab</i>	104	RUBRACA 300MG TAB	48		
<i>rizatriptan 5mg odt</i>	104	<i>rufinamide 200mg tab</i>	26		
<i>rizatriptan 5mg tab</i>	104	<i>rufinamide 400mg tab</i>	26		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

SCOOBY-DOO CHW	116	<i>sharobel 0.35mg tab</i>	121	SINUS RELIEF TAB	71
<i>scopolamine 1mg/72hr</i>	35	<i>28-day pack</i>		5-325MG	
<i>patch</i>		SHINGRIX	98	SINUS/COLD-D TAB	71
SECUADO 3.8MG/24HR	55	50MCG/0.5ML INJ		120-220MG	
PATCH		SHINGRIX	98	SINUS+HEADACHE TAB	71
SECUADO 5.7MG/24HR	55	50MCG/0.5ML SYRINGE		5-325MG	
PATCH		SIGNIFOR 0.3MG/ML INJ	84	<i>sirolimus 0.5mg tab</i>	96
SECUADO 7.6MG/24HR	55	SIGNIFOR 0.6MG/ML INJ	84	<i>sirolimus 1mg tab</i>	96
PATCH		SIGNIFOR 0.9MG/ML INJ	84	<i>sirolimus 1mg/ml oral</i>	96
SELECT-OB	117	<i>sildenafil 20mg tab</i>	131	<i>soln</i>	
SELECT-OB PLUS DHA	117	<i>silodosin 4mg cap</i>	88	<i>sirolimus 2mg tab</i>	96
<i>selegiline 5mg cap</i>	52	<i>silodosin 8mg cap</i>	88	SIRTURO 100MG TAB	42
<i>selegiline 5mg tab</i>	52	<i>silver sulfadiazine 1%</i>	78	SIRTURO 20MG TAB	42
SELENIUM SULFIDE	77	<i>topical cream</i>		<i>sitagliptin phosphate</i>	31
2.5% SHAMPOO		SIMBRINZA 0.2-1%	124	<i>100mg tab</i>	
SELENIUM TAB	108	OPHTH SUSP		<i>sitagliptin phosphate</i>	31
200MCG		SIMETHICONE CAP	85	<i>25mg tab</i>	
SELENIUM TAB 50MCG	108	180MG		<i>sitagliptin phosphate</i>	32
SE-NATAL 19 CHEW TAB	117	SIMETHICONE CHEW	85	<i>50mg tab</i>	
SENNA SYRUP 8.8/5ML	99	80MG		SKYRIZI 150MG/ML	61
SENNA TAB 8.6MG	99	SIMETHICONE DROPS	85	AUTO-INJECTOR	
SENSILANCE LANCETS	101	INFANTS		SKYRIZI 150MG/ML	61
21G		SIMETHICONE SUSP	86	SYRINGE	
SENSILANCE LANCETS	101	20/0.3ML		SKYRIZI 180MG/1.2ML	61
26G		SIMLANDI 20MG/0.2ML	61	CARTRIDGE	
SENSILANCE LANCETS	101	SYRINGE		SKYRIZI 360MG/2.4ML	61
28G		SIMLANDI 40MG/0.4ML	61	CARTRIDGE	
SENTRY SENIOR TAB	114	AUTO-INJECTOR		SKYRIZI 55MG/0.37ML	61
SENTRY TAB	114	SIMLANDI 40MG/0.4ML	61	SYRINGE	
SENTRY TAB SENIOR	114	SYRINGE		SLEEP AID LIQUID	95
<i>sertraline 100mg tab</i>	29	SIMLANDI 80MG/0.8ML	61	50MG/30	
<i>sertraline 20mg/ml oral</i>	29	AUTO-INJECTOR		SLEEP-AID CAP 25MG	96
<i>soln</i>		<i>simvastatin 10mg tab</i>	38	SLEEP-AID CAP 50MG	96
<i>sertraline 25mg tab</i>	29	<i>simvastatin 20mg tab</i>	38	SLEEP-AID TAB 25MG	96
<i>sertraline 50mg tab</i>	29	<i>simvastatin 40mg tab</i>	38	SLO-NIACIN CR TAB	136
SE-TAN PLUS CAP	94	<i>simvastatin 5mg tab</i>	38	500MG	
<i>setlakin tab 91-day pack</i>	121	<i>simvastatin 80mg tab</i>	38	SLO-NIACIN ER TAB	136
<i>sevelamer carbonate</i>	109	SINUS	71	500MG	
<i>800mg tab</i>		CONGESTION/PAIN TAB		SLOW RELEASE IRON	95
SEVENFACT INJ 1MG	91	5-325MG		ER TAB 45MG	
SEVENFACT INJ 5MG	91	SINUS RELIEF SEVERE	71	SLOW RELEASE IRON	95
SEVENFACT SOLN 2MG	91	TAB		TAB 45MG	
SEVERE COLD AND FLU	71	SINUS RELIEF SOLN 1%	118	SLOW RELEASE TAB	95
TAB				45MG	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

SLOW RELEASE TAB	95	SODIUM CHLORIDE	126	SOMAVERT 15MG INJ	84
47.5MG		OPHTH SOLN 5%		SOMAVERT 20MG INJ	84
SLOW-MAG TAB	108	SODIUM CHLORIDE	108	SOMAVERT 25MG INJ	84
71.5-119MG		TAB 1GM		SOMAVERT 30MG INJ	84
SLOW-RELEASE TAB FE	95	SODIUM	88	<i>sorafenib 200mg tab</i>	48
45MG		CITRATE/CITRIC ACID		<i>sotalol 120mg tab</i>	64
SM CALCIUM	107	SOLN		<i>sotalol 160mg tab</i>	64
CITRATE+VITAMIN D		SODIUM FLUORIDE	108	<i>sotalol 240mg tab</i>	64
SM VITAMIN C TAB	136	CHEW 0.25MG		<i>sotalol 80mg tab</i>	64
1000MG		SODIUM FLUORIDE	108	<i>sotalol af 120mg tab</i>	64
SMART SENSE	81	CHEW 0.5MG		<i>sotalol af 160mg tab</i>	64
PREMIUM TEST STRIPS		SODIUM FLUORIDE	108	<i>sotalol af 80mg tab</i>	64
SMART SENSE TEST	81	CHEW 1MG		SPACE CHAMBER	103
STRIPS		SODIUM FLUORIDE	108	LARGE	
SMART SENSE VALUE	81	DROPS 0.5MG/ML		SPACE CHAMBER	103
TEST STRIPS		<i>sodium oxybate 500mg/ml</i>	133	MEDIUM	
SMARTEST TEST STRIPS	81	<i>oral soln</i>		SPACE CHAMBER	103
SMOOTH ANTACID	16	<i>sodium phenylbutyrate</i>	83	SMALL	
CHEW FRUIT		<i>3gm/tsp oral powder</i>		SPACE CHAMBR MIS	103
SOD CHLORIDE NEB	72	<i>sodium polystyrene</i>	109	ANTI-STA	
SOLN 0.9%		<i>sulfonate 15000mg</i>		SPACER CHAMBER	103
SOD CHLORIDE OPTH	126	<i>powder for oral susp</i>		ADULT	
OINT 5%		<i>sodium polystyrene</i>	109	SPACER CHAMBER	103
SODIUM BICARBONATE	15	<i>sulfonate 15gm/60ml oral</i>		CHILD	
650MG		<i>susp</i>		SPACER CHAMBER	103
SODIUM BICARBONATE	15	<i>sodium sulfate/potassium</i>	86	INFANT	
TAB 325MG		<i>sulfate/magnesium sulfate</i>		SPACER WITH MASK	103
SODIUM BICARBONATE	16	<i>17.5-3.13-1.6 gm/177ml</i>		SPACER WITH MASK	103
TAB 650MG		<i>oral soln prep kit</i>		SPACERS/HOLDING	103
<i>sodium chloride 0.45%</i>	119	<i>sodium sulfate/potassium</i>	86	CHAMBERS	
<i>inj</i>		<i>sulfate/magnesium sulfate</i>		SPACERS/HOLDING	103
<i>sodium chloride 0.9% inj</i>	119	<i>17.5-3.13-1.6 gm/177ml</i>		CHAMBERS	
<i>sodium chloride 0.9%</i>	88	<i>oral soln prep kit (480ml)</i>		SPECTRAVITE TAB MEN	114
<i>irrigation soln</i>		SOFOSBUVIR/VELPATAS	59	SPECTRAVITE TAB	114
<i>sodium chloride 3% inj</i>	119	VIR 400-100MG TAB		WOMEN 50	
<i>sodium chloride 50mg/ml</i>	119	<i>solifenacin succinate</i>	87	SPECTRAVITE TAB	114
<i>inj</i>		<i>10mg tab</i>		SPECTRAVITE TAB	114
SODIUM CHLORIDE	72	<i>solifenacin succinate 5mg</i>	87	ADULT 50+	
NEB SOLN 0.9%		<i>tab</i>		SPECTRAVITE TAB	114
SODIUM CHLORIDE	72	SOLTAMOX 10MG/5ML	44	ADULTS	
NEB SOLN 3%		ORAL SOLN		SPECTRAVITE TAB	114
SODIUM CHLORIDE	72	SOLUS V2 AUDIBLE	81	WOMEN	
NEB SOLN 7%		TEST STRIPS		SPECTRAVITE TAB	114
		SOMAVERT 10MG INJ	84	WOMEN 50+	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

