

# Open Medication Guide

January 2025

Please consider talking to your doctor about prescribing one of the formulary medications that are indicated as covered under your plan; which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug formulary is regularly updated. Please visit [www.floridablue.com](http://www.floridablue.com) for the most up-to-date information.

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## Introduction

Florida Blue and Florida Blue HMO are pleased to present the Open Formulary Medication Guide. This is a general guide that includes an abbreviated listing of Brand and Generic medications that are covered under your plan. Since coverage for medication varies by the plan purchased by you or your employer, it's important that you refer to your plan documents for complete coverage details. When we refer to "plan documents" we are referring to one or more of the following: Benefit Booklet, Certificate of Coverage, Contract, Member Handbook or prescription drug endorsement.

The Open Formulary Medication Guide provides helpful tips on how to make the most of your pharmacy benefits and details about the various coverage programs that are designed to provide safe and appropriate medication when you need it. Changes in the formulary can occur over time and the most up-to-date listing can always be found by viewing the Medication Guide online at [www.floridablue.com](http://www.floridablue.com) or by calling the customer service number listed on your member ID card. For the hearing impaired, call Florida TTY Relay Service 711.

**Si de se a hablar sobre esta guía en español con uno de nuestros representantes, por favor llame al número de atención al cliente indicado en su tarjeta de asegurado y pida ser transferido a un representante bilingüe.**

NOTE: The decision concerning whether a prescription medication should be prescribed must be made by you and your physician. Any and all decisions that require or pertain to independent professional medical judgments or training, or the need for, and dosage of, a prescription medication, must be made solely by you and your treating physician in accordance with the patient/physician relationship.

## Key Tips and Coverage Guidelines

By following these simple guidelines, you will be assured that you are getting the maximum benefit from your plan.

- When you have your prescriptions filled, ask your pharmacist if a generic equivalent is available. Generic medications are usually less expensive, and most generics are covered unless specifically excluded under your plan documents.
- Select Brand Name medications are included in the formulary and are therefore available to you through your plan. The List includes all covered brand name medications unless specifically excluded under your plan documents.
- Take this Guide with you when you visit your doctor or health care provider so that he or she is aware of the drugs listed and cost impacts when you discuss medication options.

## Medication List

The Medication Guide includes the Preferred Medication List and some commonly prescribed Non-Preferred prescription medications. The Preferred Medication List reflects the current recommendations of Florida Blue and is developed in conjunction with Prime Therapeutics' National Pharmacy & Therapeutics Committee.

**NOTE:** This is not a complete listing of all covered prescriptions medications. Florida Blue reserves the right to modify (add, remove or change) the tier or apply limits of coverage to any prescription medication in this Medication Guide at any time.

For your out-of-pocket expenses to be as low as possible, please consider asking your doctor to prescribe generic medications, or if necessary, brand name medications that are included on the List. This will help ensure that your covered medications are allowed and reimbursed under your plan. In addition, consider using a participating pharmacy to obtain your covered medications because your out-of-pocket expenses should be lower than if you used a non-participating pharmacy.

To save the most money on medications, share this Medication Guide with your doctor or health care provider at each visit so he or she is aware of the drugs listed and cost impacts when you discuss medication options.

## Changes to the formulary

This guide includes the medication list which reflects the current recommendations of Florida Blue and is developed in conjunction with Prime Therapeutics' National Pharmacy & Therapeutics Committee. Florida Blue reserves the right to add or remove or change the tier of any medication in this Medication Guide at any time.

The medication list is reviewed quarterly to examine new medications and new information about medications that are already on the market concerning safety, effectiveness and current use in therapy.

There are varying reasons changes are made to the medications listed in the Medication Guide:

- The tier level of a medication included on the medication list may increase (change to a higher tier or non-covered) when an FDA-approved bioequivalent generic medication becomes available.
- Newly marketed prescription medications may not be covered until the Pharmacy & Therapeutics Committee has had an opportunity to review the medication, to determine whether the medication will be covered and if so, which tier will apply based on safety, efficacy, and the availability of other products within that class of medications. Go to [New To Market Drug List](#) for the most up-to-date information.

The most up to date information about modifications to the medications listed in this Medication Guide can be found by:

Going to [www.floridablue.com](http://www.floridablue.com)

- Click on the **Members** tab.
- Click on the **Login Now** button and either **Login** or **Register**.
- Once Logged in, click on **My Plan**, then select **Pharmacy** under Additional Items.
- Under Pharmacy Resources, click on **Medication Guide & Specialty Pharmacy**
- Under **Medication Guide/Approved Drug Lists**, click [Open Medication Guide](#) or [Open Medication Guide Updates](#)
- Medication Guides and Medication Guide updates are posted every January, April, July, and October.

## Your Share of Expenses

Your cost share will depend on which cost share tier the medication is assigned. You can determine your out-of-pocket amount for medication by reviewing your Schedule of Benefits. If your plan includes a Deductible, you may have to satisfy that amount before the costs of your medications are covered.

If you or your provider requests a covered brand name medication when there is a generic medication available; you will be responsible for: the difference in cost between the generic medication and the brand name medication; and the cost share applicable to brand name medication, as indicated on your Schedule of Benefits.

Example: If your drug copay is \$10 for generic and \$40 for brand, and you choose a brand name drug when a generic is available, here is what you might pay.

Difference in Drug Cost is \$70 (Brand Drug Cost \$120- Generic Drug Cost \$50) + Brand Co-Pay \$40=  
**\$110 is Your Total Cost**

## Pharmacy Benefits

The pharmacy benefit has three parts/components, called Tiers. This means that covered medications must be included in one of the following Tiers, unless specifically excluded by your plan:

**Tier 1:** Covered Generic Prescription Medications

**Tier 2:** Covered Preferred Brand Prescription Medications

**Tier 3:** Covered Non-Preferred Brand Prescription Medications or Medications not listed on the Preferred Medication List

**Specialty Medications:** Covered Specialty Medications as indicated in the Medication List. Your plan may include a separate cost share for Specialty Medications. Since coverage for medication varies by the plan purchases by you or your employer, it's important that you refer to your plan documents for complete coverage details.

Specialty Drugs are only covered when they're dispensed from a Specialty Pharmacy, up to a one-month supply. Certain Specialty Pharmacy products may vary from the one-month supply. These Specialty Drugs may be dispensed in lesser or greater quantities due to manufacturer package size or FDA-approved dosage requirements for a course of therapy. A list of medications covered under this benefit may be found at: [Specialty Drugs with Extended Day Supply](#).

**Condition Care Rx\* Value/HSA Preventive Prescription Medications:** Refer to the Condition Care Rx Program section of this Medication Guide for a description of the program

## Medications that are not covered

Your pharmacy benefit may not cover select medications. Some of the reasons a medication may not be covered are:

- The medication has been shown to have excessive adverse effects and/or safer alternatives.
- The medication has a preferred formulary alternative or over-the-counter (OTC) alternative.
- The medication is no longer marketed.
- The medication has a widely available/distributed AB rated generic equivalent formulation.
- The medication has not been approved by the FDA.
- The medication has been repackaged — a pharmaceutical product that is removed from the

original manufacturer container (Brand Originator) and repackaged by another manufacturer with a different NDC.

- The medication is not covered because of safety or effectiveness concerns.
- The medication is not covered for weight loss indication. See your Schedule of Benefit for additional details on coverage.

In addition to any drug not listed in the medication guide, a list of certain medication that are not covered may be found at [Medications Not Covered List](#).

**NOTE:** To determine the medication exclusions that apply to your plan, check your plan documents. Coverage details are also available to you by logging into the member section of [www.floridablue.com](http://www.floridablue.com).

## Condition Care Rx Program

The Condition Care Rx Program is designed to help manage the cost of medications used to treat certain chronic conditions and encourage medication adherence. If members have the Condition Care Rx Program as part of their benefits, they can purchase medications from the Condition Care Rx Program Value/Health Savings Account Preventive List at a reduced cost.

A list of medications that are part of the Condition Care Rx Value Program may be found at: [Condition Care Rx Program Value List](#).

A list of medications that are part of the Condition Care Rx Program for Health Savings Account (HSA) compatible plans may be found at: [Condition Care Rx Program HSA Preventive List](#).

**Note:** Check your plan documents to determine if the Condition Care Rx Program applies to your plan and the applicable cost share. Coverage details may also be available to you by logging into the member section of [www.floridablue.com](http://www.floridablue.com) or by calling the customer service number listed on your member ID card.

## Generic drugs

Florida Blue encourages the use of generic medications as a way to provide high-quality medications at a reduced cost. Generic medications are as safe and effective as their brand name counterparts and are usually considerably less expensive.

A Food and Drug Administration (FDA) approved generic medication may be substituted for its brand name counterpart because it:

- Contains the same active ingredient(s) as the brand name medication.
- Is identical in strength, dosage form, and route of administration.
- Is therapeutically equivalent and can be expected to have the same clinical effect and safety profile.

Check with your doctor or health care provider to determine if switching to a generic medication is appropriate for you.

## Oral Chemotherapy Drugs

Oral chemotherapy drugs are drugs prescribed by a physician to kill or slow the growth of cancerous cells in a manner consistent with the national accepted standards of practice. A list of these drugs can be found at: [Oral Chemotherapy Drug List](#).

## Over-the-Counter (OTC) medications

An over-the-counter medication can be an appropriate treatment for some conditions and may offer a lower cost alternative to some commonly prescribed medications. Your pharmacy benefit may provide coverage for select OTC medications. Some groups may customize their pharmacy plan to exclude coverage for OTC medications, so it is important to check your plan documents to determine if OTC medications are covered under your plan. Only those OTC medications prescribed by your physician and designated on the formulary with “OTC” in parenthesis following the medication name are eligible for coverage.

**NOTE:** Check your plan documents to determine if this benefit applies to your plan. Coverage details are also available to you logging into the member section of [www.floridablue.com](http://www.floridablue.com)

## Patient Protection Affordable Care Act (PPACA) Preventive Services

- Preventive medications - Certain preventive care services, medications, and immunizations are covered at no cost share when purchased at a participating pharmacy.

A list of medications covered under this benefit may be found at: [Preventive Medications List](#).

- Immunizations - Certain vaccines which are covered under your preventive benefit can be administered by pharmacists that are certified. Not all pharmacies provide services for vaccine administration. It is important to contact the pharmacy prior to your visit to ensure availability and administration of the vaccine.

A list of vaccines that are covered under your pharmacy benefits may be found at: [Pharmacy Benefit Vaccines List](#).

- Women's preventive services - Certain contraceptive medications or devices (e.g., oral contraceptives, emergency contraceptive, and diaphragms) are covered at no cost share when purchased at a participating pharmacy.

A list of medications and devices covered under this benefit may be found at: [Women's Preventive Services List](#).

## Tier Exception Requests for Contraceptives & HIV Pre-Exposure Prophylaxis (PrEP)

If, for medical reasons, you need a contraceptive or HIV PrEP medication that is not included on these Preventive Service list(s), you may request an exception to waive the otherwise applicable cost sharing for your medication. To request an exception, your doctor must complete and submit request online at [covermymeds.com](http://covermymeds.com) or by fax using the Exception Request Forms in links below.

[Contraceptives Tier Exception Request Form](#)

[HIV PrEP Tier Exception Request Form](#)

## Specialty Pharmacy medications

Specialty Pharmacy medications are high-cost injectable, infused, oral or inhaled medications that generally require close supervision and monitoring of the patient's therapy.

**NOTE:** Check your plan documents for information on how Specialty Pharmacy medications are covered on your plan. Coverage details are also available by calling the customer service number listed on your member ID card.

Specialty Medications are divided into two categories:

- Self-Administered Specialty Medication – Patients administer these Specialty Pharmacy medications themselves. Because these medications are intended to be self-administered, these medications may not be covered if administered in a physician's office. If these medications are not obtained from a participating Specialty Pharmacy, out-of-network cost shares will apply (where out-of-network coverage is available). [A current listing of Self-Administered Specialty Medications can be found here.](#)
  - Self-administered injectable medications are designated in the Medication List with "inj" following the medication name (e.g., enoxaparin inj). No other Self-administered injectables will be covered unless such injectable is identified as a Specialty Drug in this Medication Guide. Self-administered injectables will be subject to the Brand or Generic cost share, as described in your Schedule of Benefits. Florida Blue reserves the right to change the Self-administered injectables covered through your plan at any time and for any reason.
- Provider-Administered Specialty Medications – These medications require the administration to be performed by a physician. The Specialty Pharmacy medications are ordered by a provider and administered in an office or outpatient setting. Provider-administered Specialty Pharmacy medications are covered under your *medical* benefit. [A current listing of Provider- Administered Specialty Medications can be found here.](#)

**NOTE:** We have noted medications that may be covered as either Self-Administered and/or Provider-Administered. Specialty Pharmacy products can be obtained as a pharmacy or medication benefit. Please check your handbook for details.

## Pharmacy Options

There are two different types of pharmacies for you to be aware of as you decide where to get your prescriptions filled – retail pharmacies and specialty pharmacies. To save the most money, before you get a prescription filled, you should confirm which pharmacy is considered ‘in-network’ for that particular medication.

### Participating Pharmacy

- Retail Pharmacy Network – Non-Specialty ‘Generic’ medications and ‘Brand Name’ medications listed in the Medication Guide can be filled at these pharmacies at a lower cost to you than other pharmacies in your area. If you go to a non- participating pharmacy, your prescription will cost you more.
- Specialty Pharmacy Network – We have identified certain drugs as specialty drugs due to requirements such as special handling, storage, training, distribution, and management of the therapy. These drugs are listed as a ‘Specialty Drug’ in this Medication Guide. To be covered under your pharmacy program at the in-network cost share, they must be purchased at a preferred Specialty Pharmacy. These pharmacies are **different** than the retail pharmacies and are identified in both the Provider Directory and this Medication Guide. Using an in-network Specialty Pharmacy to provide these Specialty Drugs lowers the amount you pay for these medications.
  - Limited Distribution (LD) Pharmacy – Drug manufacturers will choose one or a limited number of specialty pharmacies to handle and dispense certain specialty drugs. Typically, these drugs are costly and require special monitoring and prior authorization (pre-approval). The pharmacy that dispenses your limited distribution drug can be found here: [Limited Distribution Drugs](#)

### Non-Participating Pharmacy

- If your plan offers out-of-network pharmacy coverage, choosing a non-participating pharmacy will cost you more money. You may have to pay the full cost of the medication and then file a claim for benefit determination. Our payment will be based on our Non-Participating Pharmacy Allowance minus your cost share. You will be responsible for your cost share and the difference between our Allowance and the cost of the medication.
- If your plan doesn’t offer out-of-network pharmacy coverage, choosing a non-participating pharmacy may risk your ability to be reimbursed. You may have to pay the full cost of the medication.

## Participating Specialty Pharmacy Provider

If you are currently taking a Specialty Pharmacy medication, then your network for Specialty Pharmacies is limited to the following participating Specialty Pharmacy providers. Unless indicated below, any other pharmacy is considered a non-participating Specialty Pharmacy even if it participates in Florida Blue's networks for non-Specialty Pharmacy medications. You may pay more out of pocket if you use a different specialty pharmacy.

### CVS/Caremark Specialty Pharmacy Services

Provider-Administered and Self-Administered Products;  
excludes hemophilia  
Phone: (866) 278-5108  
Fax: (800) 323-2445

[CVS/Caremark Specialty Pharmacy](#)

### Accredo

Self-Administered Products (excluding Hemophilia)  
Phone: (888) 425-5970  
Fax: (888) 302-1028

[Accredo](#)

### CVS/Caremark Hemophilia Services

Hemophilia Products  
Phone: (866) 792-2731  
Fax: (866) 811-7450  
(Mon-Fri., 9:00 a.m. to 7:30 p.m. EST)

[CVS/Caremark Hemophilia Specialty Pharmacy](#)

### Genoa Healthcare

Provider-Administered Mental Health Products

[Genoa](#)

## Note: Specialty Pharmacy medications are not covered when purchased through the Mail Order Pharmacy.

Self-administered specialty medications as classified by Florida Blue outside of the state of Florida may be obtained by a member with a written prescription through the preferred specialty pharmacy providers [Accredo](#) or [CVS/Caremark Specialty Pharmacy](#).

If a member resides or is traveling outside the state of Florida and needs to receive a provider-administered specialty medication, the prescribing physician should coordinate with the participating specialty pharmacy provider for their area or contact the local BlueCross and BlueShield Plan. This coordination can help ensure members receive their medications at the in-network cost share.

Members that receive a written prescription directly from their provider for a provider-administered specialty medication should contact customer service for further assistance.

## Home Delivery Pharmacy

Most plans home delivery pharmacy is serviced by [Amazon Pharmacy](#). To confirm your home delivery pharmacy provider, log into [floridablue.com](#) and view the home delivery section in your member account for additional details.

**NOTE:** If the original prescription was filled at a pharmacy other than the home delivery pharmacy, a new, original three-month supply prescription with a quantity of up to a three-month supply and not less than a two-month supply will be required. Prescriptions may not be transferred from a retail pharmacy to the home delivery pharmacy.

## Three-month supply at Retail Pharmacy

In addition to being able to obtain up to a three-month supply of medication through our home delivery pharmacy, you may be able to receive up to a three-month supply of your medication through a participating retail pharmacy. Please refer to your Benefit Booklet, Certificate of Coverage, Contract, Member Handbook or prescription drug endorsement for complete coverage details.

## Utilization Management Programs

### Prior Authorization Program

The Prior Authorization Program encourages the appropriate, safe and cost-effective use of medication. If you are currently taking or are prescribed a medication that is included in the Prior Authorization Program, your physician will need to submit a request form in order for your prescription to be considered for coverage. If you do not request and/or receive prior approval, the medication will not be covered. A current listing of drugs requiring prior authorization are indicated in the prior authorization column following the product name in the medication list.

Florida Blue reserves the right to change the medications that require Prior Authorization at any time and for any reason.

**NOTE:** Some groups may customize their pharmacy plan to exclude prior authorization requirements, so it is important to check your plan documents to determine if prior authorization requirements apply to your plan. Coverage details are also available to you by logging into the member section of [www.floridablue.com](http://www.floridablue.com).

**NOTE:** Prior Authorizations expire on the earlier of, but not to exceed 12 months for most medications:

- The termination date of your policy or
- The period authorized by us, as indicated in the letter you received from us.

### Obtaining Prior Authorization

Information about **Prior Authorization** and forms for how to obtain a prior authorization approval can be found here: [Prior Authorization Program Information and Forms](#)

**NOTE:** Your provider is required to complete and submit the Prior Authorization form in order for a coverage determination to be made.

1. Once a decision is made, you and/or your doctor will be informed of the decision.
2. If the decision is made to authorize coverage, the medication(s) and/or supplies may be obtained from a participating pharmacy or at the appropriate location if the medication(s) will be administered by a health professional. Prior authorization approval does not waive your cost share.
3. If a decision is made to deny authorization, you are free to purchase the prescription medication, supplies or over-the-counter (OTC) medication, but you will have to pay the full cost of the medication and will not be entitled to reimbursement under your plan.

**NOTE:** You have the right to request an appeal if coverage authorization is denied. Please refer to the “How to Appeal an Adverse Benefit Determination” subsection of the Claims Processing or Appeal and Grievance Process section in your current plan documents for information on how to file an appeal.

## Responsible Quantity Program

The Responsible Quantity Program encourages the appropriate, safe and cost-effective use of medication by setting a maximum quantity per month for a medication or supply. The quantity limitations are based on the Food and Drug Administration guidelines and the manufacturer's dosing recommendations. Medications that are subject to this program are indicated in the quantity limits column following the product name in the medication list.

Florida Blue reserves the right to change the Drugs and the quantity limits subject to the Responsible Quantity Program at any time and for any reason. In cases where a larger quantity of a Responsible Quantity Drug is medically required, your doctor or health care provider can request an override.

Information about the Responsible Quantity Program and steps for how to obtain an exception can be found here:

[Responsible Quantity Program Information](#)

[Responsible Quantity Authorization Form](#)

## Responsible Steps Program

The Responsible Steps Program promotes the appropriate, safe, and effective use of medications and helps you save on prescriptions. Responsible Steps is based on nationally recognized therapeutic guidelines, clinical evidence, and research. Prescription medications included in the Responsible Steps Program are not covered unless you have tried one or more covered alternative medications first.

A list of current drugs included in the Responsible Steps Program may be found

here: [Responsible Steps Program Information and Authorization Forms](#)

## Responsible Steps Program for Medical Pharmacy

Certain physician-administered prescription drugs which are rendered in a physician's office may be included in the Responsible Steps for Medical Pharmacy Program. If you are taking a medication in the Responsible Steps Program, please contact your physician/provider to discuss what medication options are best for you.

If, due to medical reasons, you cannot use the prerequisite drug and require the Responsible Steps Medication, your doctor or health care provider may request prior authorization for an override. If the override request is approved, coverage will be provided for the Responsible Steps Medication. Florida Blue reserves the right to change the drugs subject to the Responsible Steps Program at any time and for any reason.

A list of current drugs included in the Responsible Steps Program for Medical Pharmacy may be found here:

[Responsible Steps Program for Medical Pharmacy Information and Authorization Forms](#)

**NOTE:** Check your plan documents to determine if Responsible Steps requirements apply to your plan. Coverage details are also available to you by logging into the member section of [www.floridablue.com](http://www.floridablue.com) or by calling the customer service number listed on your ID card.

## Coverage Protocol Exemption

Your doctor may want to prescribe a medication for a condition that is different from the step-therapy protocol developed by Florida Blue. If this is the case, either you or your doctor can request an exemption by submitting a [Coverage Protocol Exemption Request](#).

## Notice

This Medication Guide shall not extend, vary, alter, replace, or waive any of the provisions, benefits, exclusions, limitations, or conditions contained in your plan documents. In the event of any inconsistencies between the Medication Guide and the provisions contained in your plan documents, the provisions contained in your plan documents shall control to the extent necessary to effectuate the intent of Blue Cross and Blue Shield of Florida and Health Options, Inc.

## How to use this Drug list

### Column 1: Drug Name

The drug list is organized into broad categories (e.g., HORMONES, DIABETES AND RELATED DRUGS). Please use the drug search function (Ctrl+F) to find current information for drugs on the drug list. Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand. Brand prescription drugs are shown in capital letters followed by the generic name. The Requirements/Limits column displays information about whether that drug requires prior authorization, responsible step, limited distribution, or quantity limits. Below are the meanings of the indicators used in the Drug Tier and Requirements/Limits columns.

### Column 2: Drug Tier

Indicates the formulary tier level for each drug.

### Column 3: Specialty (SP)

Indicates this is a self-administered specialty drug.

Note: Additional information about specialty drugs can be found in this document under Specialty Pharmacy medications, Self-Administered.

### Column 4: Requirements/Limits

- **Prior Authorization (PA)**- Some drugs require prior authorization to ensure appropriate use and prescribing before a drug will be covered. Coverage may be approved after certain criteria are met. Approval is required for claims to process at network pharmacies. If the PA indicator is present, then the PA program noted is possibly applied to your benefit.
- **Responsible Steps (ST)**- Requires members to try another drug that may be more safe, clinically effective and, in some cases, less expensive, before a more expensive drug will be approved. If the ST indicator is present, then the ST program noted is possibly applied to your benefit.
- **Limited Distribution (LD)**- Drug manufacturers will choose one or limited number of specialty pharmacies to dispense drugs. Additional information about limited distribution drugs can be found in this document under Participating Pharmacy.
- **Quantity Limits (QL)**- Certain drugs have quantity limits to encourage safe and appropriate use. The quantity limit is the maximum quantity that can be dispensed over a given period of time. If the QL indicator is present, then the QL program noted is possibly applied to your benefit.

Some plans may have Utilization Management (UM) programs (e.g., PA, QL, and ST) on additional drugs beyond those noted in this document.

## Abbreviation key

**aer** ..... aerosol  
**cap** ..... capsules  
**chew** ..... chewable  
**conc** ..... concentrate  
**cr** ..... controlled release  
**dr** ..... delayed release  
**ec** ..... enteric coated  
**equiv** ..... equivalent  
**er** ..... extended release  
**gm** ..... gram  
**inhal** ..... inhaler  
**inj** ..... injection  
**liqd** ..... liquid  
**mg** ..... milligram  
**ml** ..... milliliter

**nebu** ..... nebulizer  
**odt** ..... orally disintegrating tabs  
**oint** ..... ointment  
**ophth** ..... ophthalmic  
**osm** ..... osmotic release  
**pack** ..... packets  
**powd** ..... powder  
**pttw** ..... twice-weekly patch  
**sl** ..... sublingual  
**soln** ..... solution  
**suppos** ..... suppositories  
**susp** ..... suspension  
**tab** ..... tablets  
**td** ..... transdermal  
**w/** ..... with

To determine if your drug is covered and/or find drug pricing, please login to Your Account on Florida Blue website at [www.floridablue.com](http://www.floridablue.com) . In Your Account choose My Plan, then Pharmacy Resources, and click on Compare Drug Prices.

# Section 1557 Notification: Discrimination is Against the Law

We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, sex, age, or disability. We do not exclude people or treat them differently because of race, color, national origin, sex, age, or disability.

We provide:

- Free auxiliary aids, reasonable modifications, and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (e.g., large print, audio, and accessible electronic formats)
- Free language assistance services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact:

- Health and vision coverage: 1-800-352-2583
- Dental, life, and disability coverage: 1-888-223-4892
- Federal Employee Program (FEP): 1-800-333-2227

If you believe that we have failed to provide these services or have discriminated in another way on the basis of race, color, national origin, sex, age, or disability, you can file a grievance with:

**Health and vision coverage (including FEP members):**

Section 1557 Coordinator  
4800 Deerwood Campus Parkway, DCC 1-7  
Jacksonville, FL 32246  
1-800-477-3736 x29070  
1-800-955-8770 (TTY)  
Fax: 1-904-301-1580  
[Section1557Coordinator@bcbsfl.com](mailto:Section1557Coordinator@bcbsfl.com)

**Dental, life, and disability coverage:**

Civil Rights Coordinator  
17500 Chenal Parkway  
Little Rock, AR 72223  
1-800-260-0331  
1-800-955-8770 (TTY)  
[civilrightscoordinator@flife.com](mailto:civilrightscoordinator@flife.com)

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Section 1557 Coordinator or Civil Rights Coordinator is 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  
1-800-537-7697 (TDD)  
Complaint forms are available at [www.hhs.gov/ocr/office/file/index.html](http://www.hhs.gov/ocr/office/file/index.html)

Visit [www.floridablue.com/disclaimer/ndnotice](http://www.floridablue.com/disclaimer/ndnotice) to view an electronic version of this notice.

**ATENCIÓN:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1- 800-352-2583 (TTY: 1-877-955-8773). FEP: Llame al 1-800-333-2227

**ATANSYON:** Si w pale Kreyòl ayisyen, ou ka resewva yon èd gratis nan lang pa w. Rele 1-800-352-2583 (pou moun ki pa tande byen: 1-800-955-8770). FEP: Rele 1-800-333-2227

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có dịch vụ trợ giúp ngôn ngữ miễn phí dành cho bạn. Hãy gọi số 1-800-352- 2583 (TTY: 1-800-955-8770). FEP: Gọi số 1-800-333-2227

**ATENÇÃO:** Se você fala português, utilize os serviços linguísticos gratuitos disponíveis. Ligue para 1-800- 352-2583 (TTY: 1-800-955-8770). FEP: Ligue para 1-800-333-2227

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-800-352-2583(TTY: 1-800-955- 8770)。FEP: 請致電1-800-333-2227

**ATTENTION:** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-352-2583 (ATS : 1-800-955-8770). FEP : Appelez le 1-800-333-2227

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-352-2583 (TTY: 1-800-955-8770). FEP: Tumawag sa 1-800-333-2227

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-352-2583 (телетайп: 1-800-955-8770). FEP: Звоните 1-800-333-2227

ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-352-2583 (رقم هاتف الصم والبكم: 1-800-955-8770). اتصل برقم 1-800-333-2227.

**ATTENZIONE:** Qualora fosse l'italiano la lingua parlata, sono disponibili dei servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-352-2583 (TTY: 1-800-955-8770). FEP: chiamare il numero 1-800-333- 2227

**ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: +1-800-352-2583 (TTY: +1-800-955-8770). FEP: Rufnummer +1-800-333-2227

주의: 한국어 사용을 원하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-352-2583 (TTY: 1-800-955-8770) 로 전화하십시오. FEP: 1-800-333-2227 로 연락하십시오.

**UWAGA:** Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-352-2583 (TTY: 1-800-955-8770). FEP: Zadzwoń pod numer 1-800-333-2227.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નન:શુલ્ક ભાષા સહાય સેવા તમારા માટે ઉપલબ્ધ છે.

ફોન કરો 1-800-352-2583 (TTY: 1-800-955-8770). FEP: ફોન કરો 1-800-333-2227

ประกาศ:ถ้าคุณพูดภาษาไทย คุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โดยติดต่อหมายเลขโทรศัพท์ **1-800-352-2583 (TTY: 1-800-955-8770)** หรือ **FEP** โทร **1-800-333-2227**

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-352-2583 (TTY: 1-800-955-8770) まで、お電話にてご連絡ください。FEP: 1-800-333-2227

توجه: اگر به زبان فارسی صحبت می کنید، تسهیلات زبانی رایگان در دسترس شما خواهد بود.  
با شماره 1-800-352-2583 (TTY: 1-800-955-8770) تماس بگیرید. FEP: با شماره 1-800-333-2227 تماس بگیرید.

Baa ákonínzin: Diné bizaad bee yáníłti'go, saad bee áká anáwo', t'áá jíík'eh, ná hóló. Kojj' hodíílnih 1-800- 352-2583 (TTY: 1-800-955-8770). FEP ígíí éí kojj' hodíílnih 1-800-333-2227.

Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>ANTI-INFECTIVE AGENTS</b>			
<b>PENICILLINS</b>			
AMOXICILLIN - amoxicillin (trihydrate) for susp 400 mg/5ml	3		
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg	3		
AMOXICILLIN - amoxicillin (trihydrate) chew tab 250 mg	2		
<b>amoxicillin (trihydrate) cap 250 mg, 500 mg</b>	1		
<b>amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</b>	1		
<b>amoxicillin (trihydrate) tab 500 mg, 875 mg</b>	1		
<b>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml</b>	1		
<b>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)</b>	1		
<b>amoxicillin &amp; k clavulanate tab 250-125 mg, 875-125 mg</b>	1		
<b>amoxicillin &amp; k clavulanate tab 500-125 mg (Augmentin)</b>	1		
AMOXICILLIN/CLAVULANATE P - amoxicillin & k clavulanate chew tab 400-57 mg	3		
AMOXICILLIN/CLAVULANATE P - amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	3		
<b>ampicillin cap 500 mg</b>	1		
AUGMENTIN - amoxicillin & k clavulanate tab 500-125 mg	3		
AUGMENTIN - amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	2		
AUGMENTIN ES-600 - amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	3		
<b>dicloxacillin sodium cap 250 mg, 500 mg</b>	1		
PENICILLIN V POTASSIUM - penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	2		
<b>penicillin v potassium tab 250 mg, 500 mg</b>	1		
<b>CEPHALOSPORINS</b>			
CEFACLOR - cefaclor cap 250 mg, 500 mg	3		
CEFACLOR - cefaclor for susp 250 mg/5ml	3		
CEFADROXIL - cefadroxil tab 1 gm	3		
<b>cefadroxil cap 500 mg</b>	1		
<b>cefadroxil for susp 250 mg/5ml, 500 mg/5ml</b>	1		
<b>cefdinir cap 300 mg</b>	1		
<b>cefdinir for susp 125 mg/5ml, 250 mg/5ml</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>cefixime cap 400 mg (Suprax)</b>	1		
<b>cefixime for susp 100 mg/5ml</b>	1		
<b>cefixime for susp 200 mg/5ml (Suprax)</b>	1		
<b>cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml</b>	1		
<b>cefpodoxime proxetil tab 100 mg, 200 mg</b>	1		
<b>cefprozil for susp 125 mg/5ml, 250 mg/5ml</b>	1		
<b>cefprozil tab 250 mg, 500 mg</b>	1		
<b>cefuroxime axetil tab 250 mg, 500 mg</b>	1		
<b>cephalexin cap 250 mg, 500 mg</b>	1		
<b>cephalexin for susp 125 mg/5ml, 250 mg/5ml</b>	1		
<b>cephalexin tab 250 mg, 500 mg</b>	1		
<b>MACROLIDES</b>			
<b>azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)</b>	1		
<b>azithromycin tab 250 mg, 500 mg (Zithromax)</b>	1		
<b>azithromycin tab 600 mg</b>	1		
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	3		
<b>clarithromycin tab er 24hr 500 mg</b>	1		
<b>clarithromycin tab 250 mg, 500 mg</b>	1		
DIFICID - fidaxomicin tab 200 mg	2		QL (40 tablets/180 days)
DIFICID - fidaxomicin for susp 40 mg/ml	2		QL (272 mls/180 days)
E.E.S. GRANULES - erythromycin ethylsuccinate for susp 200 mg/5ml	3		
E.E.S. 400 - erythromycin ethylsuccinate tab 400 mg	3		
ERYPED 200 - erythromycin ethylsuccinate for susp 200 mg/5ml	3		
ERYPED 400 - erythromycin ethylsuccinate for susp 400 mg/5ml	3		
ERYTHROMYCIN ETHYLSUCCINA - erythromycin ethylsuccinate tab 400 mg	3		
<b>erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)</b>	1		
<b>erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)</b>	1		
<b>erythromycin tab delayed release 250 mg, 333 mg, 500 mg</b>	1		
<b>erythromycin tab 250 mg, 500 mg</b>	1		
ZITHROMAX - azithromycin powd pack for susp 1 gm	2		
<b>TETRACYCLINES</b>			

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>demeclocycline hcl tab 150 mg, 300 mg</b>	1		
<b>doxycycline hyclate cap 50 mg</b>	1		
<b>doxycycline hyclate cap 100 mg (Vibramycin)</b>	1		
<b>doxycycline hyclate tab 20 mg, 100 mg</b>	1		
<b>doxycycline monohydrate cap 50 mg, 100 mg</b>	1		
<b>doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)</b>	1		
<b>doxycycline monohydrate tab 50 mg, 75 mg, 100 mg</b>	1		
<b>minocycline hcl cap 50 mg, 75 mg, 100 mg</b>	1		
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	3	SP	PA, LD, QL (30 tablets/180 days)
<b>tetracycline hcl cap 250 mg, 500 mg</b>	1		
<b>FLUOROQUINOLONES</b>			
BAXDELA - delafloxacin meglumine tab 450 mg (base equiv)	3		PA, QL (28 tablets/14 days)
CIPRO - ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	3		
CIPRO - ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	2		
<b>ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)</b>	1		
<b>ciprofloxacin hcl tab 750 mg (base equiv)</b>	1		
<b>levofloxacin oral soln 25 mg/ml</b>	1		
<b>levofloxacin tab 250 mg, 500 mg, 750 mg</b>	1		
<b>moxifloxacin hcl tab 400 mg (base equiv)</b>	1		
OFLOXACIN - ofloxacin tab 300 mg	3		
<b>ofloxacin tab 400 mg</b>	1		
<b>AMINOGLYCOSIDES</b>			
ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	3	SP	LD
BETHKIS - tobramycin nebu soln 300 mg/4ml	3	SP	LD
HUMATIN - paromomycin sulfate cap 250 mg	2		LD
KITABIS PAK - tobramycin nebu soln 300 mg/5ml	3	SP	LD
<b>neomycin sulfate tab 500 mg</b>	1		
TOBI PODHALER - tobramycin inhal cap 28 mg	2	SP	LD
TOBRAMYCIN - tobramycin nebu soln 300 mg/5ml	3	SP	
<b>tobramycin nebu soln 300 mg/5ml (Tobi)</b>	1	SP	
<b>tobramycin nebu soln 300 mg/4ml (Bethkis)</b>	1	SP	
<b>SULFONAMIDES</b>			
<b>sulfadiazine tab 500 mg</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>ANTIMYCOBACTERIAL AGENTS</b>			
<b>cycloserine cap 250 mg</b>	1		
<b>ethambutol hcl tab 100 mg</b>	1		
<b>ethambutol hcl tab 400 mg (Myambutol)</b>	1		
<b>isoniazid syrup 50 mg/5ml</b>	1		
<b>isoniazid tab 100 mg, 300 mg</b>	1		
PRETOMANID - pretomanid tab 200 mg	3		LD, QL (182 tablets/365 days)
PRIFTIN - rifapentine tab 150 mg	2		
<b>pyrazinamide tab 500 mg</b>	1		
<b>rifabutin cap 150 mg (Mycobutin)</b>	1		
<b>rifampin cap 150 mg, 300 mg</b>	1		
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv)	3	SP	LD, QL (940 tablets/365 days)
SIRTURO - bedaquiline fumarate tab 100 mg (base equiv)	3	SP	LD, QL (188 tablets/365 days)
TRECTOR - ethionamide tab 250 mg	3		
<b>ANTIFUNGALS</b>			
ANCOBON - flucytosine cap 250 mg, 500 mg	3		
CRESEMBA - isavuconazonium sulfate cap 74.5 mg, 186 mg	3		PA
DIFLUCAN - fluconazole for susp 40 mg/ml	3		
<b>fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)</b>	1		
<b>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)</b>	1		
<b>flucytosine cap 250 mg, 500 mg (Ancobon)</b>	1		
<b>griseofulvin microsize susp 125 mg/5ml</b>	1		
<b>griseofulvin microsize tab 500 mg</b>	1		
<b>griseofulvin ultramicrosize tab 125 mg, 250 mg</b>	1		
<b>itraconazole cap 100 mg (Sporanox)</b>	1		PA, QL (120 capsules/30 days)
<b>itraconazole oral soln 10 mg/ml (Sporanox)</b>	1		PA, QL (1200 mls/30 days)
<b>ketoconazole tab 200 mg</b>	1		
NOXAFIL - posaconazole tab delayed release 100 mg	3		PA
NOXAFIL - posaconazole susp 40 mg/ml	3		PA
NOXAFIL - posaconazole for delayed release susp packet 300 mg	2		PA
<b>nystatin tab 500000 unit</b>	1		
<b>posaconazole susp 40 mg/ml (Noxafil)</b>	1		PA
<b>posaconazole tab delayed release 100 mg (Noxafil)</b>	1		PA
SPORANOX - itraconazole cap 100 mg	3		PA, QL (120 capsules/30 days)
SPORANOX - itraconazole oral soln 10 mg/ml	3		PA, QL (1200 mls/30 days)
<b>terbinafine hcl tab 250 mg</b>	1		QL (30 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VFEND - voriconazole tab 50 mg	3		PA
VFEND - voriconazole for susp 40 mg/ml	3		PA
VIVJOA - oteseconazole cap therapy pack 150 mg (12 weeks)	3		PA, QL (18 capsules/180 days)
<b>voriconazole for susp 40 mg/ml (Vfend)</b>	1		PA
<b>voriconazole tab 50 mg, 200 mg (Vfend)</b>	1		PA
<b>ANTIVIRALS</b>			
<b>abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)</b>	1		QL (960 mls/30 days)
<b>abacavir sulfate tab 300 mg (base equiv) (Ziagen)</b>	1		QL (60 tablets/30 days)
<b>abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)</b>	1		QL (30 tablets/30 days)
<b>acyclovir cap 200 mg</b>	1		
<b>acyclovir susp 200 mg/5ml (Zovirax)</b>	1		
<b>acyclovir tab 400 mg, 800 mg</b>	1		
<b>adefovir dipivoxil tab 10 mg (Hepsera)</b>	1		QL (30 tablets/30 days)
APTIVUS - tipranavir cap 250 mg	2		QL (120 capsules/30 days)
<b>atazanavir sulfate cap 150 mg (base equiv)</b>	1		QL (30 capsules/30 days)
<b>atazanavir sulfate cap 200 mg (base equiv) (Reyataz)</b>	1		QL (60 capsules/30 days)
<b>atazanavir sulfate cap 300 mg (base equiv) (Reyataz)</b>	1		QL (30 capsules/30 days)
BARACLUDE - entecavir oral soln 0.05 mg/ml	2		QL (630 mls/30 days)
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	2		QL (30 tablets/30 days)
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	2		QL (30 tablets/30 days)
COMPLERA - emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	2		QL (30 tablets/30 days)
<b>darunavir tab 600 mg (Prezista)</b>	1		QL (60 tablets/30 days)
<b>darunavir tab 800 mg (Prezista)</b>	1		QL (30 tablets/30 days)
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	2		QL (30 tablets/30 days)
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	2		QL (30 tablets/30 days)
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	2		QL (30 tablets/30 days)
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	2		QL (30 tablets/30 days)
<b>efavirenz tab 600 mg (Sustiva)</b>	1		QL (30 tablets/30 days)
<b>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</b>	1		QL (30 tablets/30 days)
<b>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (Symfi lo)</b>	1		QL (30 tablets/30 days)

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<b>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)</b>	1		QL (30 tablets/30 days)
<b>emtricitabine caps 200 mg (Emtriva)</b>	1		QL (30 capsules/30 days)
<b>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada)</b>	1		QL (30 tablets/30 days)
EMTRIVA - emtricitabine caps 200 mg	3		QL (30 capsules/30 days)
EMTRIVA - emtricitabine soln 10 mg/ml	2		QL (680 mls/28 days)
<b>entecavir tab 0.5 mg, 1 mg (Baraclude)</b>	1		QL (30 tablets/30 days)
EPCLUSA - sofosbuvir-velpatasvir tab 200-50 mg	2	SP	PA, QL (30 tablets/30 days)
EPCLUSA - sofosbuvir-velpatasvir tab 400-100 mg	2	SP	PA, QL (28 tablets/28 days)
EPCLUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg	2	SP	PA, QL (30 packets/30 days)
EPCLUSA - sofosbuvir-velpatasvir pellet pack 200-50 mg	2	SP	PA, QL (60 packets/30 days)
EPIVIR - lamivudine oral soln 10 mg/ml	3		QL (960 mls/30 days)
EPIVIR - lamivudine tab 150 mg	3		QL (60 tablets/30 days)
EPIVIR - lamivudine tab 300 mg	3		QL (30 tablets/30 days)
<b>etravirine tab 100 mg, 200 mg (Intelence)</b>	1		QL (60 tablets/30 days)
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	2		QL (30 tablets/30 days)
<b>famciclovir tab 125 mg, 250 mg, 500 mg</b>	1		
<b>fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)</b>	1		QL (120 tablets/30 days)
FUZEON - enfuvirtide for inj 90 mg	2	SP	QL (60 vials/30 days)
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	2		QL (30 tablets/30 days)
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	2	SP	PA, QL (30 packets/30 days)
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	2	SP	PA, QL (30 tablets/30 days)
INTELENCE - etravirine tab 25 mg	2		QL (120 tablets/30 days)
INTELENCE - etravirine tab 100 mg, 200 mg	3		QL (60 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	2		QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	2		QL (60 packets/30 days)
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	2		QL (60 tablets/30 days)
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)	2		QL (60 tablets/30 days)

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JULUCA - dolutegravir sodium-riopivirine hcl tab 50-25 mg (base eq)	2		QL (30 tablets/30 days)
KALETRA - lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	3		QL (480 mls/30 days)
KALETRA - lopinavir-ritonavir tab 100-25 mg	3		QL (180 tablets/30 days)
KALETRA - lopinavir-ritonavir tab 200-50 mg	3		QL (120 tablets/30 days)
LAGEVRIO - molnupiravir cap 200 mg	3		QL (40 capsules/30 days)
<b>lamivudine oral soln 10 mg/ml (Epivir)</b>	1		QL (960 mls/30 days)
<b>lamivudine tab 100 mg (hbv) (Epivir hbv)</b>	1		QL (30 tablets/30 days)
<b>lamivudine tab 150 mg (Epivir)</b>	1		QL (60 tablets/30 days)
<b>lamivudine tab 300 mg (Epivir)</b>	1		QL (30 tablets/30 days)
<b>lamivudine-zidovudine tab 150-300 mg (Combivir)</b>	1		QL (60 tablets/30 days)
LEDIPASVIR/SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	2	SP	PA, QL (30 tablets/30 days)
LIVTENCITY - maribavir tab 200 mg	3	SP	PA, LD, QL (120 tablets/30 days)
<b>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) (Kaletra)</b>	1		QL (480 mls/30 days)
<b>lopinavir-ritonavir tab 100-25 mg (Kaletra)</b>	1		QL (180 tablets/30 days)
<b>lopinavir-ritonavir tab 200-50 mg (Kaletra)</b>	1		QL (120 tablets/30 days)
<b>maraviroc tab 150 mg (Selzentry)</b>	1		QL (60 tablets/30 days)
<b>maraviroc tab 300 mg (Selzentry)</b>	1		QL (120 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	2	SP	PA, QL (90 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	2	SP	PA, QL (150 packets/30 days)
NEVIRAPINE - nevirapine susp 50 mg/5ml	2		QL (1200 mls/30 days)
<b>nevirapine tab er 24hr 400 mg</b>	1		QL (30 tablets/30 days)
<b>nevirapine tab 200 mg</b>	1		QL (60 tablets/30 days)
NORVIR - ritonavir tab 100 mg	3		QL (360 tablets/30 days)
NORVIR - ritonavir powder packet 100 mg	2		QL (360 packets/30 days)
ODEFSEY - emtricitabine-riopivirine-tenofovir af tab 200-25-25 mg	2		QL (30 tablets/30 days)
<b>oseltamivir phosphate cap 30 mg (base equiv) (Tamiflu)</b>	1		QL (40 capsules/120 days)
<b>oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)</b>	1		QL (20 capsules/120 days)
<b>oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)</b>	1		QL (300 mls/120 days)
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	2		QL (20 tablets/30 days)
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	2		QL (30 tablets/30 days)

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PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	3	SP	PA
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	3	SP	PA
PIFELTRO - doravirine tab 100 mg	2		QL (30 tablets/30 days)
PREVYMIS - letermovir tab 240 mg, 480 mg	3		
PREZCOBIX - darunavir-cobicistat tab 800-150 mg	2		QL (30 tablets/30 days)
PREZISTA - darunavir oral susp 100 mg/ml	2		QL (400 mls/30 days)
PREZISTA - darunavir tab 75 mg	2		QL (300 tablets/30 days)
PREZISTA - darunavir tab 150 mg	2		QL (180 tablets/30 days)
PREZISTA - darunavir tab 600 mg	3		QL (60 tablets/30 days)
PREZISTA - darunavir tab 800 mg	3		QL (30 tablets/30 days)
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	3		QL (40 blisters/120 days)
RETROVIR - zidovudine cap 100 mg	3		QL (180 capsules/30 days)
RETROVIR - zidovudine syrup 10 mg/ml	3		QL (1920 mls/30 days)
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	2		QL (240 packets/30 days)
REYATAZ - atazanavir sulfate cap 200 mg (base equiv)	3		QL (60 capsules/30 days)
REYATAZ - atazanavir sulfate cap 300 mg (base equiv)	3		QL (30 capsules/30 days)
RIBAVIRIN - ribavirin cap 200 mg	2		
RIBAVIRIN - ribavirin tab 200 mg	2		
RIMANTADINE HYDROCHLORIDE - rimantadine hydrochloride tab 100 mg	3		
<b>ritonavir tab 100 mg (Norvir)</b>	1		QL (360 tablets/30 days)
RUKOBIA - fostemsavir tromethamine tab er 12hr 600 mg	2		QL (60 tablets/30 days)
SELZENTRY - maraviroc oral soln 20 mg/ml	2		QL (1840 mls/30 days)
SELZENTRY - maraviroc tab 150 mg	3		QL (60 tablets/30 days)
SELZENTRY - maraviroc tab 300 mg	3		QL (120 tablets/30 days)
SOFOSBUVIR/VELPATASVIR - sofosbuvir-velpatasvir tab 400-100 mg	2	SP	PA, QL (28 tablets/28 days)
SOVALDI - sofosbuvir tab 200 mg, 400 mg	2	SP	PA, QL (30 tablets/30 days)
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	2	SP	PA, QL (30 packets/30 days)
STRIBILD - elvitegrav-cobic-emtricitab-tenofovd tab 150-150-200-300 mg	2		QL (30 tablets/30 days)
SUNLENCA - lenacapavir sodium tab therapy pack 4 x 300 mg	2		LD, QL (4 tablets/365 days)
SUNLENCA - lenacapavir sodium tab therapy pack 5 x 300 mg	2		LD, QL (5 tablets/365 days)
SYMFI - efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	3		QL (30 tablets/30 days)

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SYMFI LO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	3		QL (30 tablets/30 days)
SYMTUZA - darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	2		QL (30 tablets/30 days)
TAMIFLU - oseltamivir phosphate for susp 6 mg/ml (base equiv)	3		QL (300 mls/120 days)
TAMIFLU - oseltamivir phosphate cap 30 mg (base equiv)	3		QL (40 capsules/120 days)
TAMIFLU - oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv)	3		QL (20 capsules/120 days)
<b>tenofovir disoproxil fumarate tab 300 mg (Viread)</b>	1		QL (30 tablets/30 days)
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)	2		QL (60 tablets/30 days)
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	2		QL (360 tablets/30 days)
TRIUMEQ - abacavir-dolutegravir-lamivudine tab 600-50-300 mg	2		QL (30 tablets/30 days)
TRIUMEQ PD - abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	2		QL (180 tablets/30 days)
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	3		QL (30 tablets/30 days)
TYBOST - cobicistat tab 150 mg	2		QL (30 tablets/30 days)
<b>valacyclovir hcl tab 500 mg, 1 gm (Valtrex)</b>	1		
<b>valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)</b>	1		
<b>valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)</b>	1		
VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	2		QL (30 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 250 mg	2		QL (270 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 625 mg	2		QL (120 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	2		QL (240 grams/30 days)
VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	2		QL (30 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate tab 300 mg	3		QL (30 tablets/30 days)
VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	2	SP	PA, QL (30 tablets/30 days)
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	3		QL (2 tablets/120 days)
ZIAGEN - abacavir sulfate soln 20 mg/ml (base equiv)	3		QL (960 mls/30 days)
<b>zidovudine cap 100 mg (Retrovir)</b>	1		QL (180 capsules/30 days)
<b>zidovudine syrup 10 mg/ml (Retrovir)</b>	1		QL (1920 mls/30 days)

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<b>zidovudine tab 300 mg</b>	1		QL (60 tablets/30 days)
<b>ANTIMALARIALS</b>			
ARAKODA - tafenoquine succinate tab 100 mg (base equivalent)	3		
<b>atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)</b>	1		
<b>chloroquine phosphate tab 250 mg, 500 mg</b>	1		
COARTEM - artemether-lumefantrine tab 20-120 mg	2		
DARAPRIM - pyrimethamine tab 25 mg	3	SP	PA, LD, QL (90 tablets/30 days)
<b>hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg</b>	1		
<b>hydroxychloroquine sulfate tab 200 mg (Plaquenil)</b>	1		
KRINTAFEL - tafenoquine succinate tab 150 mg (base equivalent)	3		
<b>mefloquine hcl tab 250 mg</b>	1		
PLAQUENIL - hydroxychloroquine sulfate tab 200 mg	3		
PRIMAQUINE PHOSPHATE - primaquine phosphate tab 26.3 mg (15 mg base)	3		
<b>primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)</b>	1		
<b>pyrimethamine tab 25 mg (Daraprim)</b>	1	SP	PA, QL (90 tablets/30 days)
QUALAQUIN - quinine sulfate cap 324 mg	3		QL (42 capsules/90 days)
<b>quinine sulfate cap 324 mg (Qualaquin)</b>	1		QL (42 capsules/90 days)
<b>ANTHELMINTICS</b>			
<b>albendazole tab 200 mg</b>	1		PA, QL (120 tablets/30 days)
BENZNIDAZOLE - benznidazole tab 12.5 mg, 100 mg	2		LD
BILTRICIDE - praziquantel tab 600 mg	3		
EGATEN - triclabendazole tab 250 mg	2	SP	PA
EMVERM - mebendazole chew tab 100 mg	3		PA, QL (180 tablets/30 days)
<b>ivermectin tab 3 mg (Stromectol)</b>	1		
<b>praziquantel tab 600 mg (Biltricide)</b>	1		
STROMECTOL - ivermectin tab 3 mg	3		
<b>ANTI-INFECTIVE AGENTS - MISC.</b>			
AEMCOLO - rifamycin sodium tab delayed release 194 mg (base equiv)	3		QL (12 tablets/180 days)
<b>atovaquone susp 750 mg/5ml (Mepron)</b>	1		
BACTRIM - sulfamethoxazole-trimethoprim tab 400-80 mg	3		
BACTRIM DS - sulfamethoxazole-trimethoprim tab 800-160 mg	3		

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CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)	2	SP	LD
CLEOCIN - clindamycin hcl cap 75 mg, 150 mg, 300 mg	3		
CLEOCIN PEDIATRIC GRANULE - clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	3		
<b>clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)</b>	1		
<b>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)</b>	1		
<b>colistimethate sod for inj 150 mg (colistin base activity) (Coly-mycin m)</b>	1		
COLY-MYCIN M - colistimethate sod for inj 150 mg (colistin base activity)	3		
<b>dapsone tab 25 mg, 100 mg</b>	1		
FIRVANQ - vancomycin hcl for oral soln 25 mg/ml (base equivalent)	3		
FIRVANQ - vancomycin hcl for oral soln 50 mg/ml (base equivalent)	3		QL (1200 mls/30 days)
<b>fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)</b>	1		
HIPREX - methenamine hippurate tab 1 gm	3		
IMPAVIDO - miltefosine cap 50 mg	2	SP	PA
LAMPIT - nifurtimox tab 30 mg	3		LD, QL (540 tablets/180 days)
LAMPIT - nifurtimox tab 120 mg	3		LD, QL (450 tablets/180 days)
<b>linezolid for susp 100 mg/5ml (Zyvox)</b>	1		
<b>linezolid tab 600 mg (Zyvox)</b>	1		
MACROBID - nitrofurantoin monohydrate macrocrystalline cap 100 mg	3		
MACRODANTIN - nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg	3		
MEPRON - atovaquone susp 750 mg/5ml	3		
<b>methenamine hippurate tab 1 gm (Hiprex)</b>	1		
<b>metronidazole tab 250 mg, 500 mg</b>	1		
NEBUPENT - pentamidine isethionate for nebulization soln 300 mg	3		
NITAZOXANIDE - nitazoxanide tab 500 mg	2		QL (12 tablets/90 days)
<b>nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)</b>	1		
<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)</b>	1		
<b>nitrofurantoin susp 25 mg/5ml</b>	1		
<b>pentamidine isethionate for nebulization soln 300 mg (Nebupent)</b>	1		

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SIVEXTRO - tedizolid phosphate tab 200 mg	2		PA, QL (6 tablets/30 days)
<b>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</b>	1		
<b>sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)</b>	1		
<b>sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)</b>	1		
<b>tinidazole tab 250 mg, 500 mg</b>	1		
TRIMETHOPRIM - trimethoprim tab 100 mg	3		
<b>trimethoprim tab 100 mg (Trimethoprim)</b>	1		
VANCOGIN - vancomycin hcl cap 125 mg (base equivalent)	3		QL (480 capsules/30 days)
VANCOGIN - vancomycin hcl cap 250 mg (base equivalent)	3		QL (240 capsules/30 days)
<b>vancomycin hcl cap 125 mg (base equivalent) (Vancocin)</b>	1		QL (480 capsules/30 days)
<b>vancomycin hcl cap 250 mg (base equivalent) (Vancocin)</b>	1		QL (240 capsules/30 days)
<b>vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq)</b>	1		
<b>vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Firvanq)</b>	1		QL (1200 mls/30 days)
XIFAXAN - rifaximin tab 200 mg	3		PA, QL (9 tablets/180 days)
XIFAXAN - rifaximin tab 550 mg	2		PA, QL (90 tablets/30 days)
<b>BIOLOGICALS</b>			
<b>VACCINES</b>			
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	3		
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	3		
AFLURIA 2024-2025 - influenza virus vaccine split im susp	3		QL (1 vaccine/90 days)
AFLURIA 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	3		QL (1 vaccine/90 days)
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	3		
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	3		
CAPVAXIVE - pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	3		QL (1 vaccine/90 days)
COMIRNATY 2024-25 - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	3		

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ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	3		
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	3		
FLUAD 2024-2025 - influenza vac type a&b surface ant adj susp pref syr 0.5 ml	3		QL (1 vaccine/90 days)
FLUARIX 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	3		QL (1 vaccine/90 days)
FLUBLOK 2024-2025 - influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	3		QL (1 vaccine/90 days)
FLUCELVAX 2024-2025 - influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	3		QL (1 vaccine/90 days)
FLUCELVAX 2024-2025 - influenza virus vac tiss-cult subunit im susp	3		QL (1 vaccine/90 days)
FLULAVAL 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	3		QL (1 vaccine/90 days)
FLUMIST NASAL VACCINE 202 - influenza virus vaccine live intranasal liquid	3		QL (1 vaccine/90 days)
FLUZONE HIGH-DOSE 2024-20 - influenza virus vac split high-dose pf susp pref syr 0.5ml	3		QL (1 vaccine/90 days)
FLUZONE 2024-2025 - influenza virus vaccine split im susp	3		QL (1 vaccine/90 days)
FLUZONE 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	3		QL (1 vaccine/90 days)
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr	3		
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp	3		
HAVRIX - hepatitis a vaccine inj susp 720 el unit/0.5ml, 1440 el unit/ml	3		
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	3		
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	3		
IPOLO INACTIVATED IPV - poliovirus vaccine, ipv injection	3		
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	3		
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	3		
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	3		
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	3		

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MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	3		
MODERNA COVID-19 VACCINE - covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	3		
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	3		
NOVAVAX COVID-19 VACCINE/ - covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	3		
PEDVAX HIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	3		
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	3		
PFIZER-BIONTECH COVID-19 - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	3		
PFIZER-BIONTECH COVID-19 - covid-19 mrna vac tris-s 6mo-4y-pfizer im susp 3 mcg/0.3ml	3		
PNEUMOVAX 23 - pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	3		QL (1 vaccine/90 days)
PREHEVBRIO - hepatitis b vaccine 3-antigen (recombinant) susp 10 mcg/ml	3		
PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	3		QL (1 vaccine/90 days)
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	3		
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	3		
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	3		
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	3		
ROTARIX - rotavirus vaccine, live oral susp	3		
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	3		
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	2		QL (2 vaccines/1 lifetime)
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	3		
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	3		
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	3		
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	3		
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	3		

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VAXCHORA - cholera vaccine live attenuated for oral susp	3		
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	3		QL (1 vaccine/90 days)
VIVOTIF - typhoid vaccine cap delayed release	3		
<b>TOXOIDS</b>			
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	3		
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	3		
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	3		
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	3		
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	3		
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	3		
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	3		
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	3		
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	3		
TDVAX - tetanus-diphtheria toxoids (td) inj 2-2 lf/0.5ml	3		
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lfu	3		
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	3		
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb susp	3		
<b>PASSIVE IMMUNIZING AGENTS</b>			
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	2	SP	PA
GAMMAKED - immune globulin (human) iv or subcutaneous soln 1 gm/10ml	3	SP	PA
GAMMAKED - immune globulin (human) iv or subcutaneous soln 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	2	SP	PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 40 gm/400ml	2	SP	PA

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HIZENTRA - immune globulin (human) subcutaneous inj 1 gm/5ml, 2 gm/10ml, 4 gm/20ml, 10 gm/50ml	3	SP	PA, LD
HIZENTRA - immune globulin (human) subcutaneous soln pref syr 1 gm/5ml, 2 gm/10ml, 4 gm/20ml	3	SP	PA, LD
HIZENTRA - immune globulin (human) subcutaneous sol pref syr 10 gm/50ml	3	SP	PA, LD
HYQVIA - immun glob inj 2.5 gm/25ml-hyaluron inj 200 unt/1.25 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 5 gm/50ml-hyaluron inj 400 unt/2.5 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 10 gm/100ml-hyaluron inj 800 unt/5 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 20 gm/200ml-hyaluron inj 1600 unt/10 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 30 gm/300ml-hyaluron inj 2400 unt/15 ml kit	3	SP	PA, LD
<b>BIOLOGICALS MISC</b>			
GRASTEK - timothy grass pollen allergen ext sl tab 2800 bau	3		
ODACTRA - dust mite mixed ext sl tab 12 sq-hdm	3		
PALFORZIA INITIAL DOSE ES - peanut powder-dnfp starter pack 0.5 & 1 & 1.5 & 3 & 6 mg	3	SP	PA, LD, QL (1 pack/180 days)
PALFORZIA LEVEL 1 - peanut powder-dnfp cap sprinkle pack 3 x 1 mg (3 mg dose)	3	SP	PA, LD, QL (90 capsules/30 days)
PALFORZIA LEVEL 10 - peanut powder-dnfp pack 2 x 20 mg & 2 x 100 mg (240 mg dose)	3	SP	PA, LD, QL (120 capsules/30 days)
PALFORZIA LEVEL 11 (MAINT - peanut allergen powder-dnfp maintenance packet 300 mg	3	SP	PA, LD, QL (30 packets/30 days)
PALFORZIA LEVEL 11 (TITRA - peanut allergen powder-dnfp titration packet 300 mg	3	SP	PA, LD, QL (30 packets/30 days)
PALFORZIA LEVEL 2 - peanut powder-dnfp cap sprinkle pack 6 x 1 mg (6 mg dose)	3	SP	PA, LD, QL (180 capsules/30 days)
PALFORZIA LEVEL 3 - peanut powder-dnfp pack 2 x 1 mg & 10 mg (12 mg dose)	3	SP	PA, LD, QL (90 capsules/30 days)
PALFORZIA LEVEL 4 - peanut powder-dnfp cap sprinkle pack 20 mg (20 mg dose)	3	SP	PA, LD, QL (30 capsules/30 days)
PALFORZIA LEVEL 5 - peanut powder-dnfp cap sprinkle pack 2 x 20 mg (40 mg dose)	3	SP	PA, LD, QL (60 capsules/30 days)
PALFORZIA LEVEL 6 - peanut powder-dnfp cap sprinkle pack 4 x 20 mg (80 mg dose)	3	SP	PA, LD, QL (120 capsules/30 days)
PALFORZIA LEVEL 7 - peanut powder-dnfp pack 20 mg & 100 mg (120 mg dose)	3	SP	PA, LD, QL (60 capsules/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PALFORZIA LEVEL 8 - peanut powder-dnfp pack 3 x 20 mg & 100 mg (160 mg dose)	3	SP	PA, LD, QL (120 capsules/30 days)
PALFORZIA LEVEL 9 - peanut powder-dnfp pack 2 x 100 mg (200 mg dose)	3	SP	PA, LD, QL (60 capsules/30 days)
RAGWITEK - short ragweed pollen allergen extract sl tab 12 amb a 1-u	3		
<b>ANTINEOPLASTIC AGENTS</b>			
<b>ANTINEOPLASTICS</b>			
<b>abiraterone acetate tab 250 mg (Zytiga)</b>	1	SP	PA, QL (120 tablets/30 days)
<b>abiraterone acetate tab 500 mg (Zytiga)</b>	1	SP	PA, QL (60 tablets/30 days)
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	2	SP	PA, LD
AFINITOR - everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg	3	SP	PA, LD, QL (30 tablets/30 days)
AFINITOR DISPERZ - everolimus tab for oral susp 2 mg, 5 mg	3	SP	PA, LD, QL (60 tablets/30 days)
AFINITOR DISPERZ - everolimus tab for oral susp 3 mg	3	SP	PA, LD, QL (90 tablets/30 days)
AKEEGA - niraparib tosylate-abiraterone acetate tab 50-500 mg, 100-500 mg	2	SP	PA, LD, QL (60 tablets/30 days)
ALECENSA - alectinib hcl cap 150 mg (base equivalent)	2	SP	PA, LD, QL (240 capsules/30 days)
ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg	2	SP	PA, LD, QL (30 tablets/180 days)
ALUNBRIG - brigatinib tab 30 mg	2	SP	PA, LD, QL (180 tablets/30 days)
ALUNBRIG - brigatinib tab 90 mg, 180 mg	2	SP	PA, LD, QL (30 tablets/30 days)
<b>anastrozole tab 1 mg (Arimidex)</b>	1		
AUGTYRO - repotrectinib cap 40 mg	2	SP	PA, QL (240 capsules/30 days)
AUGTYRO - repotrectinib cap 160 mg	2	SP	PA, QL (60 capsules/30 days)
AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	2	SP	PA, LD, QL (30 tablets/30 days)
BALVERSA - erdafitinib tab 3 mg	2	SP	PA, LD, QL (90 tablets/30 days)
BALVERSA - erdafitinib tab 4 mg	2	SP	PA, LD, QL (60 tablets/30 days)
BALVERSA - erdafitinib tab 5 mg	2	SP	PA, LD, QL (30 tablets/30 days)
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	2	SP	PA, LD, QL (2 syringes/28 days)
<b>bexarotene cap 75 mg (Targretin)</b>	1	SP	PA
<b>bicalutamide tab 50 mg (Casodex)</b>	1		
BOSULIF - bosutinib cap 50 mg	2	SP	PA, LD, QL (30 capsules/30 days)
BOSULIF - bosutinib cap 100 mg	2	SP	PA, LD, QL (150 capsules/30 days)
BOSULIF - bosutinib tab 100 mg	2	SP	PA, LD, QL (120 tablets/30 days)
BOSULIF - bosutinib tab 400 mg, 500 mg	2	SP	PA, LD, QL (30 tablets/30 days)
BRAFTOVI - encorafenib cap 75 mg	2	SP	PA, LD, QL (180 capsules/30 days)
BRUKINSA - zanubrutinib cap 80 mg	2	SP	PA, LD, QL (120 capsules/30 days)