SPIRIVA RESPIMAT	130	STROVITE FORTE TAB	114	<i>sumatriptan 6mg/0.5ml</i>	104
1.25MCG/ACT INHALER		STROVITE ONE TAB	114	<i>auto-injector</i>	
<i>spironolactone 100mg tab</i>	66	SUBVENITE 10MG/ML	26	<i>sumatriptan 6mg/0.5ml</i>	104
<i>spironolactone 25mg tab</i>	66	ORAL SUSP		<i>inj</i>	
<i>spironolactone 50mg tab</i>	66	<i>sucralfate 1000mg tab</i>	87	<i>sunitinib malate 12.5mg</i>	49
<i>sprintec tab 28-day pack</i>	121	<i>sucralfate 100mg/ml oral</i>	87	<i>cap</i>	
SPRITAM 250MG TAB	26	<i>susp</i>		<i>sunitinib malate 25mg</i>	49
FOR ORAL SUSP		SUDOGEST 12 HOUR ER	118	<i>cap</i>	
SPRITAM 500MG TAB	26	TAB 120MG		<i>sunitinib malate 37.5mg</i>	49
FOR ORAL SUSP		SUDOGEST MAX TAB	118	<i>cap</i>	
<i>sps 15gm/60ml oral susp</i>	109	30MG		<i>sunitinib malate 50mg</i>	49
<i>ssd 1% topical cream</i>	78	SUDOGEST TAB 30MG	118	<i>cap</i>	
STARJEMZA	61	SUDOGEST TAB 60MG	118	SUNLENCA 300MG TAB	59
45MG/0.5ML INJ		SUFLAVE ORAL SOLN	86	SUNLENCA 300MG TAB	59
STARJEMZA	61	PACK		THERAPY PACK (4)	
45MG/0.5ML SYRINGE		SULFACETAMIDE	125	SUNLENCA 300MG TAB	59
STARJEMZA 90MG/ML	61	SODIUM 10% OPTH		THERAPY PACK (5)	
SYRINGE		SOLN		SUNOSI 150MG TAB	133
STIOLTO RESPIMAT	131	<i>sulfacetamide sodium</i>	73	SUNOSI 75MG TAB	133
2.5-2.5MCG/ACT		<i>10% topical lotion</i>		SUPER BIOTIN CAP	137
INHALER		SULFACETAMIDE/PRED	125	5000MCG	
STIVARGA 40MG TAB	48	NISOLONE 10-0.25%		SUPER QUINTS TAB	111
STOMACH RELIEF	34	OPPTH SOLN		SUPER THERA VITE M	114
CHEW 262MG		<i>sulfadiazine 500mg tab</i>	19	TAB	
STOMACH RELIEF SUSP	34	<i>sulfamethoxazole/trimeth</i>	19	SUPPORT LIQUID	114
525/15ML		<i>oprim 200-40mg/5ml oral</i>		SUPPORT-500 CAP	114
STOMACH RELIEF SUSP	34	<i>susp</i>		SURE COMFORT	101
525/30ML		<i>sulfamethoxazole/trimeth</i>	19	LANCETS 18G	
STOMACH RELIEF TAB	34	<i>oprim 400-80mg tab</i>		SURE COMFORT	101
262MG		<i>sulfamethoxazole/trimeth</i>	19	LANCETS 21G	
STOOL SOFTENER TAB	99	<i>oprim 800-160mg tab</i>		SURE COMFORT	102
100MG		<i>sulfasalazine 500mg dr</i>	98	LANCETS 23G	
STREPTOMYCIN 1GM	18	<i>tab</i>		SURE COMFORT	102
INJ		<i>sulfasalazine 500mg tab</i>	98	LANCETS 30G	
STRESS B/ TAB ZINC	110	<i>sulindac 150mg tab</i>	12	SURE TEST EASYPLUS	81
STRESS B-COM TAB	114	<i>sulindac 200mg tab</i>	12	TEST STRIPS	
STRESS FORMULA TAB	115	<i>sumatriptan 100mg tab</i>	104	SUTAB 225-188-1479MG	86
STRESS FORMULA/ZINC	110	<i>sumatriptan 20mg/act</i>	104	TAB	
TAB		<i>nasal spray</i>		SV IRON TAB 325MG	95
STRIBILD	59	<i>sumatriptan 25mg tab</i>	104	SV VITAMIN B-12 TR	92
150-150-200-300MG		<i>sumatriptan 50mg tab</i>	104	TAB 1000	
TAB		<i>sumatriptan 5mg/act</i>	104	<i>syeda tab 28-day pack</i>	121
STRIVERDI RESPIMAT	131	<i>nasal spray</i>		SYMDEKO TAB 4-WEEK	132
2.5MCG/ACT INHALER				PACK (56)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