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CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
CALQUENCE - acalabrutinib maleate tab 100 mg	2	SP	PA, LD, QL (60 tablets/30 days)
<b>capecitabine tab 150 mg, 500 mg (Xeloda)</b>	1	SP	
CAPRELSA - vandetanib tab 100 mg	2	SP	PA, LD, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 300 mg	2	SP	PA, LD, QL (30 tablets/30 days)
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	2	SP	PA, LD, QL (1 kit/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	2	SP	PA, LD, QL (1 kit/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	2	SP	PA, LD, QL (1 kit/28 days)
COPIKTRA - duvelisib cap 15 mg, 25 mg	2	SP	PA, LD, QL (60 capsules/30 days)
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	2	SP	PA, LD, QL (63 tablets/28 days)
CYCLOPHOSPHAMIDE - cyclophosphamide cap 25 mg, 50 mg	3		
CYCLOPHOSPHAMIDE - cyclophosphamide tab 25 mg, 50 mg	2		
<b>cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)</b>	1		
<b>dasatinib tab 20 mg (Sprycel)</b>	1	SP	PA, QL (90 tablets/30 days)
<b>dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)</b>	1	SP	PA, QL (30 tablets/30 days)
DAURISMO - glasdegib maleate tab 25 mg (base equivalent)	2	SP	PA, LD, QL (60 tablets/30 days)
DAURISMO - glasdegib maleate tab 100 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
ERIVEDGE - vismodegib cap 150 mg	2	SP	PA, LD, QL (30 capsules/30 days)
ERLEADA - apalutamide tab 60 mg	2	SP	PA, LD, QL (120 tablets/30 days)
ERLEADA - apalutamide tab 240 mg	2	SP	PA, LD, QL (30 tablets/30 days)
<b>erlotinib hcl tab 25 mg (base equivalent) (Tarceva)</b>	1	SP	PA, QL (60 tablets/30 days)
<b>erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)</b>	1	SP	PA, QL (30 tablets/30 days)
ETOPOSIDE - etoposide cap 50 mg	2		
EULEXIN - flutamide cap 125 mg	3		LD
<b>everolimus tab for oral susp 2 mg, 5 mg (Afinitor disperz)</b>	1	SP	PA, QL (60 tablets/30 days)
<b>everolimus tab for oral susp 3 mg (Afinitor disperz)</b>	1	SP	PA, QL (90 tablets/30 days)
<b>everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)</b>	1	SP	PA, QL (30 tablets/30 days)
<b>exemestane tab 25 mg (Aromasin)</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FARESTON - toremifene citrate tab 60 mg (base equivalent)	3		
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	2	SP	PA, LD, QL (21 capsules/28 days)
FRUZAQLA - fruquintinib cap 1 mg	2	SP	PA, QL (84 capsules/28 days)
FRUZAQLA - fruquintinib cap 5 mg	2	SP	PA, QL (21 capsules/28 days)
GAVRETO - pralsetinib cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
<b>gefitinib tab 250 mg (Iressa)</b>	1	SP	PA, QL (30 tablets/30 days)
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
GLEOSTINE - lomustine cap 10 mg, 40 mg, 100 mg	2	SP	
HYCAMTIN - topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	2	SP	PA
HYDREA - hydroxyurea cap 500 mg	3		
<b>hydroxyurea cap 500 mg (Hydrea)</b>	1		
IBRANCE - palbociclib cap 75 mg, 100 mg, 125 mg	2	SP	PA, LD, QL (21 capsules/28 days)
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg	2	SP	PA, LD, QL (21 tablets/28 days)
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	2	SP	PA, LD, QL (30 tablets/30 days)
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
<b>imatinib mesylate tab 100 mg (base equivalent) (Gleevec)</b>	1	SP	PA, QL (90 tablets/30 days)
<b>imatinib mesylate tab 400 mg (base equivalent) (Gleevec)</b>	1	SP	PA, QL (60 tablets/30 days)
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg	2	SP	PA, LD, QL (30 tablets/30 days)
IMBRUVICA - ibrutinib oral susp 70 mg/ml	2	SP	PA, LD, QL (216 mls/30 days)
IMBRUVICA - ibrutinib cap 70 mg	2	SP	PA, LD, QL (30 capsules/30 days)
IMBRUVICA - ibrutinib cap 140 mg	2	SP	PA, LD, QL (120 capsules/30 days)
INLYTA - axitinib tab 1 mg	2	SP	PA, LD, QL (180 tablets/30 days)
INLYTA - axitinib tab 5 mg	2	SP	PA, LD, QL (120 tablets/30 days)
INQOVI - decitabine-cedazuridine tab 35-100 mg	2	SP	PA, LD, QL (5 tablets/28 days)
INREBIC - fedratinib hcl cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
IRESSA - gefitinib tab 250 mg	3	SP	PA, LD, QL (30 tablets/30 days)
ITOVEBI - inavolisib tab 3 mg, 9 mg	2	SP	
IWILFIN - eflornithine hcl tab 192 mg	2	SP	PA, QL (240 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	2	SP	PA, LD, QL (60 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 50 mg	2	SP	PA, LD, QL (30 tablets/30 days)

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JAYPIRCA - pirtobrutinib tab 100 mg	2	SP	PA, LD, QL (60 tablets/30 days)
KISQALI - ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	2	SP	PA, QL (63 tablets/28 days)
KOSELUGO - selumetinib sulfate cap 10 mg	2	SP	PA, LD, QL (240 capsules/30 days)
KOSELUGO - selumetinib sulfate cap 25 mg	2	SP	PA, LD, QL (120 capsules/30 days)
KRAZATI - adagrasib tab 200 mg	2	SP	PA, LD, QL (180 tablets/30 days)
<b>lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)</b>	1	SP	PA, QL (180 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 80 mg	2	SP	PA, QL (60 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 240 mg	2	SP	PA, QL (30 tablets/30 days)
LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)	2	SP	PA, LD, QL (30 capsules/30 days)
LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	2	SP	PA, LD, QL (90 capsules/30 days)
LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	2	SP	PA, LD, QL (60 capsules/30 days)
LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	2	SP	PA, LD, QL (90 capsules/30 days)
LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	2	SP	PA, LD, QL (60 capsules/30 days)
LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	2	SP	PA, LD, QL (90 capsules/30 days)
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)	2	SP	PA, LD, QL (30 capsules/30 days)
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	2	SP	PA, LD, QL (60 capsules/30 days)
<b>letrozole tab 2.5 mg (Femara)</b>	1		
<b>leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg</b>	1		
LEUKERAN - chlorambucil tab 2 mg	2		
<b>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</b>	1	SP	PA, QL (6 vials/30 days)
LONSURF - trifluridine-tipiracil tab 15-6.14 mg	2	SP	PA, LD, QL (100 tablets/28 days)
LONSURF - trifluridine-tipiracil tab 20-8.19 mg	2	SP	PA, LD, QL (80 tablets/28 days)
LORBRENA - lorlatinib tab 25 mg	2	SP	PA, LD, QL (90 tablets/30 days)
LORBRENA - lorlatinib tab 100 mg	2	SP	PA, LD, QL (30 tablets/30 days)
LUMAKRAS - sotorasib tab 120 mg	2	SP	PA, LD, QL (240 tablets/30 days)
LUMAKRAS - sotorasib tab 240 mg	2	SP	PA, LD, QL (120 tablets/30 days)
LUMAKRAS - sotorasib tab 320 mg	2	SP	PA, LD, QL (90 tablets/30 days)
LYNPARZA - olaparib tab 100 mg, 150 mg	2	SP	PA, LD, QL (120 tablets/30 days)
LYSODREN - mitotane tab 500 mg	2	SP	LD
LYTGOBI - futibatinib tab therapy pack 4 mg (12 mg daily dose)	2	SP	PA, LD, QL (84 tablets/28 days)

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LYTGOBI - futibatinib tab therapy pack 4 mg (16 mg daily dose)	2	SP	PA, LD, QL (112 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (20 mg daily dose)	2	SP	PA, LD, QL (140 tablets/28 days)
MATULANE - procarbazine hcl cap 50 mg	2	SP	LD
<b>megestrol acetate susp 40 mg/ml</b>	1		
<b>megestrol acetate tab 20 mg, 40 mg</b>	1		
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	2	SP	PA, QL (1170 mls/28 day)
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	2	SP	PA, QL (90 tablets/30 days)
MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	2	SP	PA, QL (30 tablets/30 days)
MEKTOVI - binimetinib tab 15 mg	2	SP	PA, LD, QL (180 tablets/30 days)
<b>mercaptopurine tab 50 mg</b>	1		
MESNEX - mesna tab 400 mg	2		
METHOTREXATE SODIUM - methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	3		
<b>methotrexate sodium for inj 1 gm</b>	1		
<b>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)</b>	1		
<b>methotrexate sodium tab 2.5 mg (base equiv)</b>	1		
MYLERAN - busulfan tab 2 mg	2		
NERLYNX - neratinib maleate tab 40 mg (base equivalent)	2	SP	PA, LD, QL (180 tablets/30 days)
NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)	3	SP	PA, LD, QL (120 tablets/30 days)
NILANDRON - nilutamide tab 150 mg	3		
<b>nilutamide tab 150 mg (Nilandron)</b>	1		
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	2	SP	PA, LD, QL (3 capsules/28 days)
NUBEQA - darolutamide tab 300 mg	2	SP	PA, QL (120 tablets/30 days)
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)	2	SP	PA, LD, QL (30 capsules/30 days)
OGSIVEO - nirogacestat hydrobromide tab 50 mg	2	SP	PA, LD, QL (180 tablets/30 days)
OGSIVEO - nirogacestat hydrobromide tab 100 mg, 150 mg	2	SP	PA, LD, QL (56 tablets/28 days)
OJEMDA - tovorafenib tab 100 mg	2	SP	PA, QL (24 tablets/28 days)
OJEMDA - tovorafenib for oral susp 25 mg/ml	2	SP	PA, QL (96 mls/28 days)
OJJAARA - momelotinib dihydrochloride tab 100 mg, 150 mg, 200 mg	2	SP	PA, LD, QL (30 tablets/30 days)

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ONUREG - azacitidine tab 200 mg, 300 mg	2	SP	PA, QL (14 tablets/28 days)
ORGOVYX - relugolix tab 120 mg	2	SP	PA, LD, QL (30 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 86 mg	2	SP	PA, LD, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 345 mg	2	SP	PA, LD, QL (30 tablets/30 days)
<b>pazopanib hcl tab 200 mg (base equiv) (Votrient)</b>	1	SP	PA, QL (120 tablets/30 days)
PEMAZYRE - pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	2	SP	PA, LD, QL (14 tablets/21 days)
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	2	SP	PA, QL (1 pack/28 days)
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	2	SP	PA, QL (1 pack/28 days)
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	2	SP	PA, QL (1 pack/28 days)
POMALYST - pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	2	SP	PA, LD, QL (21 capsules/28 days)
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)	2	SP	LD
QINLOCK - ripretinib tab 50 mg	2	SP	PA, LD, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 40 mg	2	SP	PA, LD, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 80 mg, 120 mg, 160 mg	2	SP	PA, LD, QL (60 tablets/30 days)
REVUFORJ - revumenib citrate tab 110 mg	2		PA, QL (120 tablets/30 days)
REVUFORJ - revumenib citrate tab 160 mg	2		PA, QL (60 tablets/30 days)
REZLIDHIA - olutasidenib cap 150 mg	2	SP	PA, LD, QL (60 capsules/30 days)
ROZLYTREK - entrectinib pellet pack 50 mg	2	SP	PA, LD, QL (336 packets/28 days)
ROZLYTREK - entrectinib cap 100 mg	2	SP	PA, LD, QL (30 capsules/30 days)
ROZLYTREK - entrectinib cap 200 mg	2	SP	PA, LD, QL (90 capsules/30 days)
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	2	SP	PA, LD, QL (120 tablets/30 days)
RYDAPT - midostaurin cap 25 mg	2	SP	PA, QL (240 capsules/30 days)
SCEMBLIX - asciminib hcl tab 20 mg	2	SP	PA, LD, QL (60 tablets/30 days)
SCEMBLIX - asciminib hcl tab 40 mg	2	SP	PA, LD, QL (240 tablets/30 days)
SCEMBLIX - asciminib hcl tab 100 mg	2	SP	PA, LD, QL (120 tablets/30 days)
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	3		
<b>sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)</b>	1	SP	PA, QL (120 tablets/30 days)
SPRYCEL - dasatinib tab 20 mg	3	SP	PA, QL (90 tablets/30 days)
SPRYCEL - dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg	3	SP	PA, QL (30 tablets/30 days)
STIVARGA - regorafenib tab 40 mg	2	SP	PA, LD, QL (84 tablets/28 days)
<b>sunitinib malate cap 12.5 mg (base equivalent) (Sutent)</b>	1	SP	PA, QL (90 capsules/30 days)

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<b>sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)</b>	1	SP	PA, QL (30 capsules/30 days)
SUTENT - sunitinib malate cap 12.5 mg (base equivalent)	3	SP	PA, LD, QL (90 capsules/30 days)
SUTENT - sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)	3	SP	PA, LD, QL (30 capsules/30 days)
TABLOID - thioguanine tab 40 mg	2		
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	2	SP	PA, QL (120 tablets/30 days)
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	2	SP	PA, QL (120 capsules/30 days)
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	2	SP	PA, QL (840 tablets/28 days)
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.35 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	2	SP	PA, LD, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)	2	SP	PA, LD, QL (90 capsules/30 days)
<b>tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)</b>	1		
TARCEVA - erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent)	3	SP	PA, LD, QL (30 tablets/30 days)
TARGRETIN - bexarotene cap 75 mg	3	SP	PA
TASIGNA - nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	2	SP	PA, QL (120 capsules/30 days)
TAZVERIK - tazemetostat hbr tab 200 mg	2	SP	PA, LD, QL (240 tablets/30 days)
<b>temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg</b>	1	SP	PA
<b>temozolomide cap 250 mg (Temodar)</b>	1	SP	PA
TEPMETKO - tepotinib hcl tab 225 mg	2	SP	PA, LD, QL (60 tablets/30 days)
TIBSOVO - ivosidenib tab 250 mg	2	SP	PA, LD, QL (60 tablets/30 days)
<b>toremifene citrate tab 60 mg (base equivalent) (Fareston)</b>	1		
<b>tretinoin cap 10 mg</b>	1	SP	PA
TRUQAP - capivasertib tab therapy pack 160 mg, 200 mg	2	SP	PA, LD, QL (64 tablets/28 days)
TRUQAP - capivasertib tab 160 mg, 200 mg	2	SP	PA, LD, QL (64 tablets/28 days)
TUKYSA - tucatinib tab 50 mg	2	SP	PA, LD, QL (300 tablets/30 days)
TUKYSA - tucatinib tab 150 mg	2	SP	PA, LD, QL (120 tablets/30 days)
TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	2	SP	PA, LD, QL (120 capsules/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
TYKERB - lapatinib ditosylate tab 250 mg (base equiv)	3	SP	PA, QL (180 tablets/30 days)
VANFLYTA - quizartinib dihydrochloride tab 17.7 mg	2	SP	PA, LD, QL (28 tablets/28 days)
VANFLYTA - quizartinib dihydrochloride tab 26.5 mg	2	SP	PA, LD, QL (56 tablets/28 days)
VENCLEXTA - venetoclax tab 10 mg	2	SP	PA, LD, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 50 mg	2	SP	PA, LD, QL (30 tablets/30 days)
VENCLEXTA - venetoclax tab 100 mg	2	SP	PA, LD, QL (120 tablets/30 days)
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	2	SP	PA, LD, QL (1 pack/180 days)
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	2	SP	PA, LD, QL (60 tablets/30 days)
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	2	SP	PA, LD, QL (300 mls/30 days)
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)	2	SP	PA, LD, QL (180 capsules/30 days)
VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)	2	SP	PA, LD, QL (60 capsules/30 days)
VIZIMPRO - dacomitinib tab 15 mg, 30 mg, 45 mg	2	SP	PA, LD, QL (30 tablets/30 days)
VONJO - pacritinib citrate cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
VORANIGO - vorasidenib tab 10 mg	2	SP	PA, QL (60 tablets/30 days)
VORANIGO - vorasidenib tab 40 mg	2	SP	PA, QL (30 tablets/30 days)
VOTRIENT - pazopanib hcl tab 200 mg (base equiv)	3	SP	PA, QL (120 tablets/30 days)
WELIREG - belzutifan tab 40 mg	2	SP	PA, LD, QL (90 tablets/30 days)
XALKORI - crizotinib cap 200 mg, 250 mg	2	SP	PA, LD, QL (60 capsules/30 days)
XALKORI - crizotinib cap sprinkle 20 mg	2	SP	PA, LD, QL (120 capsules/30 day)
XALKORI - crizotinib cap sprinkle 50 mg	2	SP	PA, LD, QL (120 capsules/30 days)
XALKORI - crizotinib cap sprinkle 150 mg	2	SP	PA, LD, QL (180 capsules/30 days)
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)	2	SP	PA, LD, QL (90 tablets/30 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg once weekly), 60 mg (60 mg once weekly)	2	SP	PA, LD, QL (4 tablets/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly)	2	SP	PA, LD, QL (8 tablets/28 days)
XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)	2	SP	PA, LD, QL (24 tablets/28 days)
XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)	2	SP	PA, LD, QL (32 tablets/28 days)
XTANDI - enzalutamide cap 40 mg	2	SP	PA, LD, QL (120 capsules/30 days)
XTANDI - enzalutamide tab 40 mg	2	SP	PA, LD, QL (120 tablets/30 days)
XTANDI - enzalutamide tab 80 mg	2	SP	PA, LD, QL (60 tablets/30 days)
YONSA - abiraterone acetate micronized tab 125 mg	2	SP	PA, LD, QL (120 tablets/30 days)

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ZEJULA - niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
ZELBORAF - vemurafenib tab 240 mg	2	SP	PA, LD, QL (240 tablets/30 days)
ZOLINZA - vorinostat cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
ZYDELIG - idelalisib tab 100 mg, 150 mg	2	SP	PA, LD, QL (60 tablets/30 days)
ZYKADIA - ceritinib tab 150 mg	2	SP	PA, LD, QL (90 tablets/30 days)
<b>ENDOCRINE AND METABOLIC DRUGS</b>			
<b>CORTICOSTEROIDS</b>			
AGAMREE - vamorolone oral susp 40 mg/ml	3	SP	PA, QL (3 bottles/30 days)
BUDESONIDE - budesonide delayed release particles cap 3 mg	3		
<b>budesonide delayed release particles cap 3 mg</b>	1		
<b>budesonide tab er 24hr 9 mg (Uceris)</b>	1		
CORTISONE ACETATE - cortisone acetate tab 25 mg	3		
<b>deflazacort susp 22.75 mg/ml (Emflaza)</b>	1	SP	PA, LD
<b>deflazacort tab 6 mg (Emflaza)</b>	1	SP	PA, LD, QL (60 tablets/30 days)
<b>deflazacort tab 18 mg (Emflaza)</b>	1	SP	PA, LD, QL (30 tablets/30 days)
<b>deflazacort tab 30 mg, 36 mg (Emflaza)</b>	1	SP	PA, LD
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml	2		
<b>dexamethasone elixir 0.5 mg/5ml</b>	1		
DEXAMETHASONE INTENSOL - dexamethasone conc 1 mg/ml	3		
<b>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</b>	1		
EMFLAZA - deflazacort susp 22.75 mg/ml	3	SP	PA, LD
EMFLAZA - deflazacort tab 6 mg	3	SP	PA, LD, QL (60 tablets/30 days)
EMFLAZA - deflazacort tab 18 mg	3	SP	PA, LD, QL (30 tablets/30 days)
EMFLAZA - deflazacort tab 30 mg, 36 mg	3	SP	PA, LD
EOHILIA - budesonide oral suspension 2 mg/10ml	3		PA, QL (600 mls/30 days)
<b>fludrocortisone acetate tab 0.1 mg</b>	1		
<b>hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)</b>	1		
MEDROL - methylprednisolone tab 2 mg, 4 mg, 8 mg, 16 mg	3		
MEDROL DOSEPAK - methylprednisolone tab therapy pack 4 mg (21)	3		
<b>methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)</b>	1		
<b>methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)</b>	1		

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PEDIAPRED - prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	3		
<b>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred)</b>	1		
<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</b>	1		
PREDNISOLONE SODIUM PHOSP - prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	3		
<b>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</b>	1		
<b>prednisolone soln 15 mg/5ml</b>	1		
<b>prednisolone tab 5 mg</b>	1		
PREDNISONONE - prednisone oral soln 5 mg/5ml	2		
PREDNISONONE INTENSOL - prednisone conc 5 mg/ml	3		
<b>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)</b>	1		
<b>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</b>	1		
TARPEYO - budesonide delayed release cap 4 mg	3	SP	PA, LD, QL (120 capsules/30 days)
<b>ANDROGEN-ANABOLIC</b>			
<b>danazol cap 50 mg, 100 mg, 200 mg</b>	1		PA
METHITEST - methyltestosterone oral tab 10 mg	3		PA, QL (600 tablets/30 days)
<b>methyltestosterone cap 10 mg</b>	1		PA, QL (600 capsules/30 days)
TESTOSTERONE - testosterone td gel 10mg/act (2%)	2		PA, QL (2 pumps/30 days)
<b>testosterone cypionate im inj in oil 100 mg/ml (Depo-testosterone)</b>	1		QL (1 vial/28 days)
<b>testosterone cypionate im inj in oil 200 mg/ml (Depo-testosterone)</b>	1		QL (10 mls/28 days)
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	3		QL (1 vial/28 days)
<b>testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (Androgel)</b>	1		PA, QL (60 packets/30 days)
<b>testosterone td gel 12.5 mg/act (1%)</b>	1		PA, QL (4 pumps/30 days)
<b>testosterone td gel 20.25 mg/act (1.62%) (Androgel pump)</b>	1		PA, QL (2 pumps/30 days)
<b>testosterone td soln 30 mg/act</b>	1		PA, QL (2 pumps/30 days)
<b>ESTROGENS</b>			
ALORA - estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr	3		QL (8 patches/28 days)
ANGELIQ - drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	3		

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BIJUVA - estradiol-progesterone cap 0.5-100 mg, 1-100 mg	3		
CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	2		QL (4 patches/28 days)
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	3		QL (8 patches/28 day)
DELESTROGEN - estradiol valerate im in oil 10 mg/ml, 20 mg/ml	3	SP	
DIVIGEL - estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)	3		QL (30 packets/30 days)
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg	2		
ELESTRIN - estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	3		QL (1 pump/30 days)
ESTRACE - estradiol tab 0.5 mg, 1 mg, 2 mg	3		
<b>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</b>	1		
<b>estradiol &amp; norethindrone acetate tab 1-0.5 mg (Activella)</b>	1		
<b>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (Estrogel)</b>	1		QL (1 pump/30 days)
<b>estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)</b>	1		
<b>estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel)</b>	1		QL (30 packets/30 days)
<b>estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)</b>	1		QL (8 patches/28 days)
<b>estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)</b>	1		QL (4 patches/28 days)
<b>estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen)</b>	1	SP	
ESTROGEL - estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)	3		QL (1 pump/30 days)
EVAMIST - estradiol transdermal spray 1.53 mg/spray	3		QL (5 bottles/93 days)
MENEST - esterified estrogens tab 0.3 mg, 0.625 mg, 1.25 mg, 2.5 mg	2		
MENOSTAR - estradiol td patch weekly 14 mcg/24hr	3		QL (4 patches/28 days)
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	2		PA, QL (30 tablets/30 days)
<b>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg</b>	1		

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ORIAHNN - elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack	2		PA, QL (56 capsules/28 days)
PREMARIN - estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	2		
PREMPHASE - conj est 0.625(14)/conj est-medroxyprogesterone acet tab 0.625-5mg(14)	2		
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	2		
<b>CONTRACEPTIVES</b>			
BEYAZ - drospirenone-ethinyl estradiol-levomefolate tab 3-0.02-0.451 mg	3		
<b>desogestrel-ethinyl estradiol &amp; ethinyl estradiol tab 0.15-0.02/0.01 mg(21/5) (Mircette)</b>	1		
<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</b>	1		
<b>drospirenone-ethinyl estradiol-levomefolate tab 3-0.02-0.451 mg (Beyaz)</b>	1		
<b>drospirenone-ethinyl estradiol-levomefolate tab 3-0.03-0.451 mg (Safyral)</b>	1		
<b>drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)</b>	1		
<b>drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)</b>	1		
ELLA - ulipristal acetate tab 30 mg	2		
<b>ethinodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg</b>	1		
<b>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr (Nuvaring)</b>	1		PA
<b>levonorgestrel-ethinyl estradiol tab 0.15-0.02/0.025/0.03 mg &amp; ethinyl estradiol 0.01 mg (Quartette)</b>	1		
<b>levonorgestrel-ethinyl estradiol tab 0.1-0.02mg(84) &amp; ethinyl estradiol 0.01mg(7) (LoSeasonique)</b>	1		
<b>levonorgestrel-ethinyl estradiol tab 0.15-0.03mg(84) &amp; ethinyl estradiol 0.01mg(7) (Seasonique)</b>	1		
<b>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</b>	1		
<b>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg</b>	1		
<b>levonorgestrel tab 1.5 mg</b>	1		
<b>levonorgestrel-ethinyl estradiol tab 0.05-30/0.075-40/0.125-30mg-mcg</b>	1		
<b>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</b>	1		

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LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	2		
<b>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)</b>	1		
<b>medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)</b>	1		
NATAZIA - estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	3		
<b>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</b>	1		
<b>norethindrone &amp; ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg</b>	1		
<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)</b>	1		
<b>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</b>	1		
<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg</b>	1		
<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg</b>	1		
<b>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)</b>	1		
<b>norethindrone tab 0.35 mg</b>	1		
<b>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg- mcg</b>	1		
<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</b>	1		
<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg</b>	1		
<b>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg</b>	1		
NUVARING - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2		
OPILL - norgestrel tab 0.075 mg	2		
PLAN B ONE-STEP - levonorgestrel tab 1.5 mg	3		
SAFYRAL - drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	3		
SLYND - drospirenone tab 4 mg	3		
TYBLUME - levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	3		
VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	2		

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YASMIN 28 - drospirenone-ethinyl estradiol tab 3-0.03 mg	3		
YAZ - drospirenone-ethinyl estradiol tab 3-0.02 mg	3		
<b>PROGESTINS</b>			
<b>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)</b>	1		
<b>norethindrone acetate tab 5 mg (Aygestin)</b>	1		
<b>progesterone cap 100 mg, 200 mg (Prometrium)</b>	1		
PROVERA - medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg	3		
<b>ANTIDIABETICS</b>			
<b>Antidiabetics</b>			
<b>acarbose tab 25 mg, 50 mg, 100 mg (Precose)</b>	1		
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose	2		
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	2		
BYDUREON BCISE - exenatide extended release susp auto-injector 2 mg/0.85ml	3		PA, QL (4 pens/28 days)
CYCLOSET - bromocriptine mesylate tab 0.8 mg (base equivalent)	3		
<b>diazoxide susp 50 mg/ml (Proglycem)</b>	1		
FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	2		ST, QL (30 tablets/30 days)
<b>glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)</b>	1		
GLIPIZIDE - glipizide tab 2.5 mg	3		
<b>glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)</b>	1		
<b>glipizide tab 5 mg, 10 mg</b>	1		
<b>glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg</b>	1		
GLUCAGON EMERGENCY KIT FO - glucagon (rdna) for inj kit 1 mg	2		
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg	2		
GLYBURIDE MICRONIZED - glyburide micronized tab 1.5 mg, 3 mg, 6 mg	2		
<b>glyburide tab 1.25 mg, 2.5 mg, 5 mg</b>	1		
<b>glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg</b>	1		
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	2		ST, QL (30 tablets/30 days)

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GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2		
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2		
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	2		
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	2		
JANUMET - sitagliptin-metformin hcl tab 50-500 mg, 50-1000 mg	2		ST, QL (60 tablets/30 days)
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg	2		ST, QL (30 tablets/30 days)
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-1000 mg	2		ST, QL (60 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	2		ST, QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg, 25 mg	2		ST, QL (30 tablets/30 days)
KORLYM - mifepristone tab 300 mg	3	SP	PA, LD, QL (120 tablets/30 days)
<b>metformin hcl tab er 24hr 500 mg, 750 mg</b>	1		
<b>metformin hcl tab 500 mg, 850 mg, 1000 mg</b>	1		
<b>mifepristone tab 300 mg (Korlym)</b>	1	SP	PA, QL (120 tablets/30 days)
MIGLITOL - miglitol tab 25 mg, 50 mg, 100 mg	2		
MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml	2		PA, QL (4 pens/180 days)
MOUNJARO - tirzepatide soln auto-injector 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	2		PA, QL (4 pens/28 days)
<b>nateglinide tab 60 mg, 120 mg</b>	1		
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	2		PA, QL (1 pen/28 days)
<b>pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)</b>	1		
<b>pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)</b>	1		
PROGLYCEM - diazoxide susp 50 mg/ml	3		
<b>repaglinide tab 0.5 mg, 1 mg, 2 mg</b>	1		
RYBELSUS - semaglutide tab 3 mg	2		PA, QL (30 tablets/180 days)
RYBELSUS - semaglutide tab 7 mg, 14 mg	2		PA, QL (30 tablets/30 days)
<b>saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv) (Onglyza)</b>	1		QL (30 tablets/30 days)
<b>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg (Kombiglyze xr)</b>	1		QL (60 tablets/30 days)