SYMDEKO TAB	132	<i>tacrolimus 0.03% topical ointment</i>	77	TEMOZOLOMIDE CAP	42
50-75MG/75MG PACK (56)		<i>tacrolimus 0.1% topical ointment</i>	77	100MG	
SYMPAZAN 10MG ORAL FILM	24	<i>tacrolimus 0.5mg cap</i>	96	TEMOZOLOMIDE CAP	42
SYMPAZAN 20MG ORAL FILM	24	<i>tacrolimus 1mg cap</i>	96	140 MG	
SYMPAZAN 5MG ORAL FILM	24	<i>tacrolimus 5mg cap</i>	96	TEMOZOLOMIDE CAP	42
SYMTUZA	59	<i>tadalafil 2.5mg tab</i>	88	180 MG	
150-800-200-10MG TAB		<i>tadalafil 20mg tab (pah)</i>	131	TEMOZOLOMIDE CAP	42
SYNTHROID 100MCG TAB	85	<i>tadalafil 5mg tab</i>	88	180MG	
SYNTHROID 112MCG TAB	85	TAFINLAR 10MG TAB	49	TEMOZOLOMIDE CAP	42
SYNTHROID 125MCG TAB	85	FOR ORAL SUSP		20 MG	
SYNTHROID 137MCG TAB	85	TAFINLAR 50MG CAP	49	TEMOZOLOMIDE CAP	42
SYNTHROID 150MCG TAB	85	TAFINLAR 75MG CAP	49	20MG	
SYNTHROID 175MCG TAB	85	TAGRISSO 40MG TAB	43	TEMOZOLOMIDE CAP	42
SYNTHROID 200MCG TAB	85	TAGRISSO 80MG TAB	43	250 MG	
SYNTHROID 25MCG TAB	85	TALZENNA 0.1MG CAP	49	TEMOZOLOMIDE CAP	42
SYNTHROID 300MCG TAB	85	TALZENNA 0.25MG CAP	49	250MG	
SYNTHROID 50MCG TAB	85	TALZENNA 0.35MG CAP	49	TEMOZOLOMIDE CAP 5	42
SYNTHROID 75MCG TAB	85	TALZENNA 0.5MG CAP	49	MG	
SYNTHROID 88MCG TAB	85	TALZENNA 0.75MG CAP	49	TEMOZOLOMIDE CAP	42
		TALZENNA 1MG CAP	49	5MG	
		<i>tamoxifen 10mg tab</i>	44	TENIVAC 4-10UNIT/ML	98
		<i>tamoxifen 20mg tab</i>	44	INJ	
		<i>tamsulosin 0.4mg cap</i>	88	TENIVAC 4-10UNIT/ML	98
		TANDEM CAP	94	SYRINGE	
		TANDEM PLUS	94	<i>tenofovir disoproxil fumarate 300mg tab</i>	59
		<i>tarina fe 1/20 tab 28-day pack</i>	121	TEPMETKO 225MG TAB	49
		TARON FORTE CAP	94	<i>terazosin 10mg cap</i>	40
		TARON-C DHA CAP	117	<i>terazosin 1mg cap</i>	40
		TARPEYO 4MG DR CAP	83	<i>terazosin 2mg cap</i>	40
		<i>tazarotene 0.1% topical cream</i>	75	<i>terazosin 5mg cap</i>	40
		<i>tazicef 1gm inj</i>	21	<i>terbinafine 250mg tab</i>	36
		<i>tazicef 2gm inj</i>	21	TERBINAFINE CREAM	74
		TAZICEF 6GM INJ	21	1%	
		TECHLITE LANCETS	102	<i>terconazole 0.4% vaginal cream</i>	36
		TELCARE TEST STRIPS	81	<i>terconazole 0.8% vaginal cream</i>	36
		<i>telmisartan 20mg tab</i>	39	<i>terconazole 80mg vaginal insert</i>	36
		<i>telmisartan 40mg tab</i>	39		
		<i>telmisartan 80mg tab</i>	39	<i>teriflunomide 14mg tab</i>	128
		<i>temazepam 15mg cap</i>	133	<i>teriflunomide 7mg tab</i>	128
		<i>temazepam 30mg cap</i>	133		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

<i>teriparatide</i>	82	<i>theophylline 600mg er</i>	132	TIBSOVO 250MG TAB	49
<i>560mcg/2.24ml pen inj</i>		<i>tab</i>		<i>ticagrelor 60mg tab</i>	23
TEST STRIPS	81	THERA-M TAB	114	<i>ticagrelor 90mg tab</i>	23
<i>testosterone 1%</i>	15	THERA-M TAB	114	TICOVAC	98
<i>(12.5mg/act) topical gel</i>		THERAPEUTIC LIQUID	114	1.2MCG/0.25ML	
<i>pump</i>		THERAPEUTIC-M TAB	114	SYRINGE	
<i>testosterone 1%</i>	15	THERAPEUTIC-M/LUTEI	114	TICOVAC 2.4MCG/0.5ML	98
<i>(25mg/2.5gm) topical gel</i>		N TAB		SYRINGE	
<i>packet</i>		THERA-TABS	115	<i>tigecycline 50mg inj</i>	19
<i>testosterone 1%</i>	15	THERA-TABS	115	<i>timolol 0.25% ophth gel</i>	124
<i>(50mg/5gm) topical gel</i>		THERATRUM	114	<i>timolol 0.25% ophth soln</i>	124
<i>packet</i>		COMPLETE 50 PLUS		<i>timolol 0.5% ophth gel</i>	124
<i>testosterone 1.62%</i>	15	TAB		<i>timolol 0.5% ophth soln</i>	124
<i>(20.25mg/act) topical gel</i>		THERATRUM	114	<i>timolol 10mg tab</i>	64
<i>pump</i>		COMPLETE TAB		TIMOLOL 5MG TAB	64
<i>testosterone 30mg/act</i>	15	THERATRUM	114	<i>tinidazole 250mg tab</i>	19
<i>topical soln</i>		COMPLETE TAB		<i>tinidazole 500mg tab</i>	19
<i>testosterone cypionate</i>	15	THERA-VITE TAB	114	TIVICAY 50MG TAB	59
<i>100mg/ml inj</i>		<i>thioridazine 100mg tab</i>	56	TIVICAY 5MG TAB FOR	59
<i>testosterone cypionate</i>	15	<i>thioridazine 10mg tab</i>	56	ORAL SUSP	
<i>200mg/ml (1ml) inj</i>		<i>thioridazine 25mg tab</i>	56	<i>tizanidine 2mg tab</i>	57
<i>testosterone cypionate</i>	15	<i>thioridazine 50mg tab</i>	56	<i>tizanidine 4mg tab</i>	57
<i>200mg/ml inj</i>		<i>thiothixene 10mg cap</i>	53	TOBI PODHALER 28MG	18
TESTOSTERONE	15	<i>thiothixene 1mg cap</i>	53	PACK (224)	
ENANTHATE 200MG/ML		<i>thiothixene 2mg cap</i>	53	<i>tobramycin 0.3% ophth</i>	125
INJ		<i>thiothixene 5mg cap</i>	53	<i>soln</i>	
<i>tetrabenazine 12.5mg tab</i>	128	THRIVITE RX TAB	117	TOBRAMYCIN	18
<i>tetrabenazine 25mg tab</i>	128	THYROSAFE TAB 65MG	34	10MG/ML INJ	
<i>tetracycline 250mg cap</i>	19	<i>tiadylt 120mg er (24hr)</i>	65	<i>tobramycin 300mg/5ml</i>	18
<i>tetracycline 500mg cap</i>	19	<i>cap</i>		<i>neb soln</i>	
TGT TEST STRIPS	81	<i>tiadylt 180mg er (24hr)</i>	65	<i>tobramycin 80mg/2ml inj</i>	18
THALOMID 100MG CAP	45	<i>cap</i>		TOBRAMYCIN INJ	11
THALOMID 50MG CAP	45	<i>tiadylt 240mg er (24hr)</i>	65	1.2GM/30ML	
THEOPHYLLINE 100MG	132	<i>cap</i>		TOBRAMYCIN NEB	11
ER TAB		<i>tiadylt 300mg er (24hr)</i>	65	SOLN 300/4ML	
THEOPHYLLINE 200MG	132	<i>cap</i>		<i>tofacitinib 10mg tab</i>	11
ER TAB		<i>tiadylt 360mg er (24hr)</i>	65	<i>tofacitinib 11mg er tab</i>	11
<i>theophylline 300mg er</i>	132	<i>cap</i>		<i>tofacitinib 1mg/ml oral</i>	11
<i>tab</i>		<i>tiadylt 420mg er (24hr)</i>	65	<i>soln</i>	
<i>theophylline 400mg er</i>	132	<i>cap</i>		<i>tofacitinib 22mg er tab</i>	11
<i>tab</i>		TIAGABINE 12MG TAB	27	<i>tofacitinib 5mg tab</i>	11
<i>theophylline 450mg er</i>	132	TIAGABINE 16MG TAB	27	TOLNAFTATE CREAM	74
<i>tab</i>		<i>tiagabine 2mg tab</i>	27	1%	
		<i>tiagabine 4mg tab</i>	27		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