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<b>saxagliptin-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg (Kombiglyze xr)</b>	1		QL (30 tablets/30 days)
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	2		
SYMLINPEN 120 - pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	2		
SYMLINPEN 60 - pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	2		
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	2		ST, QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg	2		ST, QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg	2		ST, QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg	2		ST, QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg, 25-5-1000 mg	2		ST, QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	2		ST, QL (60 tablets/30 days)
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	2		PA, QL (4 pens/28 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	2		ST, QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg	2		ST, QL (30 tablets/30 days)
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	2		
ZEGALOGUE - dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml	2		
ZEGALOGUE - dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml	2		
<b>Rapid-Acting Insulins</b>			
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	2		
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	2		
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2		
HUMALOG - insulin lispro soln cartridge 100 unit/ml	2		
HUMALOG - insulin lispro inj soln 100 unit/ml	2		
HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	2		
HUMALOG TEMPO PEN - insulin lispro soln pen-inj w/ transmitter port 100 unit/ml	2		
LYUMJEV - insulin lispro-aabc inj 100 unit/ml	2		
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	2		
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-injector 200 unit/ml	2		
LYUMJEV TEMPO PEN - insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml	2		
NOVOLOG - insulin aspart inj soln 100 unit/ml	2		
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	2		
NOVOLOG FLEXPEN RELION - insulin aspart soln pen-injector 100 unit/ml	2		
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	2		
NOVOLOG RELION - insulin aspart inj soln 100 unit/ml	2		
<b>Short-Acting Insulins</b>			
AFREZZA - insulin regular (human) inhalation powder 4 unit/cartridge	3		PA, QL (2520 cartridges/30 days)
AFREZZA - insulin regular (human) inhalation powder 8 unit/cartridge	3		PA, QL (1260 cartridges/30 days)
AFREZZA - insulin regular (human) inhalation powder 12 unit/cartridge	3		PA, QL (900 cartridges/30 days)
AFREZZA - insulin regular (human) inhal powd 90 x 4 unit & 90 x 8 unit	3		PA, QL (1800 cartridges/30 days)
AFREZZA - insulin regular (human) inh powd 90 x 8 unit & 90 x 12 unit	3		PA, QL (1080 cartridges/30 days)
AFREZZA - insulin regular (human) inh powd 60x4 & 60x8 & 60x12 ut/cart	3		PA, QL (1260 cartridges/30 days)
HUMULIN R - insulin regular (human) inj 100 unit/ml	2		
HUMULIN R U-500 (CONCENTR - insulin regular (human) inj 500 unit/ml	2		
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml	2		
NOVOLIN R - insulin regular (human) inj 100 unit/ml	2		
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	2		
NOVOLIN R FLEXPEN RELION - insulin regular (human) soln pen-injector 100 unit/ml	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
NOVOLIN R RELION - insulin regular (human) inj 100 unit/ml	2		
RELION R - insulin regular (human) inj 100 unit/ml	2		
<b>Intermediate-Acting Insulins</b>			
HUMALOG MIX 50/50 - insulin lispro protamine & lispro inj 100 unit/ml (50-50)	2		
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	2		
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)	2		
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	2		
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	2		
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml	2		
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		
NOVOLIN N FLEXPEN RELION - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		
NOVOLIN N RELION - insulin nph (human) (isophane) inj 100 unit/ml	2		
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		
NOVOLIN 70/30 FLEXPEN REL - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		
NOVOLIN 70/30 RELION - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2		
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	2		
NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2		
<b>Basal Insulins</b>			

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BASAGLAR KWIKPEN - insulin glargine soln pen-injector 100 unit/ml	3		
BASAGLAR TEMPO PEN - insulin glargine pen-inj with transmitter port 100 unit/ml	3		
INSULIN DEGLUDEC - insulin degludec inj 100 unit/ml	2		
INSULIN DEGLUDEC FLEXTOUCC - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2		
LANTUS - insulin glargine inj 100 unit/ml	2		
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml	2		
LEVEMIR - insulin detemir inj 100 unit/ml	2		
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	2		
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	2		
TRESIBA - insulin degludec inj 100 unit/ml	2		
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2		
<b>THYROID AGENTS</b>			
ADTHYZA - thyroid tab 15 mg (1/4 grain), 16.25 mg, 30 mg (1/2 grain), 32.5 mg, 60 mg (1 grain), 65 mg, 90 mg (1 1/2 grain), 97.5 mg, 120 mg (2 grain), 130 mg	3		
ARMOUR THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	3		
ERMEZA - levothyroxine sodium oral solution 150 mcg/5ml	3		
<b>levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)</b>	1		
<b>liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)</b>	1		
<b>methimazole tab 5 mg, 10 mg</b>	1		
NIVA THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	3		
NP THYROID 120 - thyroid tab 120 mg (2 grain)	3		
NP THYROID 15 - thyroid tab 15 mg (1/4 grain)	3		
NP THYROID 30 - thyroid tab 30 mg (1/2 grain)	3		
NP THYROID 60 - thyroid tab 60 mg (1 grain)	3		
NP THYROID 90 - thyroid tab 90 mg (1 1/2 grain)	3		
<b>propylthiouracil tab 50 mg</b>	1		

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SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	2		
THYQUIDITY - levothyroxine sodium oral solution 100 mcg/5ml	3		
THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	3		
<b>OXYTOCICS</b>			
<b>methylergonovine maleate tab 0.2 mg</b>	1		QL (28 tablets/270 days)
<b>ENDOCRINE and METABOLIC AGENTS - MISC.</b>			
ACTHAR - corticotropin inj gel 80 unit/ml	3	SP	PA, LD, QL (7 vials/21 days)
ACTHAR GEL - corticotropin subcutaneous gel auto-injector 40 unit/0.5ml, 80 unit/ml	3	SP	PA, LD
ALENDRONATE SODIUM - alendronate sodium tab 5 mg	3		
<b>alendronate sodium oral soln 70 mg/75ml</b>	1		
<b>alendronate sodium tab 10 mg, 35 mg</b>	1		
<b>alendronate sodium tab 70 mg (Fosamax)</b>	1		
<b>betaine powder for oral solution (Cystadane)</b>	1	SP	PA
BINOSTO - alendronate sodium effervescent tab 70 mg	3		
BUPHENYL - sodium phenylbutyrate tab 500 mg	3	SP	PA, LD, QL (1200 tablets/30 days)
<b>cabergoline tab 0.5 mg</b>	1		
<b>calcitonin (salmon) inj 200 unit/ml (Miacalcin)</b>	1		
<b>calcitonin (salmon) nasal soln 200 unit/act</b>	1		
<b>calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)</b>	1		
<b>calcitriol oral soln 1 mcg/ml (Rocaltrol)</b>	1		
CARBAGLU - carglumic acid soluble tab 200 mg	3	SP	LD
<b>carglumic acid soluble tab 200 mg (Carbaglu)</b>	1	SP	
CARNITOR - levocarnitine tab 330 mg	3		
CARNITOR - levocarnitine oral soln 1 gm/10ml (10%)	3		
CARNITOR SF - levocarnitine oral soln 1 gm/10ml (10%)	3		
<b>cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)</b>	1		PA
CYSTADANE - betaine powder for oral solution	3	SP	PA, LD
DDAVP - desmopressin acetate inj 4 mcg/ml	3		
DDAVP - desmopressin acetate preservative free (pf) inj 4 mcg/ml	3		
DESMOPRESSIN ACETATE - desmopressin acetate nasal soln 1.5 mg/ml	2		
<b>desmopressin acetate inj 4 mcg/ml (Ddavp)</b>	1		

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<b>desmopressin acetate nasal spray soln 0.01% (refrigerated), 0.01%</b>	1		
<b>desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddvp)</b>	1		
<b>desmopressin acetate tab 0.1 mg, 0.2 mg (Ddvp)</b>	1		
<b>doxercaliferol cap 0.5 mcg, 1 mcg, 2.5 mcg</b>	1		
EGRIFTA SV - tesamorelin acetate for inj 2 mg (base equiv)	3	SP	PA
FOSAMAX - alendronate sodium tab 70 mg	3		
GALAFOLD - migalastat hcl cap 123 mg (base equivalent)	3	SP	PA, LD, QL (14 capsules/28 days)
GENOTROPIN - somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	2	SP	PA
GENOTROPIN MINIQUICK - somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	2	SP	PA
<b>ibandronate sodium tab 150 mg (base equivalent)</b>	1		
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)	2	SP	PA, LD
ISTURISA - osilodrostat phosphate tab 1 mg	3	SP	PA, LD, QL (240 tablets/30 days)
ISTURISA - osilodrostat phosphate tab 5 mg	3	SP	PA, LD, QL (300 tablets/30 days)
JYNARQUE - tolvaptan tab therapy pack 15 mg, 30 & 15 mg	3	SP	PA, LD, QL (56 tablets/28 days)
JYNARQUE - tolvaptan tab therapy pack 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	3	SP	PA, LD, QL (4 blisters/28 days)
JYNARQUE - tolvaptan tab 15 mg	3	SP	PA, LD, QL (60 tablets/30 days)
JYNARQUE - tolvaptan tab 30 mg	3	SP	PA, LD, QL (30 tablets/30 days)
KERENDIA - finerenone tab 10 mg, 20 mg	3		PA, QL (30 tablets/30 days)
KUVAN - sapropterin dihydrochloride tab 100 mg	3	SP	PA, LD
KUVAN - sapropterin dihydrochloride powder packet 100 mg, 500 mg	3	SP	PA, LD
<b>levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)</b>	1		
<b>levocarnitine tab 330 mg (Carnitor)</b>	1		
MIACALCIN - calcitonin (salmon) inj 200 unit/ml	3		
MIFEPREX - mifepristone tab 200 mg	2		
<b>mifepristone tab 200 mg (Mifeprex)</b>	1		
MYALEPT - metreleptin for subcutaneous inj 11.3 mg	3	SP	PA, LD, QL (30 vials/30 days)
MYCAPSSA - octreotide acetate cap delayed release 20 mg	3	SP	PA, LD, QL (120 capsules/30 days)
<b>nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)</b>	1	SP	PA, LD
NITYR - nitisinone tab 2 mg, 5 mg, 10 mg	2	SP	PA, LD

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NORDITROPIN FLEXPPO - somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	2	SP	PA
NULIBRY - fosdenopterin hydrobromide for iv soln 9.5 mg	3	SP	PA, LD
OCTREOTIDE ACETATE - octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	3	SP	
<b>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)</b>	1	SP	
<b>octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)</b>	1	SP	
OMNITROPE - somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	2	SP	PA, LD
OMNITROPE - somatropin for inj 5.8 mg	2	SP	PA, LD
OPFOLDA - miglustat (gaa deficiency) cap 65 mg	3	SP	PA, LD, QL (8 capsules/28 days)
ORFADIN - nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg	3	SP	PA, LD
ORFADIN - nitisinone susp 4 mg/ml	2	SP	PA, LD
ORLISSA - elagolix sodium tab 150 mg (base equiv)	2		PA, QL (30 tablets/30 days)
ORLISSA - elagolix sodium tab 200 mg (base equiv)	2		PA, QL (60 tablets/30 days)
OSPHENA - ospemifene tab 60 mg	3		
OVIDREL - choriogonadotropin alfa soln prefilled syr 250 mcg/0.5ml	2		
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml	3	SP	PA, LD, QL (30 syringes/30 days)
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 20 mg/ml	3	SP	PA, LD, QL (60 syringes/30 days)
<b>paricalcitol cap 1 mcg, 2 mcg (Zemplar)</b>	1		
<b>paricalcitol cap 4 mcg</b>	1		
PHEBURANE - sodium phenylbutyrate oral pellets 483 mg/gm	3	SP	PA, LD, QL (7 bottles/29 days)
<b>raloxifene hcl tab 60 mg (Evista)</b>	1		
RAVICTI - glycerol phenylbutyrate liquid 1.1 gm/ml	3	SP	PA, LD, QL (525 mls/30 days)
<b>risedronate sodium tab delayed release 35 mg (Atelvia)</b>	1		
<b>risedronate sodium tab 5 mg, 30 mg</b>	1		
<b>risedronate sodium tab 35 mg, 150 mg (Actonel)</b>	1		
ROCALTROL - calcitriol cap 0.25 mcg, 0.5 mcg	3		
ROCALTROL - calcitriol oral soln 1 mcg/ml	3		
SAMSCA - tolvaptan tab 15 mg	3	SP	LD, QL (30 tablets/365 days)

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SANDOSTATIN - octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml)	3	SP	
<b>sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)</b>	1	SP	PA, LD
<b>sapropterin dihydrochloride tab 100 mg (Kuvan)</b>	1	SP	PA, LD
SENSIPAR - cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)	3		PA
SEROSTIM - somatropin (non-refrigerated) for subcutaneous inj 4 mg, 5 mg, 6 mg	3	SP	PA, LD
SIGNIFOR - pasireotide diaspertate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	3	SP	PA, LD, QL (60 vials/30 days)
SIGNIFOR LAR - pasireotide pamoate for im er susp 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv)	3	SP	PA, LD, QL (1 vial/28 days)
<b>sodium phenylbutyrate oral powder 3 gm/ teaspoonful (Buphenyl)</b>	1	SP	PA, QL (600 grams/30 days)
<b>sodium phenylbutyrate tab 500 mg (Buphenyl)</b>	1	SP	PA, QL (1200 tablets/30 days)
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	2	SP	LD
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	2	SP	PA, LD
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	2	SP	
TERIPARATIDE - teriparatide soln pen-inj 620 mcg/2.48ml	3	SP	PA
<b>teriparatide soln pen-inj 600 mcg/2.4ml (Forteo)</b>	1	SP	PA
<b>tolvaptan tab 15 mg (Samsca)</b>	1	SP	QL (30 tablets/365 days)
<b>tolvaptan tab 30 mg (Samsca)</b>	1	SP	QL (60 tablets/365 days)
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	2	SP	PA, LD
VOXZOGO - vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	3	SP	PA, LD, QL (30 vials/30 days)
XURIDEN - uridine triacetate oral granules packet 2 gm	3	SP	PA, LD
ZEMPLAR - paricalcitol cap 1 mcg, 2 mcg	3		
<b>CARDIOVASCULAR AGENTS</b>			
<b>CARDIOTONICS</b>			
DIGOXIN - digoxin oral soln 0.05 mg/ml	3		
<b>digoxin oral soln 0.05 mg/ml (Digoxin)</b>	1		
<b>digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	3		
<b>ANTIANGINAL AGENTS</b>			
<b>isosorbide dinitrate tab 5 mg, 40 mg (Isordil titradose)</b>	1		
<b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg</b>	1		
<b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg</b>	1		
<b>isosorbide mononitrate tab 10 mg, 20 mg</b>	1		
NITRO-BID - nitroglycerin oint 2%	2		
NITRO-DUR - nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	3		
NITRO-DUR - nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	2		
NITRO-TIME - nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	3		
<b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)</b>	1		
<b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)</b>	1		
<b>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)</b>	1		
NITROLINGUAL - nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	3		
NITROSTAT - nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg	3		
<b>ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)</b>	1		
<b>BETA BLOCKERS</b>			
<b>acebutolol hcl cap 200 mg, 400 mg</b>	1		
<b>atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)</b>	1		
<b>betaxolol hcl tab 10 mg, 20 mg</b>	1		
<b>bisoprolol fumarate tab 5 mg, 10 mg</b>	1		
<b>carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)</b>	1		
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	2		
<b>labetalol hcl tab 100 mg, 200 mg, 300 mg</b>	1		
LOPRESSOR - metoprolol tartrate tab 50 mg, 100 mg	3		
<b>metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)</b>	1		
<b>metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg</b>	1		
<b>metoprolol tartrate tab 50 mg, 100 mg (Lopressor)</b>	1		
<b>nadolol tab 20 mg, 40 mg, 80 mg (Corgard)</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	1		
pindolol tab 5 mg, 10 mg	1		
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml	2		
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	1		
propranolol hcl oral soln 20 mg/5ml	1		
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1		
sotalol hcl (afib/afi) tab 80 mg, 120 mg, 160 mg (Betapace af)	1		
sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)	1		
sotalol hcl tab 240 mg	1		
timolol maleate tab 5 mg, 10 mg, 20 mg	1		
TOPROL XL - metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	3		
<b>CALCIUM CHANNEL BLOCKERS</b>			
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	1		
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	1		
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	1		
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem cd)	1		
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	1		
diltiazem hcl tab er 24hr 420 mg (Cardizem la)	1		
diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	1		
diltiazem hcl tab 90 mg	1		
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	1		
isradipine cap 2.5 mg, 5 mg	1		
nicardipine hcl cap 20 mg, 30 mg	1		
nifedipine cap 10 mg, 20 mg	1		
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	1		
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)	1		
nimodipine cap 30 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
NISOLDIPINE ER - nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	2		
<b>nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)</b>	1		
NYMALIZE - nimodipine oral soln 6 mg/ml	3		
SULAR - nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg	3		
<b>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)</b>	1		
VERAPAMIL HCL ER - verapamil hcl cap er 24hr 100 mg, 300 mg	3		
VERAPAMIL HCL SR - verapamil hcl cap er 24hr 360 mg	3		
<b>verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)</b>	1		
<b>verapamil hcl tab 40 mg, 80 mg, 120 mg</b>	1		
VERAPAMIL HYDROCHLORIDE E - verapamil hcl cap er 24hr 100 mg, 200 mg	3		
VERELAN - verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg, 360 mg	3		
<b>ANTIARRHYTHMICS</b>			
<b>amiodarone hcl tab 100 mg, 200 mg, 400 mg</b>	1		
<b>disopyramide phosphate cap 100 mg, 150 mg (Norpace)</b>	1		
<b>dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)</b>	1		
<b>flecainide acetate tab 50 mg, 100 mg, 150 mg</b>	1		
<b>mexiletine hcl cap 150 mg, 200 mg, 250 mg</b>	1		
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	2		
NORPACE - disopyramide phosphate cap 100 mg, 150 mg	3		
NORPACE CR - disopyramide phosphate cap er 12hr 100 mg, 150 mg	3		
<b>propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)</b>	1		
<b>propafenone hcl tab 150 mg, 225 mg, 300 mg</b>	1		
<b>quinidine gluconate tab er 324 mg</b>	1		
QUINIDINE SULFATE - quinidine sulfate tab 200 mg, 300 mg	3		
<b>ANTIHYPERTENSIVES</b>			
ACCURETIC - quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	3		

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<b>aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)</b>	1		QL (30 tablets/30 days)
<b>amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg</b>	1		
<b>amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)</b>	1		
<b>amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)</b>	1		QL (30 tablets/30 days)
<b>amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)</b>	1		QL (30 tablets/30 days)
<b>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)</b>	1		QL (30 tablets/30 days)
<b>atenolol &amp; chlorthalidone tab 50-25 mg (Tenoretic 50)</b>	1		
<b>atenolol &amp; chlorthalidone tab 100-25 mg (Tenoretic 100)</b>	1		
<b>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</b>	1		
<b>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)</b>	1		
<b>benazepril hcl tab 5 mg</b>	1		
<b>benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)</b>	1		
<b>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)</b>	1		
<b>candesartan cilexetil tab 4 mg, 8 mg, 16 mg (Atacand)</b>	1		QL (60 tablets/30 days)
<b>candesartan cilexetil tab 32 mg (Atacand)</b>	1		QL (30 tablets/30 days)
<b>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)</b>	1		QL (30 tablets/30 days)
<b>captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg</b>	1		
<b>clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg</b>	1		
<b>clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)</b>	1		
<b>clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)</b>	1		
<b>clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)</b>	1		
<b>DIBENZYLINE - phenoxybenzamine hcl cap 10 mg</b>	3		
<b>doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)</b>	1		
<b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</b>	1		
<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg (Vaseretic)</b>	1		

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<b>enalapril maleate oral soln 1 mg/ml (Epaned)</b>	1		
<b>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)</b>	1		
EPANED - enalapril maleate oral soln 1 mg/ml	3		
<b>eplerenone tab 25 mg, 50 mg (Inspra)</b>	1		
<b>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b>	1		
<b>fosinopril sodium tab 10 mg, 20 mg, 40 mg</b>	1		
<b>guanfacine hcl tab 1 mg, 2 mg</b>	1		
<b>hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</b>	1		
<b>irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)</b>	1		QL (30 tablets/30 days)
<b>irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)</b>	1		QL (30 tablets/30 days)
<b>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)</b>	1		
<b>lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril)</b>	1		
<b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)</b>	1		QL (30 tablets/30 days)
<b>losartan potassium tab 25 mg, 50 mg (Cozaar)</b>	1		QL (60 tablets/30 days)
<b>losartan potassium tab 100 mg (Cozaar)</b>	1		QL (30 tablets/30 days)
LOTENSIN - benazepril hcl tab 10 mg, 20 mg, 40 mg	3		
LOTENSIN HCT - benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	3		
METHYLDOPA - methyl dopa tab 250 mg, 500 mg	2		
<b>metoprolol &amp; hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg</b>	1		
<b>minoxidil tab 2.5 mg, 10 mg</b>	1		
<b>moexipril hcl tab 7.5 mg, 15 mg</b>	1		
<b>olmesartan medoxomil tab 5 mg (Benicar)</b>	1		QL (60 tablets/30 days)
<b>olmesartan medoxomil tab 20 mg, 40 mg (Benicar)</b>	1		QL (30 tablets/30 days)
<b>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)</b>	1		QL (30 tablets/30 days)
<b>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)</b>	1		QL (30 tablets/30 days)
PERINDOPRIL ERBUMINE - perindopril erbumine tab 2 mg, 8 mg	2		
<b>perindopril erbumine tab 4 mg</b>	1		
<b>phenoxybenzamine hcl cap 10 mg (Dibenzyline)</b>	1		
<b>prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)</b>	1		

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<b>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)</b>	1		
<b>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic)</b>	1		
QUINAPRIL/HYDROCHLOROTHIA - quinapril-hydrochlorothiazide tab 20-25 mg	3		
<b>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)</b>	1		
TEKTURN - aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent)	3		QL (30 tablets/30 days)
<b>telmisartan tab 20 mg, 40 mg, 80 mg (Micardis)</b>	1		QL (30 tablets/30 days)
<b>telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-25 mg (Micardis hct)</b>	1		QL (30 tablets/30 days)
<b>telmisartan-hydrochlorothiazide tab 80-12.5 mg (Micardis hct)</b>	1		QL (60 tablets/30 days)
TELMISARTAN/AMLODIPINE - telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 mg	2		QL (30 tablets/30 days)
TENORETIC 100 - atenolol & chlorthalidone tab 100-25 mg	3		
TENORETIC 50 - atenolol & chlorthalidone tab 50-25 mg	3		
<b>terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>	1		
<b>trandolapril tab 1 mg, 2 mg, 4 mg</b>	1		
TRANDOLAPRIL/VERAPAMIL HC - trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	3		
<b>valsartan tab 40 mg, 80 mg, 160 mg (Diovan)</b>	1		QL (60 tablets/30 days)
<b>valsartan tab 320 mg (Diovan)</b>	1		QL (30 tablets/30 days)
<b>valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)</b>	1		QL (30 tablets/30 days)
VECAMYL - mecamylamine hcl tab 2.5 mg	3		LD
<b>DIURETICS</b>			
<b>acetazolamide cap er 12hr 500 mg</b>	1		
<b>acetazolamide tab 125 mg, 250 mg</b>	1		
<b>amiloride hcl tab 5 mg</b>	1		
AMILORIDE/HYDROCHLOROTHIA - amiloride & hydrochlorothiazide tab 5-50 mg	2		
<b>bumetanide tab 0.5 mg (Bumex)</b>	1		
<b>bumetanide tab 1 mg, 2 mg</b>	1		
BUMEX - bumetanide tab 0.5 mg	3		
<b>chlorthalidone tab 25 mg, 50 mg</b>	1		

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<b>dichlorphenamide tab 50 mg (Keveyis)</b>	1	SP	PA, QL (120 tablets/30 days)
DIURIL - chlorothiazide susp 250 mg/5ml	3		
DYRENIUM - triamterene cap 50 mg, 100 mg	3		
EDECIN - ethacrynic acid tab 25 mg	3		
<b>ethacrynic acid tab 25 mg (Edecrin)</b>	1		
FUROSCIX - furosemide subcutaneous cartridge kit 80 mg/10ml	3	SP	PA, LD, QL (8 kits/30 days)
FUROSEMIDE - furosemide oral soln 8 mg/ml	3		
<b>furosemide oral soln 10 mg/ml</b>	1		
<b>furosemide tab 20 mg, 40 mg, 80 mg (Lasix)</b>	1		
<b>hydrochlorothiazide cap 12.5 mg</b>	1		
<b>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg</b>	1		
<b>indapamide tab 1.25 mg, 2.5 mg</b>	1		
KEVEYIS - dichlorphenamide tab 50 mg	3	SP	PA, LD, QL (120 tablets/30 days)
LASIX - furosemide tab 20 mg, 40 mg, 80 mg	3		
<b>methazolamide tab 25 mg, 50 mg</b>	1		
<b>metolazone tab 2.5 mg, 5 mg, 10 mg</b>	1		
<b>spironolactone &amp; hydrochlorothiazide tab 25-25 mg (Aldactazide)</b>	1		
<b>spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)</b>	1		
<b>toremide tab 5 mg, 10 mg, 20 mg, 100 mg</b>	1		
<b>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</b>	1		
<b>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)</b>	1		
<b>triamterene &amp; hydrochlorothiazide tab 75-50 mg (Maxzide)</b>	1		
<b>triamterene cap 50 mg, 100 mg (Dyrenium)</b>	1		
<b>VASOPRESSORS</b>			
AUVI-Q - epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	2		
EPINEPHRINE - epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	3		
<b>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)</b>	1		
<b>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)</b>	1		
<b>midodrine hcl tab 2.5 mg, 5 mg, 10 mg</b>	1		
<b>ANTIHYPERLIPIDEMICS</b>			

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<b>atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent) (Lipitor)</b>	1		QL (45 tablets/30 days)
<b>atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)</b>	1		QL (30 tablets/30 days)
<b>cholestyramine light powder packets 4 gm</b>	1		
<b>cholestyramine light powder 4 gm/dose (Questran light)</b>	1		
<b>cholestyramine powder packets 4 gm (Questran)</b>	1		
<b>cholestyramine powder 4 gm/dose (Questran)</b>	1		
<b>choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv) (Trilipix)</b>	1		
<b>colesevelam hcl packet for susp 3.75 gm (Welchol)</b>	1		
<b>colesevelam hcl tab 625 mg (Welchol)</b>	1		
COLESTID - colestipol hcl tab 1 gm	3		
COLESTID - colestipol hcl granules 5 gm	3		
<b>colestipol hcl granule packets 5 gm (Colestid flavored)</b>	1		
<b>colestipol hcl granules 5 gm (Colestid flavored)</b>	1		
<b>colestipol hcl tab 1 gm (Colestid)</b>	1		
<b>ezetimibe tab 10 mg (Zetia)</b>	1		
<b>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)</b>	1		QL (30 tablets/30 days)
<b>fenofibrate micronized cap 43 mg, 67 mg, 130 mg, 134 mg, 200 mg</b>	1		
<b>fenofibrate tab 48 mg, 145 mg (Tricor)</b>	1		
<b>fenofibrate tab 54 mg, 160 mg</b>	1		
<b>fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)</b>	1		QL (60 capsules/30 days)
<b>fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)</b>	1		QL (30 tablets/30 days)
<b>gemfibrozil tab 600 mg (Lopid)</b>	1		
JUXTAPID - lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	3	SP	PA, LD, QL (30 capsules/30 days)
LOPID - gemfibrozil tab 600 mg	3		
<b>lovastatin tab 10 mg, 20 mg, 40 mg</b>	1		QL (60 tablets/30 days)
NEXLETOL - bempedoic acid tab 180 mg	2		PA, QL (30 tablets/30 days)
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	2		PA, QL (30 tablets/30 days)
<b>niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic)</b>	1		
<b>niacin tab er 1000 mg (antihyperlipidemic) (Niaspan)</b>	1		

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<b>omega-3-acid ethyl esters cap 1 gm (Lovaza)</b>	1		
<b>pitavastatin calcium tab 1 mg, 2 mg (Livalo)</b>	1		QL (45 tablets/30 days)
<b>pitavastatin calcium tab 4 mg (Livalo)</b>	1		QL (30 tablets/30 days)
<b>pravastatin sodium tab 10 mg, 20 mg, 40 mg</b>	1		QL (45 tablets/30 days)
<b>pravastatin sodium tab 80 mg</b>	1		QL (30 tablets/30 days)
QUESTRAN - cholestyramine powder 4 gm/dose	3		
QUESTRAN - cholestyramine powder packets 4 gm	3		
QUESTRAN LIGHT - cholestyramine light powder 4 gm/dose	3		
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	2		PA, QL (6 syringes/28 days)
REPATHA PUSHTRONEX SYSTEM - evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	2		PA, QL (2 cartridges/28 days)
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	2		PA, QL (6 pens/28 days)
<b>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg (Crestor)</b>	1		QL (45 tablets/30 days)
<b>rosuvastatin calcium tab 40 mg (Crestor)</b>	1		QL (30 tablets/30 days)
<b>simvastatin tab 5 mg</b>	1		QL (45 tablets/30 days)
<b>simvastatin tab 10 mg, 40 mg (Zocor)</b>	1		QL (45 tablets/30 days)
<b>simvastatin tab 20 mg (Zocor)</b>	1		QL (60 tablets/30 days)
<b>simvastatin tab 80 mg</b>	1		QL (30 tablets/30 days)
TRICOR - fenofibrate tab 48 mg, 145 mg	3		
VASCEPA - icosapent ethyl cap 0.5 gm	2		PA, QL (240 capsules/30 days)
VASCEPA - icosapent ethyl cap 1 gm	2		PA, QL (120 capsules/30 days)
<b>CARDIOVASCULAR AGENTS - MISC.</b>			
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	3	SP	PA, LD, QL (90 tablets/30 days)
<b>ambrisentan tab 5 mg, 10 mg (Letairis)</b>	1	SP	PA, LD, QL (30 tablets/30 days)
BIDIL - isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	3		
<b>bosentan tab 62.5 mg, 125 mg (Tracleer)</b>	1	SP	PA, QL (60 tablets/30 days)
CAMZYOS - mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	3	SP	PA, LD, QL (30 capsules/30 days)
CORLANOR - ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	3		LD
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	2		LD
ENTRESTO - sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	2		QL (60 tablets/30 days)
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	2		QL (240 capsules/30 days)

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<b>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)</b>	1		
<b>ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor)</b>	1		
LETAIRIS - ambrisentan tab 5 mg, 10 mg	3	SP	PA, LD, QL (30 tablets/30 days)
OPSUMIT - macitentan tab 10 mg	2	SP	PA, LD, QL (30 tablets/30 days)
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	3	SP	PA, LD
ORENITRAM TITRATION KIT M - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.25mg&84x1mg	3	SP	PA, LD, QL (1 kit/180 days)
REMODULIN - treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml)	3	SP	PA, LD
<b>sildenafil citrate for suspension 10 mg/ml (Revatio)</b>	1		PA, QL (224 mls/30 days)
<b>sildenafil citrate tab 20 mg (Revatio)</b>	1		PA, QL (90 tablets/30 days)
<b>tadalafil tab 20 mg (pah) (Adcirca)</b>	1	SP	PA, QL (60 tablets/30 days)
TRACLEER - bosentan tab 62.5 mg, 125 mg	3	SP	PA, LD, QL (60 tablets/30 days)
TRACLEER - bosentan tab for oral susp 32 mg	2	SP	PA, LD, QL (120 tablets/30 days)
<b>treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml) (Remodulin)</b>	1	SP	PA
TYVASO - treprostinil inhalation solution 0.6 mg/ml	3	SP	PA, LD, QL (28 ampules/28 days)
TYVASO DPI MAINTENANCE KI - treprostinil inh powder 16 mcg/cartridge, 32 mcg/cartridge, 48 mcg/cartridge, 64 mcg/cartridge	3	SP	PA, LD, QL (112 cartridges/28 days)
TYVASO DPI TITRATION KIT - treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg	3	SP	PA, LD, QL (252 cartridges/180 days)
TYVASO REFILL KIT - treprostinil inhalation solution 0.6 mg/ml	3	SP	PA, LD, QL (28 ampules/28 days)
TYVASO STARTER KIT - treprostinil inhalation solution 0.6 mg/ml	3	SP	PA, LD, QL (1 kit/180 days)
UPTRAVI - selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	2	SP	PA, LD, QL (60 tablets/30 days)
UPTRAVI TITRATION PACK - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	2	SP	PA, LD, QL (1 pack/180 days)
VENTAVIS - iloprost inhalation solution 10 mcg/ml, 20 mcg/ml	2	SP	PA, LD, QL (68 ampules/30 days)
VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	2		PA, QL (30 tablets/30 days)
VYNDAMAX - tafamidis cap 61 mg	2	SP	PA, QL (30 capsules/30 days)
VYNDALOG - tafamidis meglumine (cardiac) cap 20 mg	2	SP	PA, QL (120 capsules/30 days)

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WINREVAIR - sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	3	SP	PA, LD, QL (1 kit/21 days)
<b>ERECTILE DYSFUNCTION</b>			
CIALIS - tadalafil tab 5 mg	3		QL (30 tablets/30 days)
<b>tadalafil tab 2.5 mg, 5 mg (Cialis)</b>	1		QL (30 tablets/30 days)
<b>RESPIRATORY AGENTS</b>			
<b>ANTI-HISTAMINES</b>			
<b>carbinoxamine maleate tab 4 mg</b>	1		
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg	3		
<b>cyproheptadine hcl syrup 2 mg/5ml</b>	1		
<b>cyproheptadine hcl tab 4 mg</b>	1		
<b>desloratadine tab 5 mg (Clarinet)</b>	1		
<b>levocetirizine dihydrochloride tab 5 mg</b>	1		
<b>loratadine oral soln 5 mg/5ml</b>	1		
<b>loratadine rapidly-disintegrating tab 10 mg (Claritin)</b>	1		
<b>loratadine tab 10 mg</b>	1		
<b>promethazine hcl oral soln 6.25 mg/5ml</b>	1		
<b>promethazine hcl suppos 12.5 mg, 25 mg</b>	1		
<b>promethazine hcl tab 12.5 mg, 25 mg, 50 mg</b>	1		
PROMETHEGAN - promethazine hcl suppos 50 mg	3		
<b>NASAL AGENTS - SYSTEMIC and TOPICAL</b>			
<b>azelastine hcl nasal spray 0.1% (137 mcg/spray)</b>	1		
<b>flunisolide nasal soln 25 mcg/act (0.025%)</b>	1		
<b>fluticasone propionate nasal susp 50 mcg/act</b>	1		
<b>ipratropium bromide nasal soln 0.03% (21 mcg/ spray), 0.06% (42 mcg/spray)</b>	1		
<b>olopatadine hcl nasal soln 0.6% (Patanase)</b>	1		
XHANCE - fluticasone propionate nasal exhaler susp 93 mcg/act	3		PA, QL (2 bottles/30 days)
<b>COUGH/COLD/ALLERGY</b>			
<b>acetylcysteine inhal soln 10%, 20%</b>	1		
<b>benzonatate cap 100 mg, 200 mg</b>	1		
HYCODAN - hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	3		
HYCODAN - hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml	3		
<b>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)</b>	1		

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<b>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan)</b>	1		
HYDROCODONE POLISTIREX/CH - hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	2		
HYPERSAL - sodium chloride soln nebu 7%	3		
<b>loratadine &amp; pseudoephedrine tab er 12hr 5-120 mg</b>	1		
<b>loratadine &amp; pseudoephedrine tab er 24hr 10-240 mg</b>	1		
<b>promethazine &amp; phenylephrine syrup 6.25-5 mg/5ml</b>	1		
<b>promethazine w/ codeine syrup 6.25-10 mg/5ml</b>	1		
<b>promethazine-dm syrup 6.25-15 mg/5ml</b>	1		
<b>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</b>	1		
<b>sodium chloride soln nebu 3%, 10%</b>	1		
<b>sodium chloride soln nebu 7% (Hypersal)</b>	1		
<b>ANTIASTHMATIC and BRONCHODILATOR AGENTS</b>			
ACCOLATE - zafirlukast tab 10 mg, 20 mg	3		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	2		QL (1 canister/30 days)
<b>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)</b>	1		QL (2 inhalers/30 days)
<b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</b>	1		
<b>albuterol sulfate syrup 2 mg/5ml</b>	1		
<b>albuterol sulfate tab 2 mg, 4 mg</b>	1		
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	2		QL (1 inhaler/30 days)
<b>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)</b>	1		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	2		QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	2		QL (1 canister/30 days)
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/act (breath activated)	2		QL (1 canister/30 days)
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	2		QL (1 canister/30 days)
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/act (breath activated)	2		QL (1 canister/30 days)
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act	2		QL (2 canisters/30 days)

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BEVESPI AEROSPHERE - glycopyrrolate-formoterol fumarate aerosol 9-4.8 mcg/act	3		QL (1 canister/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	2		QL (1 inhaler/30 days)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	2		QL (1 inhaler/30 days)
BROVANA - arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	3		
<b>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)</b>	1		
<b>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort)</b>	1		PA, QL (3 inhalers/30 days)
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	2		QL (2 canisters/30 days)
<b>cromolyn sodium soln nebu 20 mg/2ml</b>	1		
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	2		QL (3 canisters/30 days)
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	2	SP	PA, LD, QL (1 pen/56 days)
FLUTICASONE PROPIONATE DI - fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/act	2		QL (60 blisters/30 days)
FLUTICASONE PROPIONATE DI - fluticasone propionate aer pow ba 250 mcg/act	2		QL (240 blisters/30 days)
FLUTICASONE PROPIONATE HF - fluticasone propionate hfa inhal aero 44 mcg/act	2		QL (1 canister/30 days)
FLUTICASONE PROPIONATE HF - fluticasone propionate hfa inhal aer 110 mcg/act	2		QL (1 canister/30 days)
FLUTICASONE PROPIONATE HF - fluticasone propionate hfa inhal aer 220 mcg/act	2		QL (2 canisters/30 days)
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	2		QL (1 inhaler/30 days)
<b>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)</b>	1		QL (60 blisters/30 days)
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	2		QL (30 blisters/30 days)
<b>ipratropium bromide inhal soln 0.02%</b>	1		
<b>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</b>	1		
<b>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)</b>	1		

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<b>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)</b>	1		
<b>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)</b>	1		
<b>montelukast sodium tab 10 mg (base equiv) (Singulair)</b>	1		
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml	2	SP	PA, LD, QL (3 pens/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml	2	SP	PA, LD, QL (1 syringe/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 100 mg/ml	2	SP	PA, LD, QL (3 syringes/28 days)
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act	2		QL (1 canister/30 days)
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act	2		QL (2 canisters/30 days)
<b>roflumilast tab 250 mcg, 500 mcg (Daliresp)</b>	1		
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	2		QL (60 blisters/30 days)
SPIRIVA HANDHALER - tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	2		QL (30 capsules/30 days)
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act	2		QL (1 cartridge/30 days)
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	2		QL (1 cartridge/30 days)
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	2		QL (1 cartridge/30 days)
SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	2		QL (3 inhalers/30 days)
<b>terbutaline sulfate tab 2.5 mg, 5 mg</b>	1		
TEZSPIRE - tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	2	SP	PA, LD, QL (1 pen/28 days)
THEO-24 - theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	3		
<b>theophylline elixir 80 mg/15ml</b>	1		
THEOPHYLLINE ER - theophylline tab er 12hr 100 mg, 200 mg	3		
<b>theophylline soln 80 mg/15ml</b>	1		
<b>theophylline tab er 12hr 300 mg, 450 mg</b>	1		
<b>theophylline tab er 24hr 400 mg, 600 mg</b>	1		
<b>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv) (Spiriva handihaler)</b>	1		PA, QL (30 capsules/30 days)

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TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	2		QL (1 inhaler/30 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	2		QL (2 inhalers/30 days)
XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	2	SP	PA, LD
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	2	SP	PA, LD
<b>zafirlukast tab 10 mg, 20 mg (Accolate)</b>	1		
<b>zileuton tab er 12hr 600 mg</b>	1		PA, QL (120 tablets/30 days)
<b>RESPIRATORY AGENTS - MISC.</b>			
BRONCHITOL - mannitol inhal cap 40 mg	3	SP	
BRONCHITOL TOLERANCE TEST - mannitol inhal cap 40 mg	3	SP	
ESBRIET - pirfenidone cap 267 mg	3	SP	PA, LD, QL (180 capsules/30 days)
ESBRIET - pirfenidone tab 267 mg	3	SP	PA, LD, QL (180 tablets/30 days)
ESBRIET - pirfenidone tab 801 mg	3	SP	PA, LD, QL (90 tablets/30 days)
KALYDECO - ivacaftor tab 150 mg	2	SP	PA, LD, QL (60 tablets/30 days)
KALYDECO - ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	2	SP	PA, LD, QL (56 packets/28 days)
OFEV - nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	3	SP	PA, LD, QL (60 capsules/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	3	SP	PA, LD, QL (120 tablets/30 days)
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	3	SP	PA, LD, QL (60 packets/30 days)
PIRFENIDONE - pirfenidone tab 534 mg	3	SP	PA, QL (21 tablets/180 days)
<b>pirfenidone cap 267 mg (Esbriet)</b>	1	SP	PA, QL (180 capsules/30 days)
<b>pirfenidone tab 267 mg (Esbriet)</b>	1	SP	PA, QL (180 tablets/30 days)
<b>pirfenidone tab 801 mg (Esbriet)</b>	1	SP	PA, QL (90 tablets/30 days)
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	2	SP	
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	2	SP	PA, LD, QL (56 tablets/28 days)
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	2	SP	PA, LD, QL (60 tablets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	2	SP	PA, LD, QL (56 packets/28 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	2	SP	PA, LD, QL (56 packets/28 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	2	SP	PA, LD, QL (90 tablets/30 day)

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TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	2	SP	PA, LD, QL (90 tablets/30 days)
<b>GASTROINTESTINAL AGENTS</b>			
<b>LAXATIVES</b>			
GAVILYTE-C - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	3		
GOLYTELY - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	3		
<b>lactulose solution 10 gm/15ml</b>	1		
MOVIPREP - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	3		
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)</b>	1		
<b>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)</b>	1		
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</b>	1		
PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	3		
PLENVU - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 140 gm	3		
<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)</b>	1		
SUFLAVE - peg 3350-kcl-nacl-na sulfate-mag sulfate for soln 178.7 gm	3		
SUPREP BOWEL PREP KIT - sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	3		
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	3		
<b>ANTIDIARRHEALS</b>			
<b>diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)</b>	1		
LOMOTIL - diphenoxylate w/ atropine tab 2.5-0.025 mg	3		
MYTESI - crofelemer tab delayed release 125 mg	3		LD
<b>ULCER DRUGS</b>			
CIMETIDINE HYDROCHLORIDE - cimetidine hcl soln 300 mg/5ml	2		
CUVPOSA - glycopyrrolate oral soln 1 mg/5ml	3		
CYTOTEC - misoprostol tab 100 mcg, 200 mcg	3		
<b>dicyclomine hcl cap 10 mg</b>	1		
<b>dicyclomine hcl oral soln 10 mg/5ml</b>	1		
<b>dicyclomine hcl tab 20 mg</b>	1		
<b>esomeprazole magnesium cap delayed release 40 mg (base eq) (Nexium)</b>	1		QL (30 capsules/30 days)

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<b>esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg (Nexium)</b>	1		QL (30 packets/30 days)
<b>famotidine for susp 40 mg/5ml</b>	1		
<b>famotidine tab 20 mg, 40 mg (Pepcid)</b>	1		
<b>glycopyrrolate oral soln 1 mg/5ml (Cuvposa)</b>	1		
<b>glycopyrrolate tab 1 mg (Robinul)</b>	1		
<b>glycopyrrolate tab 2 mg (Robinul forte)</b>	1		
HELIDAC THERAPY - metronidaz tab-tetracyc cap-bis subsal chew tab therapy pack	3		
<b>lansoprazole cap delayed release 30 mg (Prevacid)</b>	1		QL (60 capsules/30 days)
<b>methscopolamine bromide tab 2.5 mg, 5 mg</b>	1		
<b>misoprostol tab 100 mcg, 200 mcg (Cytotec)</b>	1		
NEXIUM - esomeprazole magnesium for delayed release susp pack 2.5 mg	2		QL (30 packets/30 days)
NEXIUM - esomeprazole magnesium for delayed release susp packet 5 mg	2		QL (30 packets/30 days)
NIZATIDINE - nizatidine cap 150 mg, 300 mg	3		
<b>omeprazole cap delayed release 10 mg, 40 mg</b>	1		QL (60 capsules/30 days)
<b>omeprazole cap delayed release 20 mg</b>	1		
<b>pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)</b>	1		QL (60 tablets/30 days)
<b>pantoprazole sodium for delayed release susp packet 40 mg (Protonix)</b>	1		QL (60 packets/30 days)
<b>rabeprazole sodium ec tab 20 mg (Aciphex)</b>	1		QL (60 tablets/30 days)
<b>sucralfate tab 1 gm (Carafate)</b>	1		
<b>ANTIEMETICS</b>			
AKYNZEO - netupitant-palonosetron cap 300-0.5 mg	3		QL (2 capsules/30 days)
ANZEMET - dolasetron mesylate tab 50 mg	3		QL (7 tablets/30 days)
<b>aprepitant capsule therapy pack 80 &amp; 125 mg (Emend tripack)</b>	1		QL (2 packs/30 days)
<b>aprepitant capsule 40 mg</b>	1		
<b>aprepitant capsule 80 mg (Emend)</b>	1		QL (4 capsules/30 days)
<b>aprepitant capsule 125 mg</b>	1		QL (2 capsules/30 days)
BONJESTA - doxylamine-pyridoxine tab er 20-20 mg	3		PA, QL (60 tablets/30 days)
DICLEGIS - doxylamine-pyridoxine tab delayed release 10-10 mg	3		PA, QL (120 tablets/30 days)
<b>doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)</b>	1		PA, QL (120 tablets/30 days)
<b>dronabinol cap 2.5 mg (Marinol)</b>	1		
<b>dronabinol cap 5 mg, 10 mg</b>	1		
EMEND - aprepitant capsule 80 mg	3		QL (4 capsules/30 days)

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EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)	2		QL (6 packages/30 days)
EMEND TRIPACK - aprepitant capsule therapy pack 80 & 125 mg	3		QL (2 packs/30 days)
<b>granisetron hcl tab 1 mg</b>	1		QL (14 tablets/30 days)
<b>meclizine hcl tab 12.5 mg, 25 mg</b>	1		
ONDANSETRON HCL - ondansetron hcl tab 24 mg	3		QL (1 tablet/30 days)
<b>ondansetron hcl oral soln 4 mg/5ml</b>	1		
<b>ondansetron hcl tab 4 mg, 8 mg</b>	1		
<b>ondansetron orally disintegrating tab 4 mg, 8 mg</b>	1		
SANCUSO - granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	3		ST, QL (2 patches/30 days)
<b>scopolamine td patch 72hr 1 mg/3days (Transderm-scop)</b>	1		
TRANSDERM-SCOP - scopolamine td patch 72hr 1 mg/3days	3		
<b>trimethobenzamide hcl cap 300 mg</b>	1		
VARUBI - rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	2	SP	LD, QL (4 tablets/30 days)
<b>DIGESTIVE AIDS</b>			
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	2		
SUCRAID - sacrosidase soln 8500 unit/ml	3	SP	PA, LD, QL (236 mls/29 days)
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	2		
<b>GASTROINTESTINAL AGENTS- MISC.</b>			
<b>alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)</b>	1		PA, QL (60 tablets/30 days)
AZULFIDINE - sulfasalazine tab 500 mg	3		
AZULFIDINE EN-TABS - sulfasalazine tab delayed release 500 mg	3		
<b>balsalazide disodium cap 750 mg (Colazal)</b>	1		
BYLVAY - odevixibat cap 400 mcg	3	SP	PA, LD, QL (450 capsules/30 days)
BYLVAY - odevixibat cap 1200 mcg	3	SP	PA, LD, QL (150 capsules/30 days)
BYLVAY (PELLETS) - odevixibat pellets cap sprinkle 200 mcg	3	SP	PA, LD, QL (900 capsules/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BYLVAY (PELLETS) - odevoxibat pellets cap sprinkle 600 mcg	3	SP	PA, LD, QL (300 capsules/30 days)
<b>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</b>	1		
<b>calcium acetate (phosphate binder) tab 667 mg</b>	1		
CHENODAL - chenodiol tab 250 mg	2	SP	LD
CHOLBAM - cholic acid cap 50 mg, 250 mg	3	SP	PA, LD
CIMZIA - certolizumab pegol for inj kit 2 x 200 mg	3	SP	PA, QL (2 kits/28 days)
CIMZIA - certolizumab pegol prefilled syringe kit 200 mg/ml	3	SP	PA, QL (2 kits/28 days)
CIMZIA STARTER KIT - certolizumab pegol prefilled syringe kit 200 mg/ml	3	SP	PA, QL (1 kit/180 days)
<b>cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)</b>	1		
DELZICOL - mesalamine cap dr 400 mg	3		
ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	2	SP	PA, LD, QL (2 pens/28 days)
FOSRENOL - lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental)	3		ST
FOSRENOL - lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	3		ST
GATTEX - teduglutide (rdna) for inj kit 5 mg	3	SP	PA, LD, QL (30 vials/30 days)
IQIRVO - elafibranor tab 80 mg	3	SP	PA, LD, QL (30 tablets/30 days)
<b>lactulose (encephalopathy) solution 10 gm/15ml</b>	1		
<b>lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)</b>	1		ST
LINZESS - linaclotide cap 72 mcg, 145 mcg, 290 mcg	2		PA, QL (30 capsules/30 days)
LIVMARLI - maralixibat chloride oral soln 9.5 mg/ml	3	SP	PA, LD, QL (90 mls/30 days)
LIVMARLI - maralixibat chloride oral soln 19 mg/ml	3	SP	PA, LD, QL (60 mls/30 days)
<b>lubiprostone cap 8 mcg (Amitiza)</b>	1		PA, QL (120 capsules/30 days)
<b>lubiprostone cap 24 mcg (Amitiza)</b>	1		PA, QL (60 capsules/30 days)
<b>mesalamine cap dr 400 mg (Delzicol)</b>	1		
<b>mesalamine cap er 24hr 0.375 gm (Apriso)</b>	1		
<b>mesalamine enema 4 gm</b>	1		
<b>mesalamine suppos 1000 mg (Canasa)</b>	1		
<b>mesalamine tab delayed release 800 mg</b>	1		
<b>mesalamine tab delayed release 1.2 gm (Lialda)</b>	1		
<b>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</b>	1		
<b>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)</b>	1		

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MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	2		PA, QL (30 tablets/30 days)
OCALIVA - obeticholic acid tab 5 mg, 10 mg	3	SP	PA, LD, QL (30 tablets/30 days)
OMVOH - mirikizumab-mrkz subcutaneous soln auto-injector 100 mg/ml	2	SP	PA, LD, QL (2 pens/28 days)
OMVOH - mirikizumab-mrkz subcutaneous soln prefilled syringe 100 mg/ml	2	SP	PA, LD, QL (2 syringes/28 days)
REGLAN - metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)	3		
REZDIFFRA - resmetirom 60 mg tab	3	SP	PA, LD, QL (30 tablets/30 days)
REZDIFFRA - resmetirom 80 mg tab	3	SP	PA, LD, QL (30 tablets/30 days)
REZDIFFRA - resmetirom 100 mg tab	3	SP	PA, LD, QL (30 tablets/30 days)
<b>sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)</b>	1		
<b>sevelamer carbonate tab 800 mg (Renvela)</b>	1		
<b>sevelamer hcl tab 400 mg</b>	1		
<b>sevelamer hcl tab 800 mg (Renagel)</b>	1		
SFROWASA - mesalamine sulfite-free (sf) enema 4 gm/60ml	3		
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	2	SP	PA, QL (1 cartridge/56 days)
<b>sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)</b>	1		
<b>sulfasalazine tab 500 mg (Azulfidine)</b>	1		
SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)	2		PA, QL (30 tablets/30 days)
TRULANCE - plecanatide tab 3 mg	2		PA, QL (30 tablets/30 days)
<b>ursodiol cap 300 mg</b>	1		
<b>ursodiol tab 250 mg (Urso 250)</b>	1		
<b>ursodiol tab 500 mg (Urso forte)</b>	1		
VELPHORO - sucroferriic oxyhydroxide chew tab 500 mg	2		ST
VIBERZI - eluxadoline tab 75 mg, 100 mg	2		PA, QL (60 tablets/30 days)
VOWST - fecal microbiota spores, live-brpk caps	3	SP	PA, LD
XERMELO - telotristat ethyl tab 250 mg (as telotristat etiprate)	3	SP	PA, LD
ZYMFENTRA 1-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	3	SP	PA, LD, QL (2 pens/28 days)
ZYMFENTRA 2-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	3	SP	PA, LD, QL (2 pens/28 days)
ZYMFENTRA 2-SYRINGE - infliximab-dyyb soln prefilled syringe kit 120 mg/ml	3	SP	PA, LD, QL (2 syringes/28 days)

### GENITOURINARY AGENTS

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>URINARY ANTISPASMODICS</b>			
<b>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg</b>	1		
<b>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)</b>	1		QL (30 tablets/30 days)
<b>fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz)</b>	1		QL (30 tablets/30 days)
<b>flavoxate hcl tab 100 mg</b>	1		
MYRBETRIQ - mirabegron granules for oral extended release susp 8 mg/ml	2		QL (300 mls/28 days)
MYRBETRIQ - mirabegron tab er 24 hr 25 mg, 50 mg	2		QL (30 tablets/30 days)
<b>oxybutynin chloride solution 5 mg/5ml</b>	1		QL (600 mls/30 days)
<b>oxybutynin chloride tab er 24hr 5 mg (Ditropan xl)</b>	1		QL (30 tablets/30 days)
<b>oxybutynin chloride tab er 24hr 10 mg (Ditropan xl)</b>	1		QL (60 tablets/30 days)
<b>oxybutynin chloride tab er 24hr 15 mg</b>	1		QL (60 tablets/30 days)
<b>oxybutynin chloride tab 5 mg</b>	1		
<b>solifenacin succinate tab 5 mg, 10 mg (Vesicare)</b>	1		QL (30 tablets/30 days)
<b>tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)</b>	1		QL (30 capsules/30 days)
<b>tolterodine tartrate tab 1 mg, 2 mg (Detrol)</b>	1		QL (60 tablets/30 days)
<b>tropium chloride cap er 24hr 60 mg</b>	1		QL (30 capsules/30 days)
<b>tropium chloride tab 20 mg</b>	1		QL (60 tablets/30 days)
VESICARE - solifenacin succinate tab 5 mg, 10 mg	3		QL (30 tablets/30 days)
<b>VAGINAL PRODUCTS</b>			
CLEOCIN - clindamycin phosphate vaginal cream 2%	3		
CLEOCIN - clindamycin phosphate vaginal suppos 100 mg	2		
<b>clindamycin phosphate vaginal cream 2% (Cleocin)</b>	1		
CLINDESSE - clindamycin phosphate (one dose) vaginal cream 2%	3		
CRINONE - progesterone vaginal gel 4%	3		
ENCARE - nonoxynol-9 vaginal suppos 100 mg	3		
ESTRACE - estradiol vaginal cream 0.1 mg/gm	3		
<b>estradiol vaginal cream 0.1 mg/gm (Estrace)</b>	1		
<b>estradiol vaginal tab 10 mcg (Vagifem)</b>	1		
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	2		QL (1 ring/90 days)
GYNAZOLE-1 - butoconazole nitrate (one dose) vaginal cream 2%	3		
IMVEXXY MAINTENANCE PACK - estradiol vaginal insert 4 mcg, 10 mcg	3		QL (8 suppositories/28 days)
IMVEXXY STARTER PACK - estradiol vaginal insert starter pack 4 mcg, 10 mcg	3		QL (18 suppositories/180 days)
INTRAROSA - prasterone vaginal insert 6.5 mg	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>metronidazole vaginal gel 0.75%</b>	1		
MICONAZOLE 3 - miconazole nitrate vaginal suppos 200 mg	3		
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	3		
PHEXXI - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	2		
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	2		
<b>terconazole vaginal cream 0.4%, 0.8%</b>	1		
<b>terconazole vaginal suppos 80 mg</b>	1		
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	3		
VANDAZOLE - metronidazole vaginal gel 0.75%	3		
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	3		
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	3		
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 gel 4%	3		
<b>GENITOURINARY AGENTS - MISC.</b>			
<b>acetic acid irrigation soln 0.25%</b>	1		
<b>alfuzosin hcl tab er 24hr 10 mg (Uroxatral)</b>	1		
CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg	2		LD
<b>dutasteride cap 0.5 mg (Avodart)</b>	1		
<b>dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)</b>	1		
ELMIRON - pentosan polysulfate sodium caps 100 mg	3		PA
FILSPARI - sparsentan tab 200 mg, 400 mg	3	SP	PA, LD, QL (30 tablets/30 days)
<b>finasteride tab 5 mg (Proscar)</b>	1		
K-PHOS NO 2 - potassium & sodium acid phosphates tab 305-700 mg	2		
LITHOSTAT - acetohydroxamic acid tab 250 mg	3		
<b>potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)</b>	1		
<b>potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)</b>	1		
<b>potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)</b>	1		
PROCYSBI - cysteamine bitartrate delayed release granules packet 75 mg, 300 mg	3	SP	PA, LD
PROCYSBI - cysteamine bitartrate cap delayed release 25 mg (base equiv), 75 mg (base equiv)	3	SP	PA, LD
PROSCAR - finasteride tab 5 mg	3		
RAPAFLO - silodosin cap 4 mg, 8 mg	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
RIVFLOZA - nedosiran sodium subcutaneous soln pref syr 128 mg/0.8ml, 160 mg/ml	3	SP	PA, LD, QL (1 syringe/30 days)
RIVFLOZA - nedosiran sodium subcutaneous soln 80 mg/0.5ml	3	SP	PA, LD, QL (2 vials/30 day)
<b>silodosin cap 4 mg, 8 mg (Rapaflo)</b>	1		
<b>sodium chloride irrigation soln 0.9%</b>	1		
<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml</b>	1		
<b>tamsulosin hcl cap 0.4 mg (Flomax)</b>	1		
THIOLA - tiopronin tab 100 mg	3	SP	PA, LD, QL (600 tablets/30 days)
THIOLA EC - tiopronin tab delayed release 100 mg	3	SP	PA, LD, QL (600 tablets/30 days)
THIOLA EC - tiopronin tab delayed release 300 mg	3	SP	PA, LD, QL (180 tablets/30 days)
<b>tiopronin tab delayed release 100 mg (Thiola ec)</b>	1	SP	PA, LD, QL (600 tablets/30 days)
<b>tiopronin tab delayed release 300 mg (Thiola ec)</b>	1	SP	PA, LD, QL (180 tablets/30 days)
<b>tiopronin tab 100 mg (Thiola)</b>	1	SP	PA, LD, QL (600 tablets/30 days)
UROCIT-K 10 - potassium citrate tab er 10 meq (1080 mg)	3		
UROCIT-K 15 - potassium citrate tab er 15 meq (1620 mg)	3		

### CENTRAL NERVOUS SYSTEM DRUGS

#### ANTI-ANXIETY AGENTS

ALPRAZOLAM INTENSOL - alprazolam conc 1 mg/ml	3		
<b>alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	1		
<b>alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)</b>	1		
<b>alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)</b>	1		
<b>bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg</b>	1		
<b>chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg</b>	1		
<b>clorazepate dipotassium tab 3.75 mg, 15 mg</b>	1		
<b>clorazepate dipotassium tab 7.5 mg (Tranxene t)</b>	1		
<b>diazepam conc 5 mg/ml</b>	1		
<b>diazepam oral soln 1 mg/ml</b>	1		
<b>diazepam tab 2 mg, 5 mg, 10 mg (Valium)</b>	1		
<b>hydroxyzine hcl syrup 10 mg/5ml</b>	1		
<b>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg</b>	1		
HYDROXYZINE PAMOATE - hydroxyzine pamoate cap 100 mg	3		
<b>hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)</b>	1		
<b>lorazepam conc 2 mg/ml</b>	1		
<b>lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)</b>	1		
<b>meprobamate tab 200 mg, 400 mg</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>oxazepam cap 10 mg, 15 mg, 30 mg</b>	1		
<b>ANTIDEPRESSANTS</b>			
<b>amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>	1		
<b>amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg</b>	1		
<b>bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)</b>	1		
<b>bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)</b>	1		
<b>bupropion hcl tab 75 mg, 100 mg</b>	1		
<b>citalopram hydrobromide oral soln 10 mg/5ml</b>	1		
<b>citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)</b>	1		
<b>clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)</b>	1		
<b>desipramine hcl tab 10 mg, 25 mg (Norpramin)</b>	1		
<b>desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg</b>	1		
<b>DESVENLAFAXINE ER - desvenlafaxine tab er 24hr 50 mg, 100 mg</b>	3		ST, QL (30 tablets/30 days)
<b>desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)</b>	1		QL (30 tablets/30 days)
<b>doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>	1		
<b>doxepin hcl conc 10 mg/ml</b>	1		
<b>duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)</b>	1		
<b>EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr</b>	3		
<b>escitalopram oxalate soln 5 mg/5ml (base equiv)</b>	1		
<b>escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)</b>	1		
<b>FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)</b>	3		ST, QL (30 capsules/30 days)
<b>FETZIMA TITRATION PACK - levomilnacipran hcl cap er 24hr 20 &amp; 40 mg therapy pack</b>	3		ST, QL (1 pack/180 days)
<b>FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg</b>	3		ST
<b>fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac)</b>	1		
<b>fluoxetine hcl solution 20 mg/5ml</b>	1		

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<b>fluoxetine hcl tab 60 mg (Fluoxetine hydrochloride)</b>	1		
<b>fluvoxamine maleate tab 25 mg, 50 mg</b>	1		QL (30 tablets/30 days)
<b>fluvoxamine maleate tab 100 mg</b>	1		QL (90 tablets/30 days)
<b>imipramine hcl tab 10 mg, 25 mg, 50 mg</b>	1		
MARPLAN - isocarboxazid tab 10 mg	3		
<b>mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab)</b>	1		QL (30 tablets/30 days)
<b>mirtazapine tab 7.5 mg, 45 mg</b>	1		QL (30 tablets/30 days)
<b>mirtazapine tab 15 mg, 30 mg (Remeron)</b>	1		QL (30 tablets/30 days)
NARDIL - phenelzine sulfate tab 15 mg	3		
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3		
NORPRAMIN - desipramine hcl tab 10 mg, 25 mg	3		
<b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)</b>	1		
<b>nortriptyline hcl soln 10 mg/5ml</b>	1		
PAMELOR - nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg	3		
PARNATE - tranylcypromine sulfate tab 10 mg	3		
<b>paroxetine hcl oral susp 10 mg/5ml (base equiv) (Paxil)</b>	1		
<b>paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)</b>	1		
PHENELZINE SULFATE - phenelzine sulfate tab 15 mg	2		
<b>protriptyline hcl tab 5 mg, 10 mg</b>	1		
<b>sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)</b>	1		
<b>sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)</b>	1		
SPRAVATO 56MG DOSE - esketamine hcl nasal soln 28 mg/device x 2 (56 mg dose pack)	3	SP	PA, QL (4 packs/28 days)
SPRAVATO 84MG DOSE - esketamine hcl nasal soln 28 mg/device x 3 (84 mg dose pack)	3	SP	PA, QL (4 packs/28 days)
<b>tranylcypromine sulfate tab 10 mg (Parnate)</b>	1		
<b>trazodone hcl tab 50 mg, 100 mg, 150 mg</b>	1		
<b>trimipramine maleate cap 25 mg, 50 mg, 100 mg</b>	1		
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	3		ST, QL (30 tablets/30 days)
<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)</b>	1		