TOLNAFTATE CREAM 1%	74	<i>tramadol 50mg tab</i>	14	TRESIBA FLEXTOUCH 100UNIT/ML PEN INJ (3ML)	33
TOLNAFTATE POWDER 1%	74	<i>tramadol/acetaminophen 37.5-325mg tab</i>	14	TRESIBA FLEXTOUCH 200UNIT/ML PEN INJ (3ML)	33
<i>tolterodine tartrate 1mg tab</i>	87	<i>trandolapril 1mg tab</i>	39	<i>tretinoin 0.01% topical gel</i>	73
<i>tolterodine tartrate 2mg er cap</i>	87	<i>trandolapril 2mg tab</i>	39	<i>tretinoin 0.025% topical cream</i>	73
<i>tolterodine tartrate 2mg tab</i>	88	<i>trandolapril 4mg tab</i>	39	<i>tretinoin 0.025% topical gel</i>	73
<i>tolterodine tartrate 4mg er cap</i>	88	<i>tranexamic acid 650mg tab</i>	110	<i>tretinoin 0.05% topical cream</i>	73
<i>tolvaptan 15mg tab (jynarque equiv)</i>	84	<i>tranylcypromine 10mg tab</i>	28	<i>tretinoin 0.1% topical cream</i>	73
<i>tolvaptan 15mg tab therapy pack (56)</i>	84	TRAVASOL 10% INJ	119	<i>tretinoin 10mg cap</i>	50
<i>tolvaptan 15mg/30mg tab pack (56)</i>	84	<i>travoprost 0.004% ophth soln</i>	126	TRETEN INJ	91
<i>tolvaptan 15mg/45mg tab pack (56)</i>	84	<i>trazodone 100mg tab</i>	29	TREXALL TAB 10MG	43
<i>tolvaptan 30mg tab (jynarque equiv)</i>	84	<i>trazodone 150mg tab</i>	29	TREXALL TAB 15MG	43
<i>tolvaptan 30mg/60mg tab pack (56)</i>	84	<i>trazodone 50mg tab</i>	29	TREXALL TAB 5MG	43
<i>tolvaptan 30mg/90mg tab pack (56)</i>	84	TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER	131	TREXALL TAB 7.5MG	43
<i>topiramate 100mg tab</i>	26	TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER	131	<i>triamcinolone acetonide 0.025% topical cream</i>	76
<i>topiramate 15mg cap</i>	26	TRELSTAR MIXJECT 11.25MG INJ	44	TRIAMCINOLONE ACETONIDE 0.025% TOPICAL LOTION	76
<i>topiramate 200mg tab</i>	26	TRELSTAR MIXJECT 22.5MG INJ	44	<i>triamcinolone acetonide 0.025% topical ointment</i>	72
<i>topiramate 25mg cap</i>	26	TRELSTAR MIXJECT 3.75MG INJ	44	<i>triamcinolone acetonide 0.1% oral paste</i>	76
<i>topiramate 25mg tab</i>	26	TREMFYA 100MG/ML AUTO-INJECTOR	61	<i>triamcinolone acetonide 0.1% topical cream</i>	76
<i>topiramate 25mg/ml oral soln</i>	26	TREMFYA 100MG/ML SYRINGE	61	<i>triamcinolone acetonide 0.1% topical lotion</i>	76
<i>topiramate 50mg tab</i>	26	TREMFYA 200MG/2ML AUTO-INJECTOR	61	<i>triamcinolone acetonide 0.1% topical ointment</i>	76
<i>toremifene 60mg tab</i>	44	TREMFYA 200MG/2ML AUTO-INJECTOR	61	<i>triamcinolone acetonide 0.5% topical cream</i>	76
<i>torsemide 100mg tab</i>	66	INDUCTION PACK FOR CROHNS (2)	61	<i>triamcinolone acetonide 0.5% topical ointment</i>	117
<i>torsemide 10mg tab</i>	66	TREMFYA 200MG/2ML SYRINGE	61	TRIAMCINOLONE SPRAY 55MCG/ACT	
<i>torsemide 20mg tab</i>	66	TRESIBA 100UNIT/ML INJ	33		
<i>torsemide 5mg tab</i>	66				
TPN ELECTROLYTES INJ	119				
TRADJENTA 5MG TAB	32				
<i>tramadol 100mg er tab</i>	14				
<i>tramadol 200mg er tab</i>	14				
<i>tramadol 300mg er tab</i>	14				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

TRICARE PRENATAL TAB	117	TRIPLE ANTIBIOTIC OIN	73	TRUE METRIX TEST STRIPS	81
TRICITRATES SOLN	88	TRIPLE ANTIBIOTIC OINT	73	TRUE VITAMIN C TAB	137
<i>trientine 250mg cap</i>	34	TRIPLE ANTIBIOTIC OINTMENT	73	1000MG	
<i>tri-estarylla tab 28-day pack</i>	121	TRIPLE ANTIBIOTIC PLUS OINT	73	TRUELYTE SOLN	108
<i>trifluoperazine 10mg tab</i>	56	TRIPROLIDINE DRO	36	TRUENESS TEST STRIPS	81
<i>trifluoperazine 1mg tab</i>	56	0.938MG		TRUEPLUS SAFETY	102
<i>trifluoperazine 2mg tab</i>	56	<i>tri-sprintec tab 28-day pack</i>	122	LANCETS	
<i>trifluoperazine 5mg tab</i>	56	TRISTART DHA CAP	117	TRUETEST STRIPS	81
TRIFLURIDINE 1%	125	TRIUMEQ	59	TRUETRACK TEST STRIPS	81
OPHTH SOLN		600-50-300MG TAB		TRULICITY	32
<i>trihexyphenidyl 2mg tab</i>	51	TRIUMEQ 60-5-30MG	59	0.75MG/0.5ML	
<i>trihexyphenidyl 5mg tab</i>	51	TAB FOR ORAL SUSP		AUTO-INJECTOR	
TRIKAFTA	132	TRI-VITAMIN/FLUORIDE	115	TRULICITY	32
100-50-75MG/150MG		DROPS 0.25MG		1.5MG/0.5ML	
TAB PACK (84)		TRI-VITAMIN/FLUORIDE	115	AUTO-INJECTOR	
TRIKAFTA	132	DROPS 0.5MG		TRULICITY 3MG/0.5ML	32
100-50-75MG/75MG		TRI-VITAMIN/FLUORIDE	115	AUTO-INJECTOR	
ORAL GRANULES PACK (56)		SOLN		TRULICITY	32
TRIKAFTA	132	TRI-VITE PEDIATRIC	116	4.5MG/0.5ML	
50-37.5-25MG/75MG		DROPS		AUTO-INJECTOR	
TAB PACK (84)		<i>tri-vylibra lo tab 28-day pack</i>	122	TRUMENBA SYRINGE	98
TRIKAFTA	132	<i>tri-vylibra tab 28-day pack</i>	122	TRUPLUS LANCETS	102
80-40-60MG/59.5MG		<i>trosipium chloride 20mg tab</i>	88	TRUQAP 160MG TAB	49
ORAL GRANULES PACK (56)		TRU METRIX TEST STRIPS	81	TRUQAP 200MG TAB	49
<i>tri-lo-estarylla tab 28-day pack</i>	122	TRUE COMFORT	102	TRYNGOLZA	83
<i>tri-lo-sprintec tab 28-day pack</i>	122	LANCETS 30G		80MG/0.8ML	
TRIMETHOBENZAMIDE	34	TRUE COMFORT	102	AUTO-INJECTOR	
CAP 300MG		SAFETY LANCETS		TUKYSA 150MG TAB	50
<i>trimethoprim 100mg tab</i>	20	TRUE COMFORT TWIST	102	TUKYSA 50MG TAB	50
<i>tri-mili tab 28-day pack</i>	122	LANCETS		TURALIO 125MG CAP	49
<i>trimipramine 100mg cap</i>	30	TRUE FERROUS	95	<i>turqoz tab 28-day pack</i>	122
<i>trimipramine 25mg cap</i>	30	SULFATE EC TAB 324MG		TUSSIN DM LIQUID	71
<i>trimipramine 50mg cap</i>	30	TRUE METRIX TEST STRIPS	81	20-200MG	
TRINATAL RX 1 TAB	117	TRUE METRIX TEST STRIPS	81	TUSSIN MUCUS LIQUID	72
TRINTELLIX 10MG TAB	29			200/10ML	
TRINTELLIX 20MG TAB	29			TUXARIN ER TAB	71
TRINTELLIX 5MG TAB	29			54.3-8MG	
TRIPHROCAPS	111			TWINRIX SYRINGE	98
				TWIST LANCET 30G	102
				TWIST LANCET 30G	102
				MULTI	