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<b>venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)</b>	1		
<b>vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)</b>	1		QL (30 tablets/30 days)
ZOLOFT - sertraline hcl oral concentrate for solution 20 mg/ml	3		ST
ZURZUVAE - zuranolone cap 20 mg, 25 mg	3	SP	PA, QL (28 capsules/30 days)
ZURZUVAE - zuranolone cap 30 mg	3	SP	PA, QL (14 capsules/30 days)
<b>ANTIPSYCHOTICS</b>			
ABILIFY ASIMTUFII - aripiprazole im er susp prefilled syringe 720 mg/2.4ml, 960 mg/3.2ml	3	SP	
ABILIFY MAINTENA - aripiprazole im for extended release susp 300 mg, 400 mg	3	SP	
ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 300 mg, 400 mg	3	SP	
<b>aripiprazole oral solution 1 mg/ml</b>	1		QL (750 mls/30 days)
<b>aripiprazole orally disintegrating tab 10 mg, 15 mg</b>	1		QL (60 tablets/30 days)
<b>aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)</b>	1		QL (30 tablets/30 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 441 mg/1.6ml, 662 mg/2.4ml, 882 mg/3.2ml, 1064 mg/3.9ml	3	SP	
ARISTADA INITIO - aripiprazole lauroxil im er susp prefilled syr 675 mg/2.4ml	3	SP	
<b>asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)</b>	1		QL (60 tablets/30 days)
CAPLYTA - lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	3		ST, QL (30 capsules/30 days)
<b>chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</b>	1		
CHLORPROMAZINE HYDROCHLOR - chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	3		
CLOZAPINE ODT - clozapine orally disintegrating tab 12.5 mg	3		
<b>clozapine orally disintegrating tab 25 mg, 100 mg, 150 mg, 200 mg</b>	1		
<b>clozapine tab 25 mg, 50 mg, 100 mg, 200 mg (Clozaril)</b>	1		
EQUETRO - carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	3		
FANAPT - iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3		ST, QL (60 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FANAPT TITRATION PACK - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	3		ST, QL (1 pack/180 days)
<b>fluphenazine decanoate inj 25 mg/ml</b>	1	SP	
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	2		
<b>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</b>	1		
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml	2		
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl inj 2.5 mg/ml	3	SP	
GEODON - ziprasidone mesylate for inj 20 mg (base equivalent)	3	SP	
HALDOL DECANOATE 100 - haloperidol decanoate im soln 100 mg/ml	3	SP	
HALDOL DECANOATE 50 - haloperidol decanoate im soln 50 mg/ml	3	SP	
<b>haloperidol decanoate im soln 50 mg/ml (Haldol decanoate 50)</b>	1	SP	
<b>haloperidol decanoate im soln 100 mg/ml (Haldol decanoate 100)</b>	1	SP	
<b>haloperidol lactate oral conc 2 mg/ml</b>	1		
<b>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg</b>	1		
INVEGA - paliperidone tab er 24hr 3 mg, 9 mg	3		ST, QL (30 tablets/30 days)
INVEGA - paliperidone tab er 24hr 6 mg	3		ST, QL (60 tablets/30 days)
INVEGA HAFYERA - paliperidone palmitate er susp pref syr 1,092 mg/3.5ml, 1,560 mg/5ml	3	SP	
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 39 mg/0.25ml, 78 mg/0.5ml, 117 mg/0.75ml, 156 mg/ml, 234 mg/1.5ml	3	SP	
INVEGA TRINZA - paliperidone palmitate er susp pref syr 273 mg/0.88ml, 410 mg/1.32ml, 546 mg/1.75ml, 819 mg/2.63ml	3	SP	
LITHIUM CARBONATE - lithium carbonate cap 150 mg, 300 mg, 600 mg	3		
<b>lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate)</b>	1		
<b>lithium carbonate tab er 300 mg (Lithobid)</b>	1		
<b>lithium carbonate tab er 450 mg</b>	1		
<b>lithium carbonate tab 300 mg</b>	1		
<b>lithium oral solution 8 meq/5ml</b>	1		
LITHOBID - lithium carbonate tab er 300 mg	3		
<b>loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg</b>	1		

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<b>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg (Latuda)</b>	1		QL (30 tablets/30 days)
<b>lurasidone hcl tab 80 mg (Latuda)</b>	1		QL (60 tablets/30 days)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	3		
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)	3	SP	PA, LD, QL (30 capsules/30 days)
NUPLAZID - pimavanserin tartrate tab 10 mg (base equivalent)	3	SP	PA, LD, QL (30 tablets/30 days)
<b>olanzapine for im inj 10 mg (Zyprexa)</b>	1	SP	
<b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)</b>	1		QL (30 tablets/30 days)
<b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)</b>	1		QL (30 tablets/30 days)
<b>paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg (Invega)</b>	1		QL (30 tablets/30 days)
<b>paliperidone tab er 24hr 6 mg (Invega)</b>	1		QL (60 tablets/30 days)
<b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg</b>	1		
PERSERIS - risperidone subcutaneous for er susp prefilled syr 90 mg, 120 mg	3	SP	
<b>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</b>	1		
<b>prochlorperazine suppos 25 mg</b>	1		
QUETIAPINE FUMARATE - quetiapine fumarate tab 150 mg	3		ST, QL (30 tablets/30 days)
<b>quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg (Seroquel xr)</b>	1		QL (60 tablets/30 days)
<b>quetiapine fumarate tab er 24hr 150 mg, 200 mg (Seroquel xr)</b>	1		QL (30 tablets/30 days)
<b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg (Seroquel)</b>	1		QL (90 tablets/30 days)
<b>quetiapine fumarate tab 300 mg, 400 mg (Seroquel)</b>	1		QL (60 tablets/30 days)
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	2		QL (30 tablets/30 days)
RISPERDAL CONSTA - risperidone microspheres for im extended rel susp 12.5 mg, 25 mg, 37.5 mg, 50 mg	3	SP	
<b>risperidone microspheres for im extended rel susp 12.5 mg, 25 mg, 37.5 mg, 50 mg (Risperdal consta)</b>	1	SP	
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	3		ST, QL (60 tablets/30 days)
<b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg</b>	1		QL (60 tablets/30 days)
<b>risperidone orally disintegrating tab 4 mg</b>	1		QL (120 tablets/30 days)
<b>risperidone soln 1 mg/ml (Risperdal)</b>	1		QL (480 mls/30 days)

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<b>risperidone tab 0.25 mg</b>	1		QL (60 tablets/30 days)
<b>risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg (Risperdal)</b>	1		QL (60 tablets/30 days)
<b>risperidone tab 4 mg (Risperdal)</b>	1		QL (120 tablets/30 days)
RYKINDO - risperidone for im extended release suspension 25 mg, 37.5 mg, 50 mg	3	SP	
SAPHRIS - asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)	3		ST, QL (60 tablets/30 days)
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	3		ST, QL (30 patches/30 days)
<b>thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</b>	1		
<b>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg</b>	1		
<b>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>	1		
UZEDY - risperidone subcutaneous er susp pref syr 50 mg/0.14ml, 75 mg/0.21ml, 100 mg/0.28ml, 125 mg/0.35ml, 150 mg/0.42ml, 200 mg/0.56ml, 250 mg/0.7ml	3	SP	
VERSACLOZ - clozapine susp 50 mg/ml	3		ST, QL (540 mls/30 days)
VRAYLAR - cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	2		QL (30 capsules/30 days)
<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)</b>	1		QL (60 capsules/30 days)
<b>ziprasidone mesylate for inj 20 mg (base equivalent) (Geodon)</b>	1	SP	
ZYPREXA - olanzapine for im inj 10 mg	3	SP	
ZYPREXA RELPREVV - olanzapine pamoate for extended rel im susp 210 mg (base eq), 300 mg (base eq), 405 mg (base eq)	3	SP	
<b>HYPNOTICS</b>			
BELSOMRA - suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	3		ST, QL (30 tablets/30 days)
<b>doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)</b>	1		QL (30 tablets/30 days)
<b>estazolam tab 1 mg, 2 mg</b>	1		
<b>eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)</b>	1		QL (30 tablets/30 days)
HETLIOZ LQ - tasimelteon oral susp 4 mg/ml	3	SP	PA, LD, QL (158 mls/30 days)
<b>phenobarbital elixir 20 mg/5ml</b>	1		
<b>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg</b>	1		
QUVIVIQ - daridorexant hcl tab 25 mg, 50 mg	2		ST, QL (30 tablets/30 days)

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<b>ramelteon tab 8 mg (Rozerem)</b>	1		QL (30 tablets/30 days)
ROZEREM - ramelteon tab 8 mg	3		ST, QL (30 tablets/30 days)
SILENOR - doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	3		ST, QL (30 tablets/30 days)
<b>tasimelteon capsule 20 mg (Hetlioz)</b>	1	SP	PA, QL (30 capsules/30 days)
<b>temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg (Restoril)</b>	1		
<b>zaleplon cap 5 mg, 10 mg</b>	1		QL (30 capsules/30 days)
<b>zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr)</b>	1		QL (30 tablets/30 days)
<b>zolpidem tartrate tab 5 mg, 10 mg (Ambien)</b>	1		QL (30 tablets/30 days)
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>			
ADDERALL - amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg	3		QL (60 tablets/30 days)
ADDERALL - amphetamine-dextroamphetamine tab 20 mg	3		QL (90 tablets/30 days)
ADDERALL XR - amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg	3		QL (30 capsules/30 days)
ADDERALL XR - amphetamine-dextroamphetamine cap er 24hr 20 mg, 25 mg, 30 mg	3		QL (60 capsules/30 days)
<b>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg (Adderall xr)</b>	1		QL (30 capsules/30 days)
<b>amphetamine-dextroamphetamine cap er 24hr 20 mg, 25 mg, 30 mg (Adderall xr)</b>	1		QL (60 capsules/30 days)
<b>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg (Adderall)</b>	1		QL (60 tablets/30 days)
<b>amphetamine-dextroamphetamine tab 20 mg (Adderall)</b>	1		QL (90 tablets/30 days)
<b>armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)</b>	1		QL (30 tablets/30 days)
<b>atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv) (Strattera)</b>	1		QL (60 capsules/30 days)
<b>atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)</b>	1		QL (30 capsules/30 days)
AZSTARYS - serdexmethylphenidate-dexmethylphenidate cap 26.1-5.2 mg, 39.2-7.8 mg, 52.3-10.4 mg	2		QL (30 capsules/30 days)
<b>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</b>	1		
<b>clonidine hcl tab er 12hr 0.1 mg (Kapvay)</b>	1		QL (120 tablets/30 days)
CONCERTA - methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg	3		QL (30 tablets/30 days)

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CONCERTA - methylphenidate hcl tab er osmotic release (osm) 36 mg	3		QL (60 tablets/30 days)
DESOXYN - methamphetamine hcl tab 5 mg	3		QL (150 tablets/30 days)
<b>dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)</b>	1		QL (30 capsules/30 days)
<b>dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)</b>	1		QL (60 tablets/30 days)
<b>dextroamphetamine sulfate cap er 24hr 5 mg</b>	1		QL (90 capsules/30 days)
<b>dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)</b>	1		QL (120 capsules/30 days)
<b>dextroamphetamine sulfate oral solution 5 mg/5ml</b>	1		QL (1800 mls/30 days)
<b>dextroamphetamine sulfate tab 5 mg</b>	1		QL (90 tablets/30 days)
<b>dextroamphetamine sulfate tab 10 mg</b>	1		QL (180 tablets/30 days)
FOCALIN - dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	3		QL (60 tablets/30 days)
<b>guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)</b>	1		QL (30 tablets/30 days)
IMCIVREE - setmelanotide acetate subcutaneous soln 10 mg/ml	3	SP	PA, LD, QL (10 vials/30 days)
<b>lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)</b>	1		QL (30 capsules/30 days)
<b>lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)</b>	1		QL (30 tablets/30 days)
METADATE CD - methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	3		QL (30 capsules/30 days)
<b>methamphetamine hcl tab 5 mg (Desoxyn)</b>	1		QL (150 tablets/30 days)
METHYLIN - methylphenidate hcl soln 5 mg/5ml	3		QL (450 mls/30 days)
METHYLIN - methylphenidate hcl soln 10 mg/5ml	3		QL (900 mls/30 days)
<b>methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)</b>	1		QL (30 capsules/30 days)
<b>methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)</b>	1		QL (30 capsules/30 days)
<b>methylphenidate hcl chew tab 2.5 mg, 5 mg</b>	1		QL (90 tablets/30 days)
<b>methylphenidate hcl chew tab 10 mg</b>	1		QL (180 tablets/30 days)
<b>methylphenidate hcl soln 5 mg/5ml (Methylin)</b>	1		QL (450 mls/30 days)
<b>methylphenidate hcl soln 10 mg/5ml (Methylin)</b>	1		QL (900 mls/30 days)
<b>methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg (Concerta)</b>	1		QL (30 tablets/30 days)

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<b>methylphenidate hcl tab er osmotic release (osm) 36 mg (Concerta)</b>	1		QL (60 tablets/30 days)
<b>methylphenidate hcl tab er 10 mg, 20 mg</b>	1		QL (90 tablets/30 days)
<b>methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)</b>	1		QL (90 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 18 mg	3		QL (30 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 27 mg, 54 mg	2		QL (30 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 36 mg	2		QL (60 tablets/30 days)
<b>modafinil tab 100 mg, 200 mg (Provigil)</b>	1		QL (30 tablets/30 days)
QELBREE - viloxazine hcl cap er 24hr 100 mg	2		QL (30 capsules/30 days)
QELBREE - viloxazine hcl cap er 24hr 150 mg	2		QL (60 capsules/30 days)
QELBREE - viloxazine hcl cap er 24hr 200 mg	2		QL (90 capsules/30 days)
QUILLICHEW ER - methylphenidate hcl chew tab extended release 20 mg, 40 mg	3		QL (30 tablets/30 days)
QUILLICHEW ER - methylphenidate hcl chew tab extended release 30 mg	3		QL (60 tablets/30 days)
QUILLIVANT XR - methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	3		QL (360 mls/30 days)
RITALIN - methylphenidate hcl tab 5 mg, 10 mg, 20 mg	3		QL (90 tablets/30 days)
SUNOSI - solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	2		PA, QL (30 tablets/30 days)
VYVANSE - lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	3		QL (30 capsules/30 days)
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	3		QL (30 tablets/30 days)
WAKIX - pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	3	SP	PA, LD, QL (60 tablets/30 days)
<b>PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.</b>			
<b>acamprosate calcium tab delayed release 333 mg</b>	1		
AUBAGIO - teriflunomide tab 7 mg, 14 mg	3	SP	PA, LD, QL (30 tablets/30 days)
AUSTEDO - deutetrabenazine tab 6 mg	3	SP	PA, QL (60 tablets/30 days)
AUSTEDO - deutetrabenazine tab 9 mg, 12 mg	3	SP	PA, QL (120 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 6 mg, 12 mg, 18 mg, 30 mg, 36 mg, 42 mg, 48 mg	3	SP	PA, QL (30 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 24 mg	3	SP	PA, QL (60 tablets/30 days)
AUSTEDO XR PATIENT TITRAT - deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	3	SP	PA, QL (1 kit/180 days)
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)

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AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
BETASERON - interferon beta-1b for inj kit 0.3 mg	2	SP	PA, QL (1 kit/28 days)
<b>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</b>	1		
CHLORDIAZEPOXIDE/AMITRIPT - chlordiazepoxide- amitriptyline tab 5-12.5 mg, 10-25 mg	3		
<b>dalfampridine tab er 12hr 10 mg (Ampyra)</b>	1		PA, QL (60 tablets/30 days)
<b>dimethyl fumarate capsule delayed release 120 mg (Tecfidera)</b>	1	SP	QL (14 capsules/180 days)
<b>dimethyl fumarate capsule delayed release 240 mg (Tecfidera)</b>	1	SP	QL (60 capsules/30 days)
<b>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg (Tecfidera starter pa)</b>	1	SP	QL (1 pack/180 days)
<b>disulfiram tab 250 mg, 500 mg</b>	1		
<b>donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg</b>	1		
<b>donepezil hydrochloride tab 5 mg, 10 mg, 23 mg (Aricept)</b>	1		
ERGOLOID MESYLATES - ergoloid mesylates tab 1 mg	3		
EXELON - rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr	3		
<b> fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)</b>	1	SP	QL (30 capsules/30 days)
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml	3		
<b>galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)</b>	1		
<b>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg</b>	1		
<b>glatiramer acetate soln prefilled syringe 20 mg/ml (Copaxone)</b>	1	SP	QL (30 syringes/30 days)
<b>glatiramer acetate soln prefilled syringe 40 mg/ml (Copaxone)</b>	1	SP	QL (12 syringes/28 days)
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	3	SP	PA, LD, QL (28 capsules/180 days)
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	3	SP	PA, LD, QL (30 capsules/30 days)
INGREZZA - valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	3	SP	PA, LD, QL (30 capsules/30 days)
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	2	SP	PA, QL (1 pen/28 days)
<b>lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)</b>	1		PA, QL (228 tablets/180 days)

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LUCEMYRA - lofexidine hcl tab 0.18 mg (base equivalent)	3		PA, QL (228 tablets/180 days)
LUMRYZ - sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	3	SP	PA, LD, QL (30 packets/30 days)
LUMRYZ STARTER PACK - sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak	3	SP	PA, LD, QL (28 packets/180 days)
LYBALVI - olanzapine-samidorpham l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	3		ST, QL (30 tablets/30 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs), 10 mg (8 tabs)	2	SP	PA, LD, QL (8 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (5 tabs)	2	SP	PA, LD, QL (10 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (6 tabs)	2	SP	PA, LD, QL (12 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (7 tabs)	2	SP	PA, LD, QL (14 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (9 tabs)	2	SP	PA, LD, QL (9 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (10 tabs)	2	SP	PA, LD, QL (20 tablets/301 days)
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)	2	SP	PA, LD, QL (120 tablets/30 days)
MAYZENT - siponimod fumarate tab 1 mg (base equiv), 2 mg (base equiv)	2	SP	PA, LD, QL (30 tablets/30 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	2	SP	PA, LD, QL (7 tablets/180 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	2	SP	PA, LD, QL (12 tablets/180 days)
<b>memantine hcl oral solution 2 mg/ml</b>	1		
<b>memantine hcl tab 5 mg, 10 mg (Namenda)</b>	1		
<b>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack (Namenda titration pa)</b>	1		
<b>nicotine polacrilex gum 2 mg, 4 mg</b>	1		
<b>nicotine polacrilex lozenge 2 mg, 4 mg</b>	1		
<b>nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr</b>	1		
NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)	2		
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	2		
NUEDEXTA - dextromethorphan hbr-quinidine sulfate cap 20-10 mg	3		PA, QL (60 capsules/30 days)
<b>paroxetine mesylate cap 7.5 mg (base equiv)</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PERPHENAZINE/AMITRIPTYLIN - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	3		
PIMOZIDE - pimozide tab 1 mg, 2 mg	3		
PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	2	SP	PA, LD, QL (2 pens/28 days)
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	2	SP	PA, LD, QL (2 syringes/28 days)
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	2	SP	PA, LD, QL (2 syringes/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	2	SP	PA, LD, QL (1 kit/180 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	2	SP	PA, LD, QL (1 kit/180 days)
PONVORY - ponesimod tab 20 mg	3	SP	PA, LD, QL (30 tablets/30 days)
PONVORY 14-DAY STARTER PA - ponesimod tab starter pack 2,3,4,5,6,7,8,9 & 10 mg	3	SP	PA, QL (14 tablets/180 days)
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	2	SP	PA, QL (12 syringes/28 days)
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	2	SP	PA, QL (12 syringes/28 days)
REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
<b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</b>	1		
<b>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)</b>	1		
SAVELLA - milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	3		ST, QL (60 tablets/30 days)
SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	3		ST, QL (1 pack/180 days)
SODIUM OXYBATE - sodium oxybate oral solution 500 mg/ml	3	SP	PA, LD, QL (540 ml/30 days)
TASCENSO ODT - fingolimod lauryl sulfate tablet disintegrating 0.25 mg	2	SP	PA, LD, QL (30 tablets/30 days)
<b>teriflunomide tab 7 mg, 14 mg (Aubagio)</b>	1	SP	QL (30 tablets/30 days)
<b>tetrabenazine tab 12.5 mg (Xenazine)</b>	1	SP	PA, QL (240 tablets/30 days)
<b>tetrabenazine tab 25 mg (Xenazine)</b>	1	SP	PA, QL (120 tablets/30 days)
<b>varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)</b>	1		

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<b>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</b>	1		
WAINUA - eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	3	SP	PA, LD, QL (1 pen/28 days)
XYWAV - calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	3	SP	PA, LD, QL (540 mls/30 days)
ZEPOSIA - ozanimod hcl cap 0.92 mg	2	SP	PA, QL (30 capsules/30 days)
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	2	SP	PA, QL (28 capsules/180 days)
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	2	SP	PA, QL (7 capsules/180 days)

**ANALGESICS AND ANESTHETICS****ANALGESICS - NON-NARCOTIC**

<b>aspirin chew tab 81 mg</b>	1		
<b>aspirin tab delayed release 81 mg</b>	1		
<b>butalbital-acetaminophen cap 50-300 mg (Butalbital/acetamino)</b>	1		QL (180 capsules/30 days)
<b>butalbital-acetaminophen tab 50-325 mg</b>	1		QL (180 tablets/30 days)
<b>butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic)</b>	1		QL (180 tablets/30 days)
<b>butalbital-aspirin-caffeine cap 50-325-40 mg</b>	1		QL (180 capsules/30 days)
<b>diflunisal tab 500 mg</b>	1		
TENCON - butalbital-acetaminophen tab 50-325 mg	3		QL (180 tablets/30 days)

**ANALGESICS - NARCOTIC**

<b>acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)</b>	1		PA, QL (360 tablets/30 days)
<b>acetaminophen w/ codeine tab 300-30 mg</b>	1		PA, QL (360 tablets/30 days)
<b>acetaminophen w/ codeine tab 300-60 mg</b>	1		PA, QL (180 tablets/30 days)
ACETAMINOPHEN/CODEINE - acetaminophen w/ codeine soln 120-12 mg/5ml	2		PA, QL (2700 mls/30 days)
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	2		PA, QL (60 films/30 days)
BRIXADI - buprenorphine extended release soln pref syr 64 mg/0.18ml, 96 mg/0.27ml, 128 mg/0.36ml	3	SP	PA, LD, QL (1 syringe/28 days)
BRIXADI - buprenorphine ext rel soln pref syr (weekly) 8 mg/0.16ml, (weekly) 24 mg/0.48ml, (weekly) 32 mg/0.64ml	3	SP	PA, LD, QL (4 syringes/28 days)
BRIXADI - buprenorphine ext rel soln pref syr (weekly) 16 mg/0.32ml	3	SP	PA, LD, QL (4 syringes/28 day)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)</b>	1		QL (90 tablets/30 days)
<b>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (Suboxone)</b>	1		QL (120 films/30 days)
<b>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv), 12-3 mg (base equiv) (Suboxone)</b>	1		QL (60 films/30 days)
<b>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (Suboxone)</b>	1		QL (90 films/30 days)
<b>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</b>	1		QL (120 tablets/30 days)
<b>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</b>	1		QL (90 tablets/30 days)
<b>buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)</b>	1		PA, QL (4 patches/28 days)
<b>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</b>	1		PA, QL (180 capsules/30 days)
<b>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</b>	1		PA, QL (180 capsules/30 days)
<b>butorphanol tartrate nasal soln 10 mg/ml</b>	1		PA, QL (2 bottles/30 days)
CODEINE SULFATE - codeine sulfate tab 15 mg, 30 mg, 60 mg	3		PA, QL (180 tablets/30 days)
<b>codeine sulfate tab 30 mg (Codeine sulfate)</b>	1		PA, QL (180 tablets/30 days)
DILAUDID - hydromorphone hcl liqd 1 mg/ml	3		PA, QL (1440 mls/30 days)
FENTANYL CITRATE ORAL TRA - fentanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1600 mcg	2		PA, QL (120 lozenges/30 days)
<b>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</b>	1		PA, QL (15 patches/30 days)
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	3		PA, QL (60 capsules/30 days)
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen tab 2.5-325 mg	3		PA, QL (360 tablets/30 days)
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen soln 10-325 mg/15ml	3		PA, QL (2700 mls/30 days)
<b>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</b>	1		PA, QL (3600 mls/30 days)
<b>hydrocodone-acetaminophen tab 10-325 mg, 7.5-325 mg</b>	1		PA, QL (180 tablets/30 days)
<b>hydrocodone-acetaminophen tab 5-325 mg</b>	1		PA, QL (360 tablets/30 days)
<b>hydrocodone-ibuprofen tab 7.5-200 mg</b>	1		PA, QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg	3		PA, QL (150 tablets/30 days)
<b>hydromorphone hcl liqd 1 mg/ml (Dilaudid)</b>	1		PA, QL (1440 mls/30 days)

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<b>hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg</b>	1		PA, QL (30 tablets/30 days)
<b>hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)</b>	1		PA, QL (180 tablets/30 days)
<b>levorphanol tartrate tab 2 mg</b>	1		PA, QL (120 tablets/30 days)
MEPERIDINE HCL - meperidine hcl oral soln 50 mg/5ml	3		PA, QL (2400 mls/30 days)
METHADONE HCL - methadone hcl soln 5 mg/5ml	3		PA, QL (900 mls/30 days)
METHADONE HCL - methadone hcl soln 10 mg/5ml	3		PA, QL (450 mls/30 days)
<b>methadone hcl conc 10 mg/ml (Methadose)</b>	1		PA, QL (90 mls/30 days)
<b>methadone hcl soln 5 mg/5ml (Methadone hcl)</b>	1		PA, QL (900 mls/30 days)
<b>methadone hcl soln 10 mg/5ml (Methadone hcl)</b>	1		PA, QL (450 mls/30 days)
<b>methadone hcl tab for oral susp 40 mg</b>	1		PA, QL (90 tablets/30 days)
<b>methadone hcl tab 5 mg, 10 mg</b>	1		PA, QL (90 tablets/30 days)
METHADOSE - methadone hcl conc 10 mg/ml	3		PA, QL (90 mls/30 days)
METHADOSE SUGAR-FREE - methadone hcl conc 10 mg/ml	3		PA, QL (90 mls/30 days)
MORPHINE SULFATE - morphine sulfate tab 15 mg	3		PA, QL (240 tablets/30 days)
MORPHINE SULFATE - morphine sulfate tab 30 mg	3		PA, QL (180 tablets/30 days)
MORPHINE SULFATE - morphine sulfate oral soln 10 mg/5ml	3		PA, QL (2700 mls/30 day)
MORPHINE SULFATE - morphine sulfate oral soln 20 mg/5ml	2		PA, QL (1350 mls/30 days)
MORPHINE SULFATE - morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	3		PA, QL (270 mls/30 days)
MORPHINE SULFATE ER - morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	3		PA, QL (30 capsules/30 days)
<b>morphine sulfate oral soln 10 mg/5ml (Morphine sulfate)</b>	1		PA, QL (2700 mls/30 days)
<b>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</b>	1		PA, QL (270 mls/30 days)
<b>morphine sulfate tab er 15 mg, 30 mg, 60 mg (Ms contin)</b>	1		PA, QL (120 tablets/30 days)
<b>morphine sulfate tab er 100 mg, 200 mg (Ms contin)</b>	1		PA, QL (180 tablets/30 days)
<b>morphine sulfate tab 15 mg (Morphine sulfate)</b>	1		PA, QL (240 tablets/30 days)
<b>morphine sulfate tab 30 mg (Morphine sulfate)</b>	1		PA, QL (180 tablets/30 days)
NUCYNTA ER - tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3		PA, QL (60 tablets/30 days)
<b>oxycodone hcl cap 5 mg</b>	1		PA, QL (360 capsules/30 days)
<b>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</b>	1		PA, QL (270 mls/30 days)
<b>oxycodone hcl soln 5 mg/5ml</b>	1		PA, QL (5400 mls/30 days)
<b>oxycodone hcl tab 5 mg (Roxicodone)</b>	1		PA, QL (360 tablets/30 days)
<b>oxycodone hcl tab 10 mg</b>	1		PA, QL (180 tablets/30 days)
<b>oxycodone hcl tab 15 mg, 30 mg (Roxicodone)</b>	1		PA, QL (120 tablets/30 days)

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<b>oxycodone hcl tab 20 mg</b>	1		PA, QL (120 tablets/30 days)
OXYCODONE HYDROCHLORIDE/A - oxycodone w/ acetaminophen soln 5-325 mg/5ml	3		PA, QL (1800 mls/30 days)
<b>oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg (Percocet)</b>	1		PA, QL (360 tablets/30 days)
<b>oxycodone w/ acetaminophen tab 7.5-325 mg (Percocet)</b>	1		PA, QL (240 tablets/30 days)
<b>oxycodone w/ acetaminophen tab 10-325 mg (Percocet)</b>	1		PA, QL (180 tablets/30 days)
OXYCODONE/ACETAMINOPHEN - oxycodone w/ acetaminophen tab 2.5-300 mg	3		PA, QL (360 tablets/30 days)
<b>pentazocine w/ naloxone hcl tab 50-0.5 mg</b>	1		PA, QL (360 tablets/30 days)
SUBLOCADE - buprenorphine extended release soln pref syr 100 mg/0.5ml	3	SP	PA, LD, QL (1 syringe/28 days)
SUBLOCADE - buprenorphine extended release soln pref syr 300 mg/1.5ml	3	SP	PA, LD, QL (2 syringe/180 days)
<b>tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg</b>	1		PA, QL (30 tablets/30 days)
<b>tramadol hcl tab 50 mg (Ultram)</b>	1		PA, QL (240 tablets/30 days)
<b>tramadol-acetaminophen tab 37.5-325 mg (Ultracet)</b>	1		PA, QL (240 tablets/30 days)
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	2		PA, QL (180 capsules/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 11.4-2.9 mg (base eq)	3		QL (30 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 1.4-0.36 mg (base eq)	3		QL (90 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 8.6-2.1 mg (base eq)	3		QL (60 tablets/30 days)
<b>ANALGESICS - ANTI-INFLAMMATORY</b>			
ADALIMUMAB-AATY 1-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	2	SP	PA, QL (2 pens/28 days)
ADALIMUMAB-AATY 2-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	2	SP	PA, QL (2 pens/28 days)
ADALIMUMAB-AATY 2-SYRINGE - adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	2	SP	PA, QL (2 syringes/28 days)
ADALIMUMAB-ADAZ - adalimumab-adaz soln auto-injector 40 mg/0.4ml	2	SP	PA, QL (2 pens/28 days)
ADALIMUMAB-ADAZ - adalimumab-adaz soln prefilled syringe 40 mg/0.4ml	2	SP	PA, QL (2 syringes/28 days)
ANAPROX DS - naproxen sodium tab 550 mg	3		
ARCALYST - riloncept for inj 220 mg	2	SP	PA, LD, QL (4 vials/28 days)
<b>celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)</b>	1		

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DAYPRO - oxaprozin tab 600 mg	3		
<b>diclofenac potassium tab 50 mg</b>	1		
<b>diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg</b>	1		
<b>diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)</b>	1		
<b>diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)</b>	1		
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	2	SP	PA, QL (8 vials/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	2	SP	PA, QL (8 syringes/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	2	SP	PA, QL (4 syringes/28 days)
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	2	SP	PA, QL (4 cartridges/28 days)
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	2	SP	PA, QL (4 pens/28 days)
<b>etodolac cap 200 mg, 300 mg</b>	1		
<b>etodolac tab er 24hr 400 mg, 500 mg, 600 mg</b>	1		
<b>etodolac tab 400 mg (Lodine)</b>	1		
<b>etodolac tab 500 mg</b>	1		
<b>fenoprofen calcium tab 600 mg (Nalfon)</b>	1		
FLURBIPROFEN - flurbiprofen tab 50 mg	3		
<b>flurbiprofen tab 100 mg</b>	1		
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	2	SP	PA, QL (2 syringes/28 days)
HADLIMA PUSH TOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	2	SP	PA, QL (2 pens/28 days)
HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.8ml, 40 mg/0.4ml	2	SP	PA, QL (2 syringes/28 days)
HUMIRA PEN - adalimumab auto-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	2	SP	PA, QL (2 pens/28 days)
HUMIRA PEN-CD/UC/HS START - adalimumab auto-injector kit 80 mg/0.8ml	2	SP	PA, QL (1 kit/180 days)
HUMIRA PEN-PS/UV STARTER - adalimumab auto-injector kit 80 mg/0.8ml & 40 mg/0.4ml	2	SP	PA, QL (1 kit/180 days)
<b>ibuprofen tab 400 mg, 600 mg, 800 mg</b>	1		
<b>indomethacin cap er 75 mg</b>	1		
<b>indomethacin cap 25 mg, 50 mg</b>	1		
<b>ketorolac tromethamine tab 10 mg</b>	1		QL (20 tablets/5 days)
KEVZARA - sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	3	SP	PA, QL (2 pens/28 days)