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ALPHABETICAL LISTING OF DRUGS

TYENNE 162MG/0.9ML AUTO-INJECTOR	61	UNIFINE SAFE 32GX4MM	102	VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK	24
TYENNE 162MG/0.9ML SYRINGE	61	UNIFINE SAFECONTROI PEN N	102	VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK	24
TYMLOS 3120MCG/1.56ML PEN INJ	82	UNILET LANCET MIS 28G	102	<i>valtya 1/35 tab 28-day pack</i>	122
TYPHIM VI 25MCG/0.5ML SYRINGE	98	UNILET LANCET MIS 30G	102	VALTYA 1/50 TAB 28-DA	122
TYVASO DPI POWDER 16-32-48	67	UNILET LANCET MIS 33G	102	PACK	
TYVASO DPI POWDER 16MCG	67	UNILET LANCETS	102	VANACOF CP LIQUID	71
TYVASO DPI POWDER 32MCG	67	UNILET LANCETS 33G	102	VANACOF DM LIQUID	71
TYVASO DPI POWDER 48MCG	67	UNILET LANCETS	102	VANACOF LIQUID	71
TYVASO DPI POWDER 64MCG	67	SUPER THIN		VANALICE GEL 0.3-3.5%	78
TYVASO SOLN 0.6MG/ML	67	UNILET MICRO	102	<i>vancomycin 100mg/ml inj</i>	20
		LANCETS 33G		<i>vancomycin 125mg cap</i>	20
		UNISTIK PRO LANCETS	102	<i>vancomycin 1gm inj</i>	20
		UNISTIK TOUCH	102	<i>vancomycin 250mg cap</i>	20
		SAFETY LANCETS		<i>vancomycin 500mg inj</i>	20
		UNISTRIP1 TEST STRIPS	81	<i>vancomycin 750mg inj</i>	20
		<i>ursodiol 250mg tab</i>	110	VANFLYTA 17.7MG TAB	49
		<i>ursodiol 300mg cap</i>	110	VANFLYTA 26.5MG TAB	49
		<i>ursodiol 500mg tab</i>	110	VAPOR STEAM LIQUID	72
U				6.2%	
UBRELVY 100MG TAB	104	V		VAQTA 25UNIT/0.5ML INJ	98
UBRELVY 50MG TAB	104	<i>valacyclovir 1000mg tab</i>	59	VAQTA 25UNIT/0.5ML SYRINGE	98
ULTRA CALCIUM +	107	<i>valacyclovir 500mg tab</i>	59	VAQTA 50UNIT/ML INJ	98
VITAMIN D		VALCHLOR 0.016%	74	VAQTA 50UNIT/ML SYRINGE	98
ULTRA EYE PF DROP 0.4-0.3%	124	TOPICAL GEL		<i>varenicline tab</i>	17
ULTRA THIN LANCETS 31G	102	<i>valganciclovir 450mg tab</i>	60	<i>0.5mg/1mg first month pack (53)</i>	
ULTRA THIN LANCETS 33G	102	<i>valganciclovir 50mg/ml oral soln</i>	60	<i>varenicline tartrate 0.5mg tab</i>	17
ULTRATHON INSECT REPELLENT	78	<i>valproic acid 250mg cap</i>	27	<i>varenicline tartrate 1mg tab</i>	17
ULTRATRAK PRO TEST STRIPS	81	<i>valproic acid 50mg/ml oral soln</i>	27	<i>varenicline tartrate 1mg tab pack (56)</i>	17
ULTRATRAK ULTIMATE TEST STRIPS	81	<i>valsartan 160mg tab</i>	39	VARIVAX	98
UNIFINE PROTECT PEN	102	<i>valsartan 320mg tab</i>	39	1350PFU/0.5ML INJ	
NEEDLES 30GX5MM		<i>valsartan 40mg tab</i>	39	VAXCHORA ORAL SUSP	98
UNIFINE PROTECT PEN	102	<i>valsartan 80mg tab</i>	39	V-C FORTE CAP	114
NEEDLES 30GX8MM		VALTOCO 10MG	24		
UNIFINE PROTECT PEN	102	(10MG/0.1ML) NASAL SPRAY DOSE PACK			
NEEDLES 32GX4MM		VALTOCO 15MG	24		
		(7.5MG/0.1ML) NASAL SPRAY DOSE PACK			

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ALPHABETICAL LISTING OF DRUGS

VELETRI INJ 0.5MG	67	VERZENIO 100MG TAB	49	VITAMIN A CAP	134
VELETRI INJ 1.5MG	67	VERZENIO 150MG TAB	49	3000MCG	
VELIVET TAB 28-DAY	122	VERZENIO 200MG TAB	49	VITAMIN A CAP	134
PACK		VERZENIO 50MG TAB	49	8000UNIT	
VELSIPITY 2MG TAB	110	<i>vestura tab 3-0.02mg</i>	122	VITAMIN B COMPLEX	110
VENCLEXTA 100MG	50	<i>28-day pack</i>		CAP	
TAB		VIC-FORTE CAP	114	VITAMIN B COMPLEX	110
VENCLEXTA 10MG TAB	50	<i>vienva tab 28-day pack</i>	122	TAB/B-12	
VENCLEXTA 50MG TAB	50	<i>vigabatrin 500mg powder</i>	27	VITAMIN B	110
VENCLEXTA TAB	50	<i>for oral soln</i>		COMPLEX/VITAMIN C	
STARTER PACK (42)		<i>vigabatrin 500mg tab</i>	27	TAB	
<i>venlafaxine 100mg tab</i>	29	<i>vilazodone 10mg tab</i>	29	VITAMIN B TAB	110
<i>venlafaxine 150mg er cap</i>	29	<i>vilazodone 20mg tab</i>	29	COMPLEX	
<i>venlafaxine 25mg tab</i>	29	<i>vilazodone 40mg tab</i>	29	VITAMIN B1 TAB 100MG	137
<i>venlafaxine 37.5mg er</i>	29	VIMKUNYA	98	VITAMIN B-1 TAB	137
<i>cap</i>		40MCG/0.8ML SYRINGE		100MG	
<i>venlafaxine 37.5mg tab</i>	30	<i>viorele tab 28-day pack</i>	122	VITAMIN B1 TAB 250MG	137
<i>venlafaxine 50mg tab</i>	30	VIRACEPT 250MG TAB	59	VITAMIN B-1 TAB 50MG	137
<i>venlafaxine 75mg er cap</i>	30	VIRACEPT 625MG TAB	59	VITAMIN B-12 250MCG	92
<i>venlafaxine 75mg tab</i>	30	VIREAD 150MG TAB	59	VITAMIN B-12 CR TAB	92
<i>verapamil 120mg er cap</i>	65	VIREAD 200MG TAB	59	1000	
<i>verapamil 120mg er tab</i>	65	VIREAD 250MG TAB	59	VITAMIN B-12 CR TAB	92
<i>verapamil 120mg tab</i>	65	VIREAD 40MG/GM	59	1000MCG	
<i>verapamil 180mg er cap</i>	65	ORAL POWDER		VITAMIN B-12 ER TAB	92
<i>verapamil 180mg er tab</i>	65	VIT A/C/D/FL DRO	115	1000MCG	
<i>verapamil 240mg er cap</i>	65	0.25MG		VITAMIN B-12 SL TAB	92
<i>verapamil 240mg er tab</i>	65	VIT E D-ALPH CAP	134	2500MCG	
<i>verapamil 40mg tab</i>	65	1000UNIT		VITAMIN B-12 TAB 1000	92
<i>verapamil 80mg tab</i>	65	VIT E D-ALPH CAP	134	TR	
VEREFINE LANCETS	102	400UNIT		VITAMIN B12 TAB	92
VERIFINE LANCET MIS	102	VIT E/D-ALPH CAP	134	1000MCG	
MINI 21G		200UNIT		VITAMIN B-12 TAB	92
VERIFINE LANCET MIS	102	VITAFOL GUMMIES	117	1000MCG	
MINI 23G		VITAFOL ULTRA CAP	117	VITAMIN B-12 TAB	92
VERIFINE LANCET MIS	102	VITAFOL-OB PLUS DHA	117	100MCG	
MINI 28G		VITAFOL-OB TAB	117	VITAMIN B12 TAB	92
VERIFINE LANCET MIS	102	VITAFOL-ONE CAP	117	2000MCG	
MINI 30G		VITALEE TAB	115	VITAMIN B-12 TAB	92
VERIFINE LANCETS	102	VITALETS CHW	115	2000MCG	
VERQUVO 10MG TAB	65	VITALETS CHW CHILD	115	VITAMIN B-12 TAB	92
VERQUVO 2.5MG TAB	65	VITAMIN A AND D OINT	76	2500MCG	
VERQUVO 5MG TAB	65	VITAMIN A CAP	134	VITAMIN B-12 TAB	92
VERSACLOZ 50MG/ML	55	10000UNIT		250MCG	
ORAL SUSP		VITAMIN A CAP 3 MG	134		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

VITAMIN B-12 TAB 500MCG	92	VITAMIN D DROP 400UNIT	135	VIVITROL 380MG INJ	16
VITAMIN B-12 TAB 50MCG	92	VITAMIN E CAP 180MG	135	VIVOTIF DR CAP	98
VITAMIN B-12 TR TAB 1000MG	92	VITAMIN E CAP 1000UNIT	135	VONJO 100MG CAP	49
VITAMIN B-2 TAB 100MG	137	VITAMIN E CAP 1000UNIT	135	VONVENDI INJ	91
VITAMIN B-2 TAB 25MG	137	VITAMIN E CAP 100UNIT	135	VONVENDI INJ 1300UNIT	91
VITAMIN B-2 TAB 50MG	137	VITAMIN E CAP 180 MG	135	VOQUEZNA 500-20MG DUAL THERAPY PACK (112)	87
VITAMIN B-6 TAB 100 MG	137	VITAMIN E CAP 180 MG (400 UNIT)	135	VOQUEZNA 500-500-20MG TRIPLE THERAPY PACK (112)	87
VITAMIN B-6 TAB 100MG	137	VITAMIN E CAP 180MG	135	VORANIGO 10MG TAB	49
VITAMIN B-6 TAB 50MG	137	VITAMIN E CAP 200UNIT	135	VORANIGO 40MG TAB	49
VITAMIN C TAB 250MG	137	VITAMIN E CAP 400	135	<i>voriconazole 200mg inj</i>	36
VITAMIN C CHEW 500MG	137	UNIT		<i>voriconazole 200mg tab</i>	36
VITAMIN C CHEW TAB 250MG	137	VITAMIN E CAP 400UNIT	135	<i>voriconazole 40mg/ml oral susp</i>	36
VITAMIN C CHEW TAB 500MG	137	VITAMIN E CAP 45MG	135	<i>voriconazole 50mg tab</i>	36
VITAMIN C CHW 500MG	137	VITAMIN E DROPS 15UNIT/0.3ML	135	VORTEX HOLDING	103
VITAMIN C LIQUID 500MG/5ML	137	VITAMIN E OIL 100UNIT	135	CHAMBER PEDIATRIC	
VITAMIN C LOZ 60MG	137	VITAMIN E/DL-ALPHA CAP 400UNIT	135	VORTEX VALVED MISC CHAMBER	103
VITAMIN C POW	137	VITAMIN K1 INJ 10MG/ML	135	VOSEVI 400-100-100MG TAB	59
VITAMIN C TAB 111		VITAMIN TAB B-COMPLEX	111	VOWST 30000000UNIT CAP	110
VITAMIN C TAB 1000MG	137	VITAMINS WITH LIPOTROPICS TAB	117	VOYXACT INJ 400/2ML	88
VITAMIN C TAB 250MG	137	VITA-RESPA TAB	82	VRAYLAR 0.5MG CAP	53
VITAMIN C TAB 500MG	137	VITC/ROSE HP TAB/BIOFLAV	111	VRAYLAR 0.75MG CAP	53
VITAMIN C TR CAP 500MG	137	VITRAKVI 100MG CAP	49	VRAYLAR 1.5MG CAP	53
VITAMIN C TR TAB 500MG	137	VITRAKVI 20MG/ML ORAL SOLN	49	VRAYLAR 3MG CAP	53
VITAMIN C/ROSE HIPS TAB 1000MG	137	VITRAKVI 25MG CAP	49	VRAYLAR 4.5MG CAP	53
VITAMIN C/ROSE HIPS TR TAB 100MG	137	VIVAGUARD INO TEST STRIP	81	VRAYLAR 6MG CAP	53
VITAMIN C/ROSE TAB 1000MG	137	VIVAGUARD LANCETS 30G	102	<i>vylibra tab 28-day pack</i>	122
VITAMIN D CAP 1.25MG	135	VIVAGUARD LANCING DEVICE	102	W	
		VIVAGUARD TEST STRIPS	81	<i>warfarin sodium 10mg tab</i>	23
				<i>warfarin sodium 1mg tab</i>	23
				<i>warfarin sodium 2.5mg tab</i>	23
				<i>warfarin sodium 2mg tab</i>	23
				<i>warfarin sodium 3mg tab</i>	23
				<i>warfarin sodium 4mg tab</i>	23