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KEVZARA - sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	3	SP	PA, QL (2 syringes/28 days)
KINERET - anakinra subcutaneous soln prefilled syringe 100 mg/0.67ml	3	SP	PA, LD, QL (30 syringes/30 days)
<b>leflunomide tab 10 mg, 20 mg (Arava)</b>	1		
LODINE - etodolac tab 400 mg	3		
MECLOFENAMATE SODIUM - meclufenamate sodium cap 50 mg, 100 mg	3		
MELOXICAM - meloxicam susp 7.5 mg/5ml	3		
<b>meloxicam tab 7.5 mg, 15 mg</b>	1		
<b>nabumetone tab 500 mg, 750 mg</b>	1		
NAPROSYN - naproxen tab 500 mg	3		
<b>naproxen sodium tab 275 mg</b>	1		
<b>naproxen sodium tab 550 mg (Anaprox ds)</b>	1		
<b>naproxen tab 250 mg, 375 mg</b>	1		
<b>naproxen tab 500 mg (Naprosyn)</b>	1		
OLUMIANT - baricitinib tab 1 mg, 2 mg, 4 mg	3	SP	PA, LD, QL (30 tablets/30 days)
ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	3	SP	PA, QL (4 syringes/28 days)
ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	3	SP	PA, QL (4 pens/28 days)
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	2	SP	PA, QL (1 kit/180 days)
OTEZLA - apremilast tab 20 mg, 30 mg	2	SP	PA, QL (60 tablets/30 days)
OTREXUP - methotrexate soln pf auto-injector 10 mg/0.4ml, 12.5 mg/0.4ml, 15 mg/0.4ml, 17.5 mg/0.4ml, 20 mg/0.4ml, 22.5 mg/0.4ml, 25 mg/0.4ml	2		
<b>oxaprozin tab 600 mg (Daypro)</b>	1		
<b>piroxicam cap 10 mg, 20 mg (Feldene)</b>	1		
RIDAURA - auranofin cap 3 mg	2		
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg	2	SP	PA, LD, QL (30 tablets/30 days)
RINVOQ - upadacitinib tab er 24hr 45 mg	2	SP	PA, LD, QL (84 tablets/365 days)
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	2	SP	PA, LD, QL (360 mls/30 days)
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	2	SP	PA, QL (2 pens/28 days)
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	2	SP	PA, QL (2 pens/28 days)
SIMPONI - golimumab subcutaneous soln auto-injector 50 mg/0.5ml	3	SP	PA, QL (1 pen/28 days)
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	2	SP	PA, QL (1 pen/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
SIMPONI - golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	3	SP	PA, QL (1 syringe/28 days)
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	2	SP	PA, QL (1 syringe/28 days)
<b>sulindac tab 150 mg, 200 mg</b>	1		
TOLECTIN 600 - tolmetin sodium tab 600 mg	3		
TOLMETIN SODIUM - tolmetin sodium cap 400 mg	3		
TYENNE - tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	2	SP	PA, QL (4 pens/28 days)
TYENNE - tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	2	SP	PA, QL (4 syringes/28 days)
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	2	SP	PA, QL (240 mls/30 days)
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent)	2	SP	PA, QL (60 tablets/30 days)
XELJANZ - tofacitinib citrate tab 10 mg (base equivalent)	2	SP	PA, QL (240 tablets/365 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent)	2	SP	PA, QL (30 tablets/30 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 22 mg (base equivalent)	2	SP	PA, QL (120 tablets/365 days)
<b>MIGRAINE PRODUCTS</b>			
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	2		PA, QL (1 pen/28 days)
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	2		PA, QL (3 pens/84 days)
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	2		PA, QL (3 syringes/84 days)
<b>almotriptan malate tab 6.25 mg, 12.5 mg</b>	1		ST, QL (12 tablets/30 days)
<b>dihydroergotamine mesylate inj 1 mg/ml</b>	1		PA, QL (24 ampules/28 days)
<b>dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)</b>	1		PA, QL (8 vials/28 days)
<b>eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)</b>	1		QL (12 tablets/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	2		PA, QL (1 pen/28 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml	2		PA, QL (9 syringes/180 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml	2		PA, QL (1 syringe/28 days)
ERGOMAR - ergotamine tartrate sl tab 2 mg	3		PA, QL (20 tablets/28 days)
ERGOTAMINE TARTRATE/CAFFE - ergotamine w/ caffeine tab 1-100 mg	2		PA, QL (40 tablets/28 days)
<b>frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)</b>	1		ST, QL (18 tablets/30 days)

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MIGERGOT - ergotamine w/ caffeine suppos 2-100 mg	3		PA, QL (20 suppositories/28 days)
<b>naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)</b>	1		QL (18 tablets/30 days)
NURTEC - rimegepant sulfate tab disint 75 mg	2		PA, QL (16 tablets/30 days)
QULIPTA - atogepant tab 10 mg, 30 mg, 60 mg	2		PA, QL (30 tablets/30 days)
REYVOW - lasmiditan succinate tab 50 mg, 100 mg	2		PA, QL (8 tablets/30 days)
<b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</b>	1		QL (24 tablets/30 days)
<b>rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)</b>	1		QL (18 tablets/30 days)
<b>rizatriptan benzoate tab 5 mg (base equivalent)</b>	1		QL (24 tablets/30 days)
<b>rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)</b>	1		QL (18 tablets/30 days)
<b>sumatriptan nasal spray 5 mg/act (Imitrex)</b>	1		QL (6 packs/30 days)
<b>sumatriptan nasal spray 20 mg/act (Imitrex)</b>	1		QL (2 packs/30 days)
<b>sumatriptan succinate inj 6 mg/0.5ml</b>	1		QL (10 vials/30 days)
SUMATRIPTAN SUCCINATE REF - sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	2		ST, QL (12 doses/30 days)
<b>sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys)</b>	1		QL (12 doses/30 days)
<b>sumatriptan succinate tab 25 mg (Imitrex)</b>	1		QL (36 tablets/30 days)
<b>sumatriptan succinate tab 50 mg, 100 mg (Imitrex)</b>	1		QL (18 tablets/30 days)
UBRELVY - ubrogepant tab 50 mg, 100 mg	2		PA, QL (16 tablets/30 days)
ZOLMITRIPTAN - zolmitriptan nasal spray 2.5 mg/spray unit	3		ST, QL (12 units/30 days)
<b>zolmitriptan nasal spray 5 mg/spray unit (Zomig)</b>	1		ST, QL (12 units/30 days)
<b>zolmitriptan orally disintegrating tab 2.5 mg, 5 mg</b>	1		QL (12 tablets/30 days)
<b>zolmitriptan tab 2.5 mg, 5 mg (Zomig)</b>	1		QL (12 tablets/30 days)
ZOMIG - zolmitriptan nasal spray 2.5 mg/spray unit, 5 mg/spray unit	3		ST, QL (12 units/30 days)
<b>GOUT AGENTS</b>			
<b>allopurinol tab 100 mg, 300 mg (Zyloprim)</b>	1		
<b>colchicine tab 0.6 mg (Colcrys)</b>	1		
<b>colchicine w/ probenecid tab 0.5-500 mg</b>	1		
<b>febuxostat tab 40 mg, 80 mg (Uloric)</b>	1		
<b>probenecid tab 500 mg</b>	1		
<b>NEUROMUSCULAR DRUGS</b>			
<b>ANTICONVULSANTS</b>			
APTIOM - eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	2		
BANZEL - rufinamide tab 200 mg, 400 mg	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BANZEL - rufinamide susp 40 mg/ml	3		
BRIVIACT - brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	3		
BRIVIACT - brivaracetam oral soln 10 mg/ml	3		
BRIVIACT - brivaracetam iv soln 50 mg/5ml	3		
CARBAMAZEPINE - carbamazepine chew tab 200 mg	3		
<b>carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)</b>	1		
<b>carbamazepine chew tab 100 mg</b>	1		
<b>carbamazepine susp 100 mg/5ml (Tegretol)</b>	1		
<b>carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)</b>	1		
<b>carbamazepine tab 200 mg (Tegretol)</b>	1		
CARBATROL - carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	3		
<b>clobazam suspension 2.5 mg/ml (Onfi)</b>	1		
<b>clobazam tab 10 mg, 20 mg (Onfi)</b>	1		
<b>clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	1		
<b>clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)</b>	1		
DEPAKOTE - divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg	3		
DEPAKOTE ER - divalproex sodium tab er 24 hr 250 mg, 500 mg	3		
DEPAKOTE SPRINKLES - divalproex sodium cap delayed release sprinkle 125 mg	3		
DIACOMIT - stiripentol cap 250 mg, 500 mg	3	SP	
DIACOMIT - stiripentol packet 250 mg, 500 mg	3	SP	
DIAZEPAM RECTAL GEL - diazepam rectal gel delivery system 2.5 mg	3		
<b>diazepam rectal gel delivery system 10 mg, 20 mg (Diastat acudial)</b>	1		
DILANTIN - phenytoin sodium extended cap 30 mg	2		
DILANTIN - phenytoin sodium extended cap 100 mg	3		
DILANTIN INFATABS - phenytoin chew tab 50 mg	3		
DILANTIN-125 - phenytoin susp 125 mg/5ml	3		
<b>divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)</b>	1		
<b>divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)</b>	1		
<b>divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)</b>	1		

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EPIDIOLEX - cannabidiol soln 100 mg/ml	2	SP	PA, LD
EPRONTIA - topiramate oral soln 25 mg/ml	3		
<b>ethosuximide cap 250 mg (Zarontin)</b>	1		
<b>ethosuximide soln 250 mg/5ml (Zarontin)</b>	1		
<b>felbamate susp 600 mg/5ml (Felbatol)</b>	1		
<b>felbamate tab 400 mg, 600 mg (Felbatol)</b>	1		
FELBATOL - felbamate tab 400 mg, 600 mg	3		
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	3	SP	PA, LD
FYCOMPA - perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3		
FYCOMPA - perampanel susp 0.5 mg/ml	3		
<b>gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)</b>	1		
<b>gabapentin oral soln 250 mg/5ml (Neurontin)</b>	1		
<b>gabapentin tab 600 mg, 800 mg (Neurontin)</b>	1		
KEPPRA - levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg	3		
KEPPRA - levetiracetam oral soln 100 mg/ml	3		
KEPPRA XR - levetiracetam tab er 24hr 500 mg, 750 mg	3		
<b>lacosamide oral solution 10 mg/ml (Vimpat)</b>	1		
<b>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)</b>	1		
LAMICTAL - lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	3		
LAMICTAL CHEWABLE DISPERS - lamotrigine tab chewable dispersible 5 mg, 25 mg	3		
LAMICTAL ODT - lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg	3		
LAMICTAL ODT - lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit	3		
LAMICTAL ODT - lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	3		
LAMICTAL ODT - lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit	3		
LAMICTAL STARTER/NOT TAKI - lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	3		
LAMICTAL STARTER/TAKING C - lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	3		
LAMICTAL STARTER/TAKING V - lamotrigine tab 35 x 25 mg starter kit	3		
LAMICTAL XR - lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
LAMICTAL XR - lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	3		
LAMICTAL XR - lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	3		
LAMICTAL XR - lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	3		
lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)	1		
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	1		
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	1		
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	1		
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	1		
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	1		
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	1		
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	1		
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	1		
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	1		
levetiracetam oral soln 100 mg/ml (Keppra)	1		
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	1		
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)	1		
LYRICA - pregabalin soln 20 mg/ml	3		ST, QL (900 mls/30 days)
methsuximide cap 300 mg (Celontin)	1		
MOTPOLY XR - lacosamide cap er 24hr 100 mg, 150 mg, 200 mg	3		
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	3		QL (10 bottles/30 days)
NEURONTIN - gabapentin cap 100 mg, 300 mg, 400 mg	3		
NEURONTIN - gabapentin tab 600 mg, 800 mg	3		
NEURONTIN - gabapentin oral soln 250 mg/5ml	3		
ONFI - clobazam tab 10 mg, 20 mg	3		
ONFI - clobazam suspension 2.5 mg/ml	3		
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	1		

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<b>oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg (Oxtellar xr)</b>	1		
<b>oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)</b>	1		
OXTELLAR XR - oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg	3		
<b>phenytoin chew tab 50 mg (Dilantin infatabs)</b>	1		
<b>phenytoin sodium extended cap 100 mg (Dilantin)</b>	1		
<b>phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)</b>	1		
<b>phenytoin susp 125 mg/5ml (Dilantin-125)</b>	1		
<b>pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg (Lyrica)</b>	1		QL (90 capsules/30 days)
<b>pregabalin cap 225 mg, 300 mg (Lyrica)</b>	1		QL (60 capsules/30 days)
<b>pregabalin soln 20 mg/ml (Lyrica)</b>	1		QL (900 mls/30 days)
<b>primidone tab 50 mg, 250 mg (Mysoline)</b>	1		
QUDEXY XR - topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg	3		PA, QL (30 capsules/30 days)
QUDEXY XR - topiramate cap er 24hr sprinkle 200 mg	3		PA, QL (60 capsules/30 days)
<b>rufinamide susp 40 mg/ml (Banzel)</b>	1		
<b>rufinamide tab 200 mg, 400 mg (Banzel)</b>	1		
SABRIL - vigabatrin tab 500 mg	3	SP	LD
SABRIL - vigabatrin powd pack 500 mg	3	SP	LD
SYMPAZAN - clobazam oral film 5 mg, 10 mg, 20 mg	2		
TEGRETOL - carbamazepine tab 200 mg	3		
TEGRETOL - carbamazepine susp 100 mg/5ml	3		
TEGRETOL-XR - carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	3		
<b>tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril)</b>	1		
TOPAMAX - topiramate tab 25 mg, 50 mg, 100 mg, 200 mg	3		
TOPAMAX SPRINKLE - topiramate sprinkle cap 15 mg, 25 mg	3		
<b>topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg (Qudexy xr)</b>	1		PA, QL (30 capsules/30 days)
<b>topiramate cap er 24hr sprinkle 200 mg (Qudexy xr)</b>	1		PA, QL (60 capsules/30 days)
<b>topiramate cap er 24hr 25 mg, 50 mg, 100 mg (Trokendi xr)</b>	1		PA, QL (30 capsules/30 days)
<b>topiramate cap er 24hr 200 mg (Trokendi xr)</b>	1		PA, QL (60 capsules/30 days)
<b>topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)</b>	1		
<b>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)</b>	1		

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TRILEPTAL - oxcarbazepine tab 150 mg, 300 mg, 600 mg	3		
TRILEPTAL - oxcarbazepine susp 300 mg/5ml (60 mg/ml)	3		
TROKENDI XR - topiramate cap er 24hr 25 mg, 50 mg, 100 mg	3		PA, QL (30 capsules/30 days)
TROKENDI XR - topiramate cap er 24hr 200 mg	3		PA, QL (60 capsules/30 days)
<b>valproate sodium oral soln 250 mg/5ml (base equiv)</b>	1		
<b>valproic acid cap 250 mg</b>	1		
VALTOCO 10 MG DOSE - diazepam nasal spray 10 mg/0.1 ml	3		QL (10 bottles/30 days)
VALTOCO 15 MG DOSE - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	3		QL (10 bottles/30 days)
VALTOCO 20 MG DOSE - diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	3		QL (10 bottles/30 days)
VALTOCO 5 MG DOSE - diazepam nasal spray 5 mg/0.1 ml	3		QL (10 bottles/30 days)
<b>vigabatrin powd pack 500 mg (Sabril)</b>	1	SP	LD
<b>vigabatrin tab 500 mg (Sabril)</b>	1	SP	LD
VIMPAT - lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	3		
VIMPAT - lacosamide oral solution 10 mg/ml	3		
XCOPRI - cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	3		
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	3		
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	3		
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	3		
ZARONTIN - ethosuximide cap 250 mg	3		
ZARONTIN - ethosuximide soln 250 mg/5ml	3		
ZONEGRAN - zonisamide cap 25 mg, 100 mg	3		
<b>zonisamide cap 25 mg, 100 mg (Zonegran)</b>	1		
<b>zonisamide cap 50 mg</b>	1		
ZTALMY - ganaxolone susp 50 mg/ml	3	SP	PA, LD, QL (1100 mls/30 days)
<b>ANTIPARKINSON AGENTS</b>			
<b>amantadine hcl cap 100 mg</b>	1		
<b>amantadine hcl soln 50 mg/5ml</b>	1		
<b>amantadine hcl tab 100 mg</b>	1		
APOKYN - apomorphine hcl soln cartridge 30 mg/3ml	3	SP	PA, LD

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)</b>	1	SP	PA
<b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</b>	1		
<b>bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)</b>	1		
<b>bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)</b>	1		
<b>carbidopa &amp; levodopa tab er 25-100 mg, 50-200 mg</b>	1		
<b>carbidopa &amp; levodopa tab 10-100 mg, 25-100 mg (Sinemet)</b>	1		
<b>carbidopa &amp; levodopa tab 25-250 mg</b>	1		
<b>carbidopa tab 25 mg (Lodosyn)</b>	1		
<b>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)</b>	1		
<b>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)</b>	1		
<b>carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)</b>	1		
<b>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)</b>	1		
<b>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)</b>	1		
<b>carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)</b>	1		
CARBIDOPA/LEVODOPA ODT - carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	3		
<b>entacapone tab 200 mg (Comtan)</b>	1		
INBRIJA - levodopa inhal powder cap 42 mg	2	SP	PA, LD
LODOSYN - carbidopa tab 25 mg	3		
NEUPRO - rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	3		
NOURIANZ - istradefylline tab 20 mg, 40 mg	3	SP	PA, LD
PARLODEL - bromocriptine mesylate cap 5 mg (base equivalent)	3		
PARLODEL - bromocriptine mesylate tab 2.5 mg (base equivalent)	3		
<b>pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)</b>	1		
<b>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</b>	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)</b>	1		
<b>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)</b>	1		
<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</b>	1		
<b>selegiline hcl cap 5 mg</b>	1		
<b>selegiline hcl tab 5 mg</b>	1		
SINEMET - carbidopa & levodopa tab 10-100 mg, 25-100 mg	3		
TASMAR - tolcapone tab 100 mg	3		
<b>tolcapone tab 100 mg (Tasmar)</b>	1		
TRIHENYPHENIDYL HCL - trihexyphenidyl hcl oral soln 0.4 mg/ml	3		
<b>trihexyphenidyl hcl tab 2 mg, 5 mg</b>	1		
<b>NEUROMUSCULAR AGENTS</b>			
DAYBUE - trofinetide oral soln 200 mg/ml	3	SP	PA, LD, QL (3600 mls/30 days)
DUVYZAT - givinostat hcl oral susp 8.86 mg/ml	3	SP	PA, QL (280 mls/28 days)
EVRYSDI - risdiplam for soln 0.75 mg/ml	3	SP	PA, LD, QL (160 mls/24 days)
RADICAVA ORS - edaravone oral susp 105 mg/5ml	3	SP	PA, LD, QL (50 mls/28 days)
RADICAVA ORS STARTER KIT - edaravone oral susp 105 mg/5ml	3	SP	PA, LD, QL (70 mls/180 days)
<b>riluzole tab 50 mg (Rilutek)</b>	1		
SKYCLARYS - omeveloxolone cap 50 mg	3	SP	PA, QL (90 capsules/30 days)
TEGLUTIK - riluzole susp 50 mg/10ml	3	SP	PA, QL (600 mls/30 days)
<b>MUSCULOSKELETAL THERAPY AGENTS</b>			
<b>baclofen susp 25 mg/5ml (Fleqsuvy)</b>	1		
<b>baclofen tab 10 mg, 20 mg</b>	1		
<b>carisoprodol tab 350 mg (Soma)</b>	1		
<b>chlorzoxazone tab 500 mg</b>	1		
<b>cyclobenzaprine hcl tab 5 mg, 10 mg</b>	1		
DANTRIUM - dantrolene sodium cap 25 mg	3		
<b>dantrolene sodium cap 25 mg (Dantrium)</b>	1		
<b>dantrolene sodium cap 50 mg, 100 mg</b>	1		
<b>metaxalone tab 400 mg, 800 mg</b>	1		
<b>methocarbamol tab 500 mg, 750 mg</b>	1		
<b>orphenadrine citrate tab er 12hr 100 mg</b>	1		
<b>orphenadrine w/ aspirin &amp; caffeine tab 25-385-30 mg</b>	1		
SOHONOS - palovarotene cap 1 mg, 1.5 mg	3	SP	PA, LD, QL (112 capsules/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
SOHONOS - palovarotene cap 2.5 mg	3	SP	PA, LD, QL (140 capsules/28 days)
SOHONOS - palovarotene cap 5 mg	3	SP	PA, LD, QL (84 capsules/28 days)
SOHONOS - palovarotene cap 10 mg	3	SP	PA, LD, QL (56 capsules/28 days)
<b>tizanidine hcl tab 2 mg (base equivalent)</b>	1		
<b>tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)</b>	1		
ZANAFLEX - tizanidine hcl tab 4 mg (base equivalent)	3		
<b>ANTIMYASTHENIC AGENTS</b>			
FIRDAPSE - amifampridine phosphate tab 10 mg (base equivalent)	3	SP	PA, LD, QL (240 tablets/30 days)
<b>pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)</b>	1		
<b>pyridostigmine bromide tab er 180 mg (Mestinon timespan)</b>	1		
<b>pyridostigmine bromide tab 60 mg (Mestinon)</b>	1		
<b>NUTRITIONAL PRODUCTS</b>			
<b>VITAMINS</b>			
<b>cholecalciferol cap 1.25 mg (50000 unit)</b>	1		
DRISDOL - ergocalciferol cap 1.25 mg (50000 unit)	3		
<b>ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)</b>	1		
<b>phytonadione tab 5 mg (Mephyton)</b>	1		
<b>MULTIVITAMINS</b>			
ATABEX OB - prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	3		
CITRANATAL B-CALM - prenat w/o a w/febn-feglu-fa tab 20-1 mg & vit b6 tab pak	3		
CITRANATAL MEDLEY - prenat w/o a w/fe fum-fe cbn-fa-dha cap 27-1-200 mg	3		
CO-NATAL FA - prenatal vit w/ fe fumarate-fa tab 29-1 mg	2		
COMPLETE NATAL DHA - prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	2		
COMPLETENATE - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	2		
CONCEPT DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	2		
CONCEPT OB - prenatal w/o a w/fe fum-fe poly-fa cap 130-92.4-1 mg	2		
FOLIVANE-OB - prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	2		
INATAL GT - prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
JENLIVA PRENATAL/POSTNATA - prenatal multivitamins & minerals w/ iron & fa cap 1 mg	3		
M-NATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
NATALVIT - prenatal vit w/ fe fumarate-fa tab 75-1 mg	3		
NEONATAL COMPLETE - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
NEONATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
NESTABS - prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	3		
NIVA-PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
OBSTETRIX EC - prenatal vit w/ iron carbonyl-fa tab delayed rel 29-1 mg	3		
ONE VITE WOMENS PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
PNV PRENATAL PLUS MULTIVI - prenatal w/ fe fum-fa tab 27-1 mg & omega 3 cap 312 mg pak	2		
PNV-DHA+DOCUSATE - prenatal w/o vit a w/ fe fum-dss-fa-dha cap 27-1.25-300 mg	3		
PNV-OMEGA - prenatal w/o a w/ fe fumarate-methylfolate-fa-omega 3 cap	3		
PRENAISSANCE - prenatal w/o vit a w/ fe fum-dss-fa-dha cap 29-1.25-325 mg	3		
PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
PRENATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
PRENATAL PLUS VITAMIN AND - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
PRENATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	2		
PRENATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	2		
PRENATAL-U - prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	2		
PROVIDA OB - prenatal w/o a w/fe fum-fe poly-fa cap 20-20-1.25 mg	2		
SE-NATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	2		
SE-NATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	2		
SELECT-OB - prenatal vit w/ fe polysac cmplx-fa chew tab 29-1 mg	3		

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TARON-C DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	2		
THRIVITE RX - prenatal vit w/ iron carbonyl-fa tab 29-1 mg	2		
TRICARE - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
TRINATAL RX 1 - prenatal vit w/ fe fumarate-fa tab 60-1 mg	2		
TRINATE - prenatal vit w/ fe fumarate-fa tab 28-1 mg	2		
VITATHELY/GINGER - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
WESCAP-C DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	2		
WESNATAL DHA COMPLETE - prenatal-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	3		
WESTAB PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
<b>MINERALS and ELECTROLYTES</b>			
FLORIVA - sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	3		
GALZIN - zinc acetate cap 25 mg (elemental zinc), 50 mg (elemental zinc)	3		
K-PHOS - potassium phosphate monobasic tab 500 mg	3		
K-PHOS NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	3		
K-TAB - potassium chloride tab er 20 meq (1500 mg)	3		
POKONZA - potassium chloride powder packet 10 meq	3		
<b>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg (K-phos neutral)</b>	1		
<b>potassium chloride cap er 8 meq, 10 meq</b>	1		
POTASSIUM CHLORIDE ER - potassium chloride tab er 15 meq	3		
<b>potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq</b>	1		
<b>potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)</b>	1		
<b>potassium chloride tab er 8 meq (600 mg)</b>	1		
<b>potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab)</b>	1		
<b>potassium phosphate monobasic tab 500 mg (K-phos)</b>	1		
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
SODIUM FLUORIDE - sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	2		
<b>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)</b>	1		
<b>NUTRIENTS</b>			
DOJOLVI - triheptanoin oral liquid 100%	3	SP	PA, LD
<b>HEMATOLOGICAL AGENTS</b>			
<b>HEMATOPOIETIC AGENTS</b>			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	2	SP	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	2	SP	PA
<b>carbonyl iron susp 15 mg/1.25ml (elemental iron)</b>	1		
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	2	SP	PA, LD, QL (60 capsules/30 days)
<b>cyanocobalamin inj 1000 mcg/ml</b>	1		
DOPTELET - avatrombopag maleate tab 20 mg (base equiv)	2	SP	PA, LD, QL (30 tablets/30 days)
DROXIA - hydroxyurea cap 200 mg, 300 mg, 400 mg	2		
ENDARI - glutamine (sickle cell) powd pack 5 gm	3	SP	PA, LD
EPOGEN - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	3	SP	PA
<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe)</b>	1		
<b>folic acid tab 400 mcg, 800 mcg, 1 mg</b>	1		
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
FYLNETRA - pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
<b>glutamine (sickle cell) powd pack 5 gm (Endari)</b>	1	SP	PA
LEUKINE - sargramostim lyophilized for inj 250 mcg	3	SP	PA
<b>miglustat cap 100 mg (Zavesca)</b>	1	SP	PA, LD, QL (90 capsules/30 days)
MIRCERA - methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	3	SP	PA
MULPLETA - lusutrombopag tab 3 mg	3	SP	PA, QL (7 tablets/7 days)

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NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	2	SP	PA
NIVESTYM - filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	2	SP	PA
NYVEPRIA - pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
PROCRIT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ ml	2	SP	PA
PROMACTA - eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)	3	SP	PA, QL (30 tablets/30 days)
PROMACTA - eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	3	SP	PA, QL (30 packets/30 days)
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	2	SP	PA
STIMUFEND - pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	3	SP	PA, QL (2 syringes/28 days)
UDENYCA - pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	2	SP	PA, QL (2 pens/28 days)
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
XOLREMDI - mavorixafor cap 100 mg	3	SP	PA, LD, QL (120 capsules/30 days)
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	2	SP	PA
ZAVESCA - miglustat cap 100 mg	3	SP	PA, LD, QL (90 capsules/30 days)
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
<b>ANTICOAGULANTS</b>			
<b>dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)</b>	1		QL (60 capsules/30 days)
<b>dabigatran etexilate mesylate cap 110 mg (etexilate base eq) (Pradaxa)</b>	1		QL (120 capsules/30 days)
ELIQUIS - apixaban tab 2.5 mg	2		QL (60 tablets/30 days)
ELIQUIS - apixaban tab 5 mg	2		QL (74 tablets/30 days)
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	2		QL (1 pack/180 days)
<b>enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)</b>	1		

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<b>enoxaparin sodium inj 300 mg/3ml (Lovenox)</b>	1		
<b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)</b>	1		
FRAGMIN - dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	3		
FRAGMIN - dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	3		
HEPARIN SODIUM - heparin sodium (porcine) pf inj 5000 unit/ml	3		
<b>heparin sodium (porcine) inj 5000 unit/ml, 10000 unit/ml</b>	1		
PRADAXA - dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq)	3		QL (60 capsules/30 days)
PRADAXA - dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	3		QL (120 capsules/30 days)
PRADAXA - dabigatran etexilate mesylate pellet pack 20 mg, 150 mg	3		QL (60 packets/30 days)
PRADAXA - dabigatran etexilate mesylate pellet pack 30 mg, 40 mg, 50 mg, 110 mg	3		QL (120 packets/30 days)
<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg</b>	1		
XARELTO - rivaroxaban for susp 1 mg/ml	2		QL (620 mls/30 days)
XARELTO - rivaroxaban tab 2.5 mg, 15 mg	2		QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 10 mg, 20 mg	2		QL (30 tablets/30 days)
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	2		QL (1 pack/30 days)
<b>HEMOSTATICS</b>			
<b>aminocaproic acid oral soln 0.25 gm/ml (Amicar)</b>	1		
<b>aminocaproic acid tab 500 mg, 1000 mg (Amicar)</b>	1		
<b>tranexamic acid tab 650 mg (Lysteda)</b>	1		
<b>HEMATOLOGICAL AGENTS - MISC.</b>			
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	2	SP	PA
ADYNOVATE - antihemophilic factor recomb pegylated for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	2	SP	PA
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit	2	SP	PA, LD
AGRYLIN - anagrelide hcl cap 0.5 mg	3		

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ALPHANATE - antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	2	SP	PA, LD
ALPHANINE SD - coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	2	SP	PA
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	2	SP	PA, LD
ALTUVIIIO - antihemophilic fact rcmb fc-vwf-xten-ehtl for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	2	SP	PA
<b>anagrelide hcl cap 0.5 mg (Agrylin)</b>	1		
<b>anagrelide hcl cap 1 mg</b>	1		
<b>aspirin-dipyridamole cap er 12hr 25-200 mg</b>	1		
BENEFIX - coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
BERINERT - c1 esterase inhibitor (human) for iv inj kit 500 unit	3	SP	PA, LD, QL (16 vials/30 days)
BRILINTA - ticagrelor tab 60 mg, 90 mg	2		
CABLIVI - caplacizumab-yhdp for inj kit 11 mg	3	SP	PA, LD, QL (30 kits/30 days)
<b>cilostazol tab 50 mg, 100 mg</b>	1		
CINRYZE - c1 esterase inhibitor (human) for iv inj 500 unit	2	SP	PA, LD, QL (20 vials/30 days)
<b>clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)</b>	1		
<b>clopidogrel bisulfate tab 300 mg (base equiv)</b>	1		
COAGADEX - coagulation factor x (human) for inj 250 unit, 500 unit	2	SP	PA, LD
CORIFACT - factor xiii concentrate (human) for inj kit 1000-1600 unit	2	SP	PA, LD
<b>dipyridamole tab 25 mg, 50 mg, 75 mg</b>	1		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit	2	SP	PA
EMPAVELI - pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	2	SP	PA, LD, QL (8 vials/28 days)
ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	3	SP	PA, LD
FABHALTA - iptacopan hcl cap 200 mg	3	SP	PA, LD, QL (60 capsules/30 days)
FEIBA - antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	2	SP	PA
FIBRYGA - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	2	SP	PA