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

warfarin sodium 5mg tab	24	WINREVAIR 60MG INJ	131	XEMBIFY INJ	127
warfarin sodium 6mg tab	24	(2 VIAL PACK)		2GM/10ML	
warfarin sodium 7.5mg tab	24	wixela 100-50mcg	131	XEMBIFY INJ	127
WART REMOVER	76	powder inhaler		4GM/20ML	
LIQUID 17%		wixela 250-50mcg	131	XERMELO 250MG TAB	86
WAVESENSE PRESTO	81	powder inhaler		XIFAXAN 200MG TAB	20
TEST STRIPS		wixela 500-50mcg/act	131	XIFAXAN 550MG TAB	20
WEE CARE SUSP	95	powder inhaler		XIIDRA 5% OPHTH	126
WEGOVY 0.25MG/0.5ML	65	WOMENS DAILY TAB	114	SOLN	
AUTO-INJECTOR		FORMULA		XOFLUZA 40MG TAB	60
WEGOVY 0.5MG/0.5ML	65	X		XOFLUZA 80MG TAB	60
AUTO-INJECTOR		XALKORI 150MG ORAL	49	XOLAIR 150MG INJ	61
WEGOVY 1.5MG TAB	65	PELLET		XOLAIR 150MG/ML	61
WEGOVY 1.7MG/0.75ML	65	XALKORI 200MG CAP	49	AUTO-INJECTOR	
AUTO-INJECTOR		XALKORI 20MG ORAL	49	XOLAIR 150MG/ML	61
WEGOVY 1MG/0.5ML	65	PELLET		SYRINGE	
AUTO-INJECTOR		XALKORI 250MG CAP	49	XOLAIR 300MG/2ML	61
WEGOVY 2.4MG/0.75ML	65	XALKORI 50MG ORAL	49	AUTO-INJECTOR	
AUTO-INJECTOR		PELLET		XOLAIR 300MG/2ML	62
WEGOVY 25MG TAB	65	XARELTO 10MG TAB	24	SYRINGE	
WEGOVY 4MG TAB	65	XARELTO 15MG TAB	24	XOLAIR 75MG/0.5ML	62
WEGOVY 9MG TAB	65	XARELTO 20MG TAB	24	AUTO-INJECTOR	
WELIREG 40MG TAB	50	XATMEP 2.5MG/ML	43	XOLAIR 75MG/0.5ML	62
WESCAPS	111	ORAL SOLN		SYRINGE	
WES-PHOS 250	108	XCOPRI 100MG TAB	27	XOSPATA 40MG TAB	49
NEUTRAL TAB		XCOPRI 150MG TAB	27	XPOVIO TAB 100MG	50
WESTAB MAX TAB	82	XCOPRI 200MG TAB	27	ONCE WEEKLY CARTON	
2.5-25-2		XCOPRI 25MG TAB	27	(8)	
WESTAB ONE TAB	94	XCOPRI 50MG TAB	27	XPOVIO TAB 40MG	50
2.5-25-1		XCOPRI TAB 100/150MG	27	ONCE WEEKLY CARTON	
WESTAB PLUS TAB	117	MAINTENANCE PACK		(16)	
27-1MG		(56)		XPOVIO TAB 40MG	50
WESTGEL DHA CAP	117	XCOPRI TAB 12.5/25MG	27	TWICE WEEKLY	
WESTUSSIN DM LIQ	71	TITRATION PACK (28)		CARTON (8)	
7.5-2-15		XCOPRI TAB 150/200MG	27	XPOVIO TAB 60MG	50
WESTUSSIN DM SYP	71	PACK (56)		ONCE WEEKLY CARTON	
5-10-1MG/5 ML		XCOPRI TAB 150/200MG	27	(4)	
WILATE INJ	91	TITRATION PACK (28)		XPOVIO TAB 60MG	50
WINREVAIR 45MG INJ	131	XCOPRI TAB 50/100MG	27	TWICE WEEKLY	
WINREVAIR 45MG INJ	131	TITRATION PACK (28)		CARTON (24)	
(2 VIAL PACK)		XDEMVEY 0.25% OPHTH	125	XPOVIO TAB 80MG	50
WINREVAIR 60MG INJ	131	SOLN		ONCE WEEKLY CARTON	
		XEMBIFY INJ 10G/50ML	127	(4)	
		XEMBIFY INJ 1GM/5ML	127		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

XPOVIO TAB 80MG ONCE WEEKLY CARTON (8)	50	ZEJULA 200MG TAB	49	ZINC CHELATE TAB	109
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32)	50	ZEJULA 300MG TAB	49	50MG	
XTANDI 40MG CAP	44	ZELBORAF 240MG TAB	50	ZINC CHELATED TAB	109
XTANDI 40MG TAB	45	<i>zenatane 10mg cap</i>	73	50MG	
XTANDI 80MG TAB	45	<i>zenatane 20mg cap</i>	73	ZINC GLUCON TAB	109
XTRENBO	82	<i>zenatane 30mg cap</i>	73	30MG	
120MG/1.7ML INJ		<i>zenatane 40mg cap</i>	73	ZINC GLUCONATE TAB	109
<i>xulane 150-35mcg/24hr</i>	122	ZENBEXUS 0.75MG CAP	45	100MG	
<i>patch</i>		ZENBEXUS 1MG CAP	45	ZINC LOZ 10MG	109
XYNTHA INJ	91	ZENPEP	110	ZINC LOZENGE	114
XYNTHA SOLOFUSE INJ	91	105000-25000-79000UNI		ZINC OXIDE CREAM	78
Y		T DR CAP		22%	
YELETS TEEN TAB	114	ZENPEP	110	ZINC OXIDE OINT 10%	78
FORMULA		14000-3000-10000UNIT		ZINC OXIDE OINT 20%	78
YESINTEK 45MG/0.5ML	62	DR CAP		ZINC OXIDE OINT 25%	78
INJ		ZENPEP	110	ZINC SULFATE CAP	109
YESINTEK 45MG/0.5ML	62	24000-5000-17000UNIT		220MG	
SYRINGE		DR CAP		ZINC SULFATE TAB	109
YESINTEK 90MG/ML	62	ZENPEP	110	220MG	
SYRINGE		252600-60000-189600U		ZINC TAB 100MG	109
YF-VAX INJ	98	NIT DR CAP		ZINC TAB 30MG	109
<i>yulithira 10mg tab</i>	49	ZENPEP	110	ZINC TAB 50MG	109
<i>yulithira 2.5mg tab</i>	49	40000-126000-168000U		<i>ziprasidone 20mg cap</i>	53
<i>yulithira 5mg tab</i>	49	NIT DR CAP		<i>ziprasidone 20mg inj</i>	53
<i>yulithira 7.5mg tab</i>	49	ZENPEP	110	<i>ziprasidone 40mg cap</i>	53
YUPELRI SOLN	17	42000-10000-32000UNIT		<i>ziprasidone 60mg cap</i>	53
<i>yuvaferm 10mcg vaginal</i>	123	DR CAP		<i>ziprasidone 80mg cap</i>	53
<i>insert</i>		ZENPEP	110	ZOLINZA 100MG CAP	50
Z		63000-15000-47000UNIT		<i>zolmitriptan 2.5mg tab</i>	104
<i>zafemy 150-35mcg/24hr</i>	122	DR CAP		<i>zolmitriptan 5mg tab</i>	104
<i>patch</i>		ZENPEP	110	<i>zolpidem tartrate 10mg</i>	133
<i>zafirlukast 10mg tab</i>	130	84000-20000-63000UNIT		<i>tab</i>	
<i>zafirlukast 20mg tab</i>	130	DR CAP		<i>zolpidem tartrate 12.5mg</i>	133
<i>zaleplon 10mg cap</i>	133	ZEV RX TWIST LANCETS	102	<i>er tab</i>	
<i>zaleplon 5mg cap</i>	133	30G		<i>zolpidem tartrate 5mg tab</i>	133
ZAVZPRET 10MG/ACT	104	<i>zidovudine 100mg cap</i>	59	<i>zolpidem tartrate 6.25mg</i>	133
NASAL SPRAY		<i>zidovudine 10mg/ml oral</i>	59	<i>er tab</i>	
Z-BUM CREAM 22.5%	78	<i>soln</i>		ZONISADE 100MG/5ML	27
ZEJULA 100MG TAB	49	<i>zidovudine 300mg tab</i>	59	ORAL SUSP	
		ZINC CAP 220MG	109	<i>zonisamide 100mg cap</i>	27
		ZINC TAB 50MG	109	<i>zonisamide 25mg cap</i>	27
		ZINC 15 TAB	109	<i>zonisamide 50mg cap</i>	27
		ZINC CAP 220MG	109	<i>zovia 1/35 tab 28-day</i>	122
				<i>pack</i>	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALPHABETICAL LISTING OF DRUGS

ZTALMY 50MG/ML	27
ORAL SUSP	
ZURNAI 1.5MG/0.5ML	16
AUTO-INJECTOR	
ZURZUVAE 20MG CAP	28
ZURZUVAE 25MG CAP	28
ZURZUVAE 30MG CAP	28
ZYKADIA 150MG TAB	50
ZYMFENTRA 120MG/ML	62
PEN INJ	
ZYMFENTRA 120MG/ML	62
SYRINGE	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NOTICE OF AVAILABILITY

Community Health Choice Texas, Inc. is required by federal law to provide the following information.



NON-DISCRIMINATION STATEMENT

Community Health Choice Texas, Inc. complies with applicable Federal civil rights laws and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. Community Health Choice, Inc. provides free aids and services to people with disabilities to communicate effectively with us, such as:

- qualified sign language interpreters,
- written information in other formats (large print, audio, accessible electronic formats, other formats).

Community Health Choice Texas, Inc. provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact the Community Health Choice Texas, Inc. Member Service Care Center at 1.833.276.8306.

If you believe that Community Health Choice Texas, Inc. has failed to provide these services and you need help understanding your Medicare rights and how to exercise them, including around Medicare appeals, there is free information and assistance available. You can reach out to your local SHIP, 1.800.MEDICARE, and the Medicare Rights free national helpline at 1.800.333.4114.

If you believe that Community Health Choice Texas, Inc. has discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance:

Service Improvement Department

4888 Loop Central Drive
Ste. 600
Houston, Texas 77081

Phone: 1.833.276.8306

Fax: 713.295.7036

TTY: 711

Email:

ServiceImprovement@Community
HealthChoice.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, one of our Member Advocates will be available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F,
HHH Building Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at

<http://www.hhs.gov/ocr/office/file/index.html>.

NOTICE OF AVAILABILITY

Community Health Choice Texas, Inc. is required by federal law to provide the following information.



Arabic

نبيه: إذا كنت تتحدث العربية، تتوفر لك خدمات مساعدة لغوية مجانية. كما تتوفر مجاناً وسائل مساعدة وخدمات مناسبة لتقديم المعلومات 6038.672.338.1 بتتسيقات سهلة الوصول. اتصل على الرقم 117 أو تواصل مع مقدم الخدمة

Français (French)

ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir de l'information dans des formats accessibles sont également disponibles gratuitement. Composez le 1.833.276.8306 (ATS 711) ou parlez-en à votre fournisseur.

ગુજરાતી (Gujarati)

ધ્યાન આપો: જો તમે ગુજરાતી બોલો છો, તો તમારા માટે મફત ભાષા સહાય સેવાઓ ઉપલબ્ધ છે. સુલભ ફોર્મેટમાં માહિતી પૂરી પાડવા માટે યોગ્ય સહાયક સહાય અને સેવાઓ પણ મફતમાં ઉપલબ્ધ છે. 1.833.276.8306 (TTY 711) પર કોલ કરો અથવા તમારા પદાર્થ સાથે વાત કરો.

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 무료 언어 지원 서비스를 이용하실 수 있습니다. 또한, 접근 가능한 형식으로 정보를 제공하는 적절한 보조도구 및 서비스도 무료로 이용하실 수 있습니다. 1.833.276.8306(TTY 711)번으로 전화하시거나 담당 의료 서비스 제공자에게 문의하세요.

हिंदी (Hindi)

न दें: यदि आप हिंदी बोलते हैं, तो न:शु भाषा सहायता सेवाएँ उपलब्ध हैं। हमारे पास सुलभ प्रारूप में जानकारी प्रदान करने के लिए न:शु सहायक उपकरण और सेवाएँ भी उपलब्ध हैं। 1.833.276.8306 (TTY 711) पर कॉल करें या अपने प्रदाता से बात करें।

Español (Spanish)

ATENCIÓN: Si habla español, dispone de servicios gratuitos de asistencia lingüística. También disponemos de ayudas y servicios auxiliares gratuitos para proporcionar información en formatos accesibles. Llame al 1.833.276.8306 (TTY 711) o hable con su proveedor.

Русский (Russian)

ВНИМАНИЕ: Если вы говорите по-русски, мы предлагаем бесплатную языковую поддержку. Мы также предлагаем бесплатные вспомогательные средства и услуги для предоставления информации в доступных форматах. Позвоните по номеру 1.833.276.8306 (TTY 711) или обратитесь к своему оператору.

اردو (Urdu)

دھیان دیں: اگر آپ اردو بولتے ہیں تو مفت زبان کی مدد کی خدمات دستیاب ہیں۔ ہمارے پاس قابل رسائی فارمیٹس میں معلومات فراہم کرنے کے لیے مفت معاون امداد اور خدمات بھی دستیاب ہیں۔ (پر کال کریں یا اپنے فراہم کنندہ 1.833.276.8306 (TTY 711 سے بات کریں۔

English

ATTENTION: If you speak another language, free language assistance services are available. We also have free auxiliary aids and services available to provide information in accessible formats. Call 1.833.276.8306 (TTY 711) or speak to your provider.

中文 (Chinese)

注意：如果您讲中文，我们提供免费的语言协助服务。我们还提供免费的辅助工具和服务，以无障碍的格式提供信息。请致电 1.833.276.8306 (TTY 711) 或联系您的服务提供商。

Tiếng Việt (Vietnamese)

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi có dịch vụ hỗ trợ ngôn ngữ miễn phí. Chúng tôi cũng có các thiết bị hỗ trợ và dịch vụ miễn phí để cung cấp thông tin ở các định dạng dễ tiếp cận. Hãy gọi số 1.833.276.8306 (TTY 711) hoặc liên hệ với nhà cung cấp dịch vụ của bạn.

Tagalog (Tagalog)

PAUNAWA: Kung nagsasalita ka ng Tagalog, magagamit ang mga libreng serbisyo sa tulong sa wika. Mayroon din kaming mga libreng pantulong na tulong at serbisyong magagamit upang magbigay ng impormasyon sa mga na-access na format. Tumawag sa 1.833.276.8306 (TTY 711) o makipag-usap sa iyong provider.

Khonlav (Laotian)

kho khuang lavang thathan vaophasalav mi bolikan suanyheu danphasa fri phuak hao nyang mi kan suany heu lae kan bo li kan fri thi mi hai pheu hai kho mun nai hub aebb thi sa mad khao thoeng dai othha 18332768306 TTY 711 ru lomkab phuhaibolikan khongthan

Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen eine kostenlose Sprachunterstützung zur Verfügung. Wir bieten außerdem kostenlose Hilfsmittel und Dienste an, um Informationen in barrierefreien Formaten bereitzustellen. Rufen Sie 1.833.276.8306 (TTY 711) an oder wenden Sie sich an Ihren Anbieter.

本語 (Japanese)

ご注意：日本語を話される方は、無料の言語支援サービスをご利用いただけます。また、アクセシブルな形式で情報を提供するための無料の補助機器やサービスもご用意しております。1.833.276.8306 (TTY 711) までお電話いただくか、プロバイダーにお問い合わせください

فارسی (Persian)

کنید، خدمات کمک زبانی رایگا نتوجه: اگر به زبان فارسی صحبت می های کمکی رایگان و خدماتی برا یدر دسترس است. ما همچنین کمک دهیم. با شمار ههای قابل دسترس ارائه می ارائه اطلاعات در قالب (دهنده تماس بگیرد یا با ارائه 1.833.276.8306 (TTY 711) خدمات خود صحبت کنید.



Community DualCare Aligned (HMO D-SNP) Plan 005

2027 List of Covered Drugs (Drug List)

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION
ABOUT THE DRUGS WE COVER IN THIS PLAN**

HPMS Approved Formulary File Submission ID 27255, Version 7

This formulary was updated on **10/01/2026** For more recent information or other questions, please contact Community Health Choice Member Services, at 1-833-276-8306 or, for TTY users, 711, October 1 through March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 5:00 pm, or visit www.CommunityHealthChoice.org/Medicare.