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HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	2	SP	PA, LD, QL (16 vials/30 days)
HEMLIBRA - emicizumab-kxwh subcutaneous soln 12 mg/0.4ml (30 mg/ml), 30 mg/ml, 60 mg/0.4ml (150 mg/ml), 105 mg/0.7ml (150 mg/ml), 150 mg/ml, 300 mg/2ml (150 mg/ml)	2	SP	PA, LD
HEMOFIL M - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	2	SP	PA
HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	2	SP	PA
<b>icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)</b>	1	SP	PA, LD, QL (12 syringes/30 days)
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	2	SP	PA
IXINITY - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	2	SP	PA, LD
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	2	SP	PA
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit, 2000 unit, 3000 unit	2	SP	PA
KALBITOR - ecallantide inj 10 mg/ml	3	SP	PA, LD, QL (12 vials/30 days)
KOATE - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	2	SP	PA
KOATE-DVI - antihemophilic factor (human) for inj 500 unit, 1000 unit	2	SP	PA
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	2	SP	PA
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	2	SP	PA, LD
NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	2	SP	PA, LD
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	2	SP	PA, LD
NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit, 500 unit	2	SP	PA, LD

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NUWIQ - antihemophilic factor recombinant (b2-domain-deleted, rFVIII, sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	2	SP	PA, LD
OBIZUR - antihemophilic factor (recombinant porc) rFVIII for inj 500 unit	2	SP	PA, LD
ORLADEYO - berotralstat hcl cap 110 mg, 150 mg	3	SP	PA, LD, QL (30 capsules/30 days)
<b>pentoxifylline tab er 400 mg</b>	1		
<b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)</b>	1		
PROFILNINE - factor ix complex for inj 500 unit, 1000 unit, 1500 unit	2	SP	PA
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg	3	SP	PA, LD, QL (56 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 5 mg, 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg	3	SP	PA, LD, QL (1 pack/365 days)
REBINYN - coagulation factor ix recombinant glycopegylated for inj 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA, LD
RECOMBINATE - antihemophilic factor recombinant (rFVIII) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	2	SP	PA
RIASTAP - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	2	SP	PA, LD
RIXUBIS - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
RUCONEST - c1 esterase inhibitor (recombinant) for iv inj 2100 unit	3	SP	PA, LD, QL (16 vials/30 days)
RYPLAZIM - plasminogen, human-tvmh for iv soln 68.8 mg	3	SP	PA, LD
SEVENFACT - coagulation factor viia (recombinant)-jncw for inj 1 mg (1000 mcg), 5 mg (5000 mcg)	3	SP	PA, LD
TAKHZYRO - lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	2	SP	PA, LD, QL (2 syringes/28 days)
TAKHZYRO - lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	2	SP	PA, LD, QL (2 vials/28 days)
TAVALLISSE - fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	3	SP	PA, LD, QL (60 tablets/30 days)
TAVNEOS - avacopan cap 10 mg	3	SP	PA, LD, QL (180 capsules/30 days)
TRETTEN - coagulation factor xiii a-subunit for inj 2500 unit	2	SP	PA, LD
VONVENDI - von willebrand factor (recombinant) for inj 650 unit, 1300 unit	2	SP	PA
VOYDEYA - danicopan tab therapy pack 50 mg & 100 mg	3	SP	PA, LD, QL (180 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VOYDEYA - danicopan tab 100 mg	3	SP	PA, LD, QL (180 tablets/30 days)
WILATE - antihemophilic factor/vwf (human) for inj 500-500 unit kit	2	SP	PA
WILATE - antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	2	SP	PA
XYNTHA - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	2	SP	PA
XYNTHA - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	2	SP	PA
XYNTHA SOLOFUSE - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	2	SP	PA
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	2	SP	PA
ZILBRYSQ - zilucoplan sodium subcutaneous soln pref syr 16.6 mg/0.416ml, 23 mg/0.574ml, 32.4 mg/0.81ml	3	SP	PA, LD, QL (28 syringes/28 days)
ZONTIVITY - vorapaxar sulfate tab 2.08 mg (base equivalent)	3		

## TOPICAL PRODUCTS

### OPHTHALMIC AGENTS

ACULAR - ketorolac tromethamine ophth soln 0.5%	3		
ACULAR LS - ketorolac tromethamine ophth soln 0.4%	3		
AKTEN - lidocaine hcl ophth gel 3.5%	3		
ALOCRIAL - nedocromil sodium ophth soln 2%	3		
ALOMIDE - Iodoxamide tromethamine ophth soln 0.1%	3		
ALPHAGAN P - brimonidine tartrate ophth soln 0.15%	3		
APRACLONIDINE - apraclonidine hcl ophth soln 0.5% (base equivalent)	2		
ATROPINE SULFATE - atropine sulfate ophth soln 1%	3		
<b>atropine sulfate ophth soln 1% (Atropine sulfate)</b>	1		
<b>azelastine hcl ophth soln 0.05%</b>	1		
BACITRACIN - bacitracin ophth oint 500 unit/gm	2		
<b>bacitracin-polymyxin b ophth oint</b>	1		
<b>bacitracin-polymyxin-neomycin-hc ophth oint 1%</b>	1		
<b>bepotastine besilate ophth soln 1.5% (Bepreve)</b>	1		
BEPREVE - bepotastine besilate ophth soln 1.5%	3		
BESIVANCE - besifloxacin hcl ophth susp 0.6% (base equiv)	3		
BETADINE OPHTHALMIC PREP - povidone-iodine ophth soln 5%	3		
BETAXOLOL HCL - betaxolol hcl ophth soln 0.5%	2		
<b>bimatoprost ophth soln 0.03%</b>	1		QL (2.5 mls/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
<b>brimonidine tartrate ophth soln 0.15% (Alphagan p)</b>	1		
<b>brimonidine tartrate ophth soln 0.2%</b>	1		
<b>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)</b>	1		
<b>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</b>	1		
CARTEOLOL HCL - carteolol hcl ophth soln 1%	3		
CEQUA - cyclosporine (ophth) soln 0.09% (pf)	2		PA, QL (60 vials/30 days)
<b>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</b>	1		
CROMOLYN SODIUM - cromolyn sodium ophth soln 4%	2		
CYCLOGYL - cyclopentolate hcl ophth soln 0.5%, 2%	2		
CYCLOGYL - cyclopentolate hcl ophth soln 1%	3		
CYCLOMYDRIL - cyclopentolate w/ phenylephrine ophth soln 0.2-1%	3		
<b>cyclopentolate hcl ophth soln 1% (Cyclogyl)</b>	1		
CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)	3	SP	PA, LD, QL (20 mls/28 days)
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)	3	SP	PA, LD, QL (60 mls/28 days)
DEXAMETHASONE SODIUM PHOS - dexamethasone sodium phosphate ophth soln 0.1%	3		
<b>diclofenac sodium ophth soln 0.1%</b>	1		
<b>difluprednate ophth emulsion 0.05% (Durezol)</b>	1		
<b>dorzolamide hcl ophth soln 2% (Trusopt)</b>	1		
<b>dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)</b>	1		
<b>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf)</b>	1		
DUREZOL - difluprednate ophth emulsion 0.05%	3		
<b>epinastine hcl ophth soln 0.05%</b>	1		
ERYTHROMYCIN - erythromycin ophth oint 5 mg/gm	3		
<b>erythromycin ophth oint 5 mg/gm</b>	1		
EYSUVIS - loteprednol etabonate ophth susp 0.25%	2		
FLAREX - fluorometholone acetate ophth susp 0.1%	3		
<b>fluorometholone ophth susp 0.1% (Fml liquifilm)</b>	1		
FLURBIPROFEN SODIUM - flurbiprofen sodium ophth soln 0.03%	3		
FML FORTE - fluorometholone ophth susp 0.25%	3		
FML LIQUIFILM - fluorometholone ophth susp 0.1%	3		
<b>gatifloxacin ophth soln 0.5% (Zymaxid)</b>	1		
<b>gentamicin sulfate ophth soln 0.3%</b>	1		

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ILEVRO - nepafenac ophth susp 0.3%	2		
IOPIDINE - apraclonidine hcl ophth soln 1% (base equivalent)	3		
<b>ketorolac tromethamine ophth soln 0.4% (Acular Is)</b>	1		
<b>ketorolac tromethamine ophth soln 0.5% (Acular)</b>	1		
<b>latanoprost ophth soln 0.005% (Xalatan)</b>	1		QL (2.5 mls/30 days)
LEVOBUNOLOL HCL - levobunolol hcl ophth soln 0.5%	3		
LEVOFLOXACIN - levofloxacin ophth soln 1.5%	3		
LOTEMAX - loteprednol etabonate ophth oint 0.5%	2		
LOTEMAX - loteprednol etabonate ophth susp 0.5%	3		
LOTEMAX - loteprednol etabonate ophth gel 0.5%	3		
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%	2		
<b>loteprednol etabonate ophth gel 0.5% (Lotemax)</b>	1		
<b>loteprednol etabonate ophth susp 0.2% (Alrex)</b>	1		
<b>loteprednol etabonate ophth susp 0.5% (Lotemax)</b>	1		
LUMIGAN - bimatoprost ophth soln 0.01%	2		QL (2.5 mls/30 days)
MAXIDEX - dexamethasone ophth susp 0.1%	3		
MAXITROL - neomycin-polymyxin-dexamethasone ophth susp 0.1%	3		
MAXITROL - neomycin-polymyxin-dexamethasone ophth oint 0.1%	3		
MIEBO - perfluoroheptyloctane ophth soln 1.338 gm/ml	2		PA, QL (1 bottle/30 days)
<b>moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)</b>	1		
MYDRIACYL - tropicamide ophth soln 1%	3		
NATACYN - natamycin ophth susp 5%	2		
<b>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</b>	1		
<b>neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)</b>	1		
<b>neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)</b>	1		
NEOMYCIN/POLYMYXIN/GRAMIC - neomycin-polymyxin-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	3		
OCUFLOX - ofloxacin ophth soln 0.3%	3		
<b>ofloxacin ophth soln 0.3% (Ocuflox)</b>	1		
OXERVATE - cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	3	SP	PA, LD, QL (56 vials/28 days)
<b>phenylephrine hcl ophth soln 2.5%, 10%</b>	1		
PHOSPHOLINE IODIDE - echothiophate iodide ophth for soln 0.125%	3		LD

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<b>pilocarpine hcl ophth soln 1%, 2%, 4%</b>	1		
<b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)</b>	1		
PRED MILD - prednisolone acetate ophth susp 0.12%	3		
<b>prednisolone acetate ophth susp 1% (Pred forte)</b>	1		
PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%	3		
<b>proparacaine hcl ophth soln 0.5% (Alcaine)</b>	1		
RESTASIS - cyclosporine (ophth) emulsion 0.05%	2		PA, QL (60 vials/30 days)
RHOPRESSA - netarsudil dimesylate ophth soln 0.02%	3		QL (2.5 mls/30 days)
ROCKLATAN - netarsudil dimesylate-latanoprost ophth soln 0.02-0.005%	3		QL (2.5 mls/30 days)
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%	2		
SULFACETAMIDE SODIUM - sulfacetamide sodium ophth oint 10%	3		
<b>sulfacetamide sodium ophth soln 10%</b>	1		
SULFACETAMIDE SODIUM/PRED - sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	3		
<b>tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)</b>	1		QL (30 containers/30 days)
<b>tetracaine hcl ophth soln 0.5%</b>	1		
<b>timolol maleate ophth gel forming soln 0.25%, 0.5% (Timoptic-xe)</b>	1		
<b>timolol maleate ophth soln 0.25%, 0.5% (Timoptic)</b>	1		
<b>timolol maleate ophth soln 0.5% (once-daily) (Istalol)</b>	1		
<b>timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose)</b>	1		
<b>timolol ophth soln 0.5% (Betimol)</b>	1		
TOBRADEX - tobramycin-dexamethasone ophth oint 0.3-0.1%	2		
TOBRADEX ST - tobramycin-dexamethasone ophth susp 0.3-0.05%	3		
<b>tobramycin ophth soln 0.3%</b>	1		
<b>tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)</b>	1		
TOBREX - tobramycin ophth oint 0.3%	3		
TRAVATAN Z - travoprost ophth soln 0.004% (benzalkonium free) (bak free)	3		QL (2.5 mls/30 days)
<b>travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)</b>	1		QL (2.5 mls/30 days)
TRIFLURIDINE - trifluridine ophth soln 1%	2		

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<b>tropicamide ophth soln 0.5%</b>	1		
<b>tropicamide ophth soln 1% (Mydracyl)</b>	1		
TYRVAYA - varenicline tartrate nasal soln 0.03 mg/act	3		PA, QL (2 bottles/30 days)
XIIDRA - lifitegrast ophth soln 5%	2		PA, QL (60 vials/30 days)
ZERVIAE - cetirizine hcl ophth soln 0.24% (base equiv)	3		PA, QL (60 vials/30 days)
ZIRGAN - ganciclovir ophth gel 0.15%	3		
<b>OTIC AGENTS</b>			
<b>acetic acid otic soln 2%</b>	1		
CIPRO HC - ciprofloxacin-hydrocortisone otic susp 0.2-1%	3		
<b>ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal)</b>	1		
<b>ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)</b>	1		
CORTISPORIN-TC - neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	3		
DERMOTIC - fluocinolone acetonide (otic) oil 0.01%	3		
<b>fluocinolone acetonide (otic) oil 0.01% (Dermotic)</b>	1		
<b>hydrocortisone w/ acetic acid otic soln 1-2% (Hydrocortisone/aceti)</b>	1		
<b>neomycin-polymyxin-hc otic soln 1%</b>	1		
<b>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</b>	1		
<b>ofloxacin otic soln 0.3%</b>	1		
<b>MOUTH/THROAT/DENTAL AGENTS</b>			
<b>cevimeline hcl cap 30 mg (Evoxac)</b>	1		
<b>chlorhexidine gluconate soln 0.12% (Peridex)</b>	1		
<b>clotrimazole troche 10 mg</b>	1		
DENTA 5000 PLUS SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	3		
FLUORIDEX SENSITIVITY REL - sodium fluoride-potassium nitrate gel 1.1-5%	3		
FLUORIMAX 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	3		
LIDOCAINE HCL - lidocaine hcl laryngotracheal soln 4%	3		
<b>lidocaine hcl viscous soln 2%</b>	1		
NYSTATIN - nystatin susp 100000 unit/ml	3		
<b>nystatin susp 100000 unit/ml</b>	1		
ORAVIG - miconazole buccal tab 50 mg (mouth-throat)	3		
PERIDEX - chlorhexidine gluconate soln 0.12%	3		
<b>pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)</b>	1		

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PREVIDENT RINSE - sodium fluoride rinse 0.2%	3		
PREVIDENT 5000 ENAMEL PRO - sodium fluoride-potassium nitrate gel 1.1-5%	2		
PREVIDENT 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	2		
SALAGEN - pilocarpine hcl tab 5 mg, 7.5 mg	3		
<b>sodium fluoride cream 1.1% (Prevident 5000 plus)</b>	1		
<b>sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)</b>	1		
<b>sodium fluoride paste 1.1% (Prevident 5000 boost)</b>	1		
<b>sodium fluoride rinse 0.2% (Prevident rinse)</b>	1		
SODIUM FLUORIDE 5000 PPM - sodium fluoride-potassium nitrate gel 1.1-5%	2		
SODIUM FLUORIDE/POTASSIUM - sodium fluoride-potassium nitrate gel 1.1-5%	2		
<b>stannous fluoride gel 0.4%</b>	1		
<b>triamcinolone acetonide dental paste 0.1%</b>	1		
<b>ANORECTAL AGENTS</b>			
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%	3		
ANALPRAM-HC - hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	3		
ANALPRAM-HC - hydrocortisone acetate w/ pramoxine perianal cream 1-1%	3		
ANUSOL-HC - hydrocortisone perianal cream 2.5%	3		
CORTENEMA - hydrocortisone enema 100 mg/60ml	3		
CORTIFOAM - hydrocortisone acetate perianal foam 10% (90 mg/dose)	3		
HYDROCORTISONE ACETATE/PR - hydrocortisone acetate w/ pramoxine perianal cream 1-1%	2		
<b>hydrocortisone enema 100 mg/60ml (Cortenema)</b>	1		
<b>hydrocortisone perianal cream 1% (Proctocort)</b>	1		
<b>hydrocortisone perianal cream 2.5% (Anusol-hc)</b>	1		
<b>nitroglycerin oint 0.4% (Rectiv)</b>	1		
PROCTOFOAM HC - hydrocortisone acetate w/ pramoxine perianal foam 1-1%	2		
RECTIV - nitroglycerin oint 0.4%	3		
<b>DERMATOLOGICALS</b>			
<b>acitretin cap 10 mg, 17.5 mg, 25 mg</b>	1		
<b>acyclovir oint 5% (Zovirax)</b>	1		
<b>adapalene gel 0.1%</b>	1		

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ADBRY - tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	2	SP	PA, LD, QL (2 pens/28 days)
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	2	SP	PA, LD, QL (4 syringes/28 days)
AFTERTEST TOPICAL PAIN RE - benzocaine stick 10%	3		
<b>alclometasone dipropionate cream 0.05%</b>	1		QL (120 grams/30 days)
<b>alclometasone dipropionate oint 0.05%</b>	1		QL (120 grams/30 days)
<b>azelaic acid gel 15% (Finacea)</b>	1		
BENZAMYCIN - benzoyl peroxide-erythromycin gel 5-3%	3		
<b>benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)</b>	1		
BETAMETHASONE DIPROPIONAT - betamethasone dipropionate augmented gel 0.05%	3		ST, QL (200 grams/28 days)
<b>betamethasone dipropionate augmented cream 0.05%</b>	1		QL (200 grams/28 days)
<b>betamethasone dipropionate augmented lotion 0.05%</b>	1		QL (210 mls/30 days)
<b>betamethasone dipropionate augmented oint 0.05% (Diprolene)</b>	1		QL (200 grams/28 days)
<b>betamethasone dipropionate cream 0.05%</b>	1		QL (135 grams/30 days)
<b>betamethasone dipropionate lotion 0.05%</b>	1		QL (120 mls/30 days)
<b>betamethasone dipropionate oint 0.05%</b>	1		QL (135 grams/30 days)
<b>betamethasone valerate cream 0.1% (base equivalent)</b>	1		QL (135 grams/30 days)
<b>betamethasone valerate lotion 0.1% (base equivalent)</b>	1		QL (120 mls/30 days)
<b>betamethasone valerate oint 0.1% (base equivalent)</b>	1		QL (135 grams/30 days)
<b>bexarotene gel 1% (Targretin)</b>	1	SP	PA
<b>brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)</b>	1		
CALCIPOTRIENE - calcipotriene soln 0.005% (50 mcg/ml)	2		QL (120 mls/30 days)
<b>calcipotriene cream 0.005% (Dovonex)</b>	1		QL (120 grams/30 days)
<b>calcipotriene oint 0.005%</b>	1		QL (120 grams/30 days)
<b>calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex)</b>	1		QL (120 grams/30 days)
<b>calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex)</b>	1		QL (120 grams/30 days)
CALCITRIOL - calcitriol oint 3 mcg/gm	3		QL (200 grams/30 days)
CIBINQO - abrocitinib tab 50 mg, 100 mg, 200 mg	2	SP	PA, QL (30 tablets/30 days)
<b>ciclopirox gel 0.77%</b>	1		

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<b>ciclopirox olamine cream 0.77% (base equiv) (Loprox)</b>	1		
<b>ciclopirox olamine susp 0.77% (base equiv) (Loprox)</b>	1		
<b>ciclopirox shampoo 1% (Loprox shampoo)</b>	1		
<b>ciclopirox solution 8% (Penlac Nail Lacquer)</b>	1		QL (6.6 mls/30 days)
CLEOCIN-T - clindamycin phosphate lotion 1%	3		
<b>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</b>	1		
<b>clindamycin phosphate gel 1% (Clindagel)</b>	1		
<b>clindamycin phosphate lotion 1% (Cleocin-t)</b>	1		
<b>clindamycin phosphate soln 1%</b>	1		QL (120 grams/30 days)
<b>clindamycin phosphate swab 1%</b>	1		
<b>clindamycin phosphate-benzoyl peroxide gel 1-5%</b>	1		
<b>clobetasol propionate cream 0.05%</b>	1		QL (210 grams/28 days)
<b>clobetasol propionate emollient base cream 0.05%</b>	1		QL (210 grams/28 days)
<b>clobetasol propionate gel 0.05%</b>	1		QL (210 grams/28 days)
<b>clobetasol propionate oint 0.05%</b>	1		QL (210 grams/28 days)
<b>clobetasol propionate soln 0.05%</b>	1		QL (200 mls/28 days)
<b>clocortolone pivalate cream 0.1% (Cloderm)</b>	1		QL (135 grams/30 days)
CLODERM - clocortolone pivalate cream 0.1%	3		ST, QL (135 grams/30 days)
<b>clotrimazole w/ betamethasone cream 1-0.05%</b>	1		
CONDYLOX - podofilox gel 0.5%	3		
CORDRAN - flurandrenolide tape 4 mcg/sqcm	3		ST, QL (1 box/30 days)
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	2	SP	PA, LD, QL (1 syringe/28 days)
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	2	SP	PA, LD, QL (2 syringes/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	2	SP	PA, LD, QL (1 pen/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	2	SP	PA, LD, QL (2 pens/28 days)
COSENTYX UNOREADY - secukinumab subcutaneous soln auto-injector 300 mg/2ml	2	SP	PA, LD, QL (1 pen/28 days)
CROTAN - crotamiton lotion 10%	3		
DERMA-SMOOTH/FS BODY - fluocinolone acetonide oil 0.01% (body oil)	3		ST, QL (118.28 mls/30 days)
DERMA-SMOOTH/FS SCALP - fluocinolone acetonide oil 0.01% (scalp oil)	3		ST, QL (118.28 mls/30 days)
<b>desonide cream 0.05% (Desowen)</b>	1		QL (120 grams/30 days)
<b>desonide oint 0.05%</b>	1		QL (120 grams/30 days)
<b>desoximetasone cream 0.05%, 0.25% (Topicort)</b>	1		QL (120 grams/30 days)

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<b>desoximetasone gel 0.05% (Topicort)</b>	1		QL (120 grams/30 days)
<b>desoximetasone oint 0.05%, 0.25% (Topicort)</b>	1		QL (120 grams/30 days)
<b>desoximetasone spray 0.25% (Topicort)</b>	1		QL (100 mls/30 days)
<b>diclofenac sodium soln 1.5%</b>	1		QL (150 mls/30 days)
DIPROLENE - betamethasone dipropionate augmented oint 0.05%	3		ST, QL (200 grams/28 days)
<b>doxepin hcl cream 5% (Prudoxin)</b>	1		PA, QL (45 grams/30 days)
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml	2	SP	PA, QL (2 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	2	SP	PA, QL (2 syringes/28 days)
DYCLOPRO - dyclonine hcl soln 0.5%	3		
<b>econazole nitrate cream 1%</b>	1		QL (120 grams/30 days)
EFUDEX - fluorouracil cream 5%	3		QL (240 grams/84 days)
ELIMITE - permethrin cream 5%	3		
EPIFOAM - pramoxine-hc aerosol foam 1-1%	3		
ERTACZO - sertaconazole nitrate cream 2%	3		PA
ERY - erythromycin pads 2%	3		
ERYGEL - erythromycin gel 2%	3		
<b>erythromycin gel 2% (Erygel)</b>	1		
<b>erythromycin soln 2%</b>	1		
EXELDERM - sulconazole nitrate solution 1%	3		PA
EXELDERM - sulconazole nitrate cream 1%	3		PA
FILSUEVZ - birch triterpenes gel 10%	3	SP	PA, LD, QL (30 tubes/30 days)
<b>fluocinolone acetonide cream 0.01%</b>	1		QL (120 grams/30 days)
<b>fluocinolone acetonide cream 0.025% (Synalar)</b>	1		QL (120 grams/30 days)
<b>fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)</b>	1		QL (118.28 mls/30 days)
<b>fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)</b>	1		QL (118.28 mls/30 days)
<b>fluocinolone acetonide oint 0.025% (Synalar)</b>	1		QL (120 grams/30 days)
<b>fluocinolone acetonide soln 0.01% (Synalar)</b>	1		QL (120 mls/30 days)
FLUOCINONIDE - fluocinonide gel 0.05%	2		ST, QL (120 grams/30 days)
<b>fluocinonide cream 0.05%</b>	1		QL (120 grams/30 days)
<b>fluocinonide emulsified base cream 0.05%</b>	1		QL (120 grams/30 days)
<b>fluocinonide oint 0.05%</b>	1		QL (120 grams/30 days)
<b>fluocinonide soln 0.05%</b>	1		QL (120 mls/30 days)
FLUOROURACIL - fluorouracil soln 2%	3		
<b>fluorouracil cream 5% (Efudex)</b>	1		QL (240 grams/84 days)
<b>fluorouracil soln 5%</b>	1		

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<b>fluticasone propionate cream 0.05%</b>	1		QL (120 grams/30 days)
<b>fluticasone propionate oint 0.005%</b>	1		QL (120 grams/30 days)
<b>gentamicin sulfate cream 0.1%</b>	1		QL (60 grams/30 days)
<b>gentamicin sulfate oint 0.1%</b>	1		
<b>halcinonide cream 0.1% (Halog)</b>	1		QL (120 grams/30 days)
<b>halobetasol propionate cream 0.05%</b>	1		QL (200 grams/28 days)
HALOG - halcinonide soln 0.1%	3		ST, QL (120 mls/30 days)
HALOG - halcinonide oint 0.1%	3		ST, QL (120 grams/30 days)
HYDROCORTISONE - hydrocortisone lotion 2.5%	2		ST, QL (118 mls/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate soln 0.1%	3		ST, QL (120 mls/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate cream 0.1%	3		ST, QL (135 grams/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate oint 0.1%	3		ST, QL (135 grams/30 days)
<b>hydrocortisone cream 2.5%</b>	1		QL (454 grams/30 days)
<b>hydrocortisone oint 2.5%</b>	1		QL (454 grams/30 days)
<b>hydrocortisone valerate cream 0.2%</b>	1		QL (120 grams/30 days)
<b>hydrocortisone valerate oint 0.2%</b>	1		QL (120 grams/30 days)
HYFTOR - sirolimus gel 0.2%	3		PA, LD, QL (70 grams/84 days)
<b>imiquimod cream 5%</b>	1		QL (48 packets/112 days)
<b>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)</b>	1		
<b>ivermectin cream 1% (Soolantra)</b>	1		PA
<b>ketoconazole cream 2%</b>	1		QL (120 grams/30 days)
<b>ketoconazole shampoo 2%</b>	1		
KLARON - sulfacetamide sodium lotion 10% (acne)	3		
KLISYRI - tirbanibulin ointment 1%	3		PA, QL (5 packets/90 days)
<b>lidocaine hcl soln 4%</b>	1		
<b>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</b>	1		
<b>lidocaine oint 5%</b>	1		QL (100 grams/30 days)
<b>lidocaine patch 5% (Lidoderm)</b>	1		PA, QL (90 patches/30 days)
<b>lidocaine-prilocaine cream 2.5-2.5%</b>	1		QL (60 grams/30 days)
LITFULO - ritlecitinib tosylate cap 50 mg (base equiv)	3	SP	PA, LD, QL (28 capsules/28 days)
MAFENIDE ACETATE - mafenide acetate packet for topical soln 5% (50 gm)	2		
<b>malathion lotion 0.5% (Ovide)</b>	1		
METHOXSALEN - methoxsalen rapid cap 10 mg	3		
METROGEL - metronidazole gel 1%	3		

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METROLOTION - metronidazole lotion 0.75%	3		
<b>metronidazole cream 0.75% (Metrocream)</b>	1		
<b>metronidazole gel 0.75%</b>	1		
<b>metronidazole gel 1% (Metrogel)</b>	1		
<b>metronidazole lotion 0.75% (Metro lotion)</b>	1		
<b>mometasone furoate cream 0.1%</b>	1		QL (135 grams/30 days)
<b>mometasone furoate oint 0.1%</b>	1		QL (135 grams/30 days)
<b>mometasone furoate solution 0.1% (lotion)</b>	1		QL (120 mls/30 days)
<b>mupirocin oint 2%</b>	1		
NATROBA - spinosad susp 0.9%	3		
NEO-SYNALAR - neomycin sulfate-fluocinolone acetone cream 0.5-0.025%	3		
<b>nystatin cream 100000 unit/gm</b>	1		
<b>nystatin oint 100000 unit/gm</b>	1		
<b>nystatin topical powder 100000 unit/gm</b>	1		
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</b>	1		
<b>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</b>	1		
OPZELURA - ruxolitinib phosphate cream 1.5%	3		PA, QL (60 grams/30 days)
OVIDE - malathion lotion 0.5%	3		
<b>oxiconazole nitrate cream 1% (Oxistat)</b>	1		PA
PANRETIN - alitretinoin gel 0.1%	3		
<b>penciclovir cream 1% (Denavir)</b>	1		
<b>permethrin cream 5%</b>	1		
<b>pimecrolimus cream 1% (Elidel)</b>	1		ST, QL (100 grams/30 days)
PODOFILOX - podofilox soln 0.5%	2		
<b>podofilox gel 0.5% (Condylox)</b>	1		
REGRANEX - becaplermin gel 0.01%	3		
RETIN-A - tretinoin gel 0.01%, 0.025%	3		
SANTYL - collagenase oint 250 unit/gm	2		QL (90 grams/30 days)
<b>selenium sulfide lotion 2.5%</b>	1		
SILIQ - brodalumab subcutaneous soln prefilled syringe 210 mg/1.5ml	3	SP	PA, QL (2 syringes/28 days)
SILVADENE - silver sulfadiazine cream 1%	3		
<b>silver sulfadiazine cream 1% (Silvadene)</b>	1		
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	2	SP	PA, QL (1 syringe/84 days)
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	2	SP	PA, QL (1 pen/84 days)
SOOLANTRA - ivermectin cream 1%	2		
SOTYKTU - deucravacitinib tab 6 mg	2	SP	PA, LD, QL (30 tablets/30 days)

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SPEVIGO - spesolimab-sbzo subcutaneous soln pref syr 150 mg/ml	3	SP	PA, QL (2 syringes/28 days)
SPINOSAD - spinosad susp 0.9%	3		
STELARA - ustekinumab inj 45 mg/0.5ml	2	SP	PA, QL (1 vial/84 days)
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml	2	SP	PA, QL (1 syringe/84 days)
STELARA - ustekinumab soln prefilled syringe 90 mg/ml	2	SP	PA, QL (1 syringe/56 days)
SULCONAZOLE NITRATE - sulconazole nitrate solution 1%	3		PA
SULCONAZOLE NITRATE - sulconazole nitrate cream 1%	3		PA
<b>sulfacetamide sodium lotion 10% (acne) (Klaron)</b>	1		
SULFAMYLON - mafenide acetate cream 85 mg/gm	3		
<b>tacrolimus oint 0.03%, 0.1% (Protopic)</b>	1		ST, QL (100 grams/30 day)
TALTZ - ixekizumab subcutaneous soln auto-injector 80 mg/ml	3	SP	PA, LD, QL (1 pen/28 days)
TALTZ - ixekizumab subcutaneous soln prefilled syringe 20 mg/0.25ml, 40 mg/0.5ml, 80 mg/ml	3	SP	PA, LD, QL (1 syringe/28 days)
<b>tazarotene cream 0.05%, 0.1% (Tazorac)</b>	1		QL (120 grams/30 days)
<b>tazarotene gel 0.05%, 0.1% (Tazorac)</b>	1		QL (100 grams/30 days)
TAZORAC - tazarotene cream 0.05%	3		QL (120 grams/30 days)
TAZORAC - tazarotene gel 0.05%, 0.1%	3		QL (100 grams/30 days)
TOLAK - fluorouracil cream 4%	3		PA, QL (40 grams/28 days)
TOPICORT - desoximetasone cream 0.25%	3		ST, QL (120 grams/30 days)
TOPICORT - desoximetasone gel 0.05%	3		ST, QL (120 grams/30 days)
TOPICORT - desoximetasone oint 0.25%	3		ST, QL (120 grams/30 days)
TREMFYA - guselkumab soln auto-injector 100 mg/ml	2	SP	PA, QL (1 pen/56 days)
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	2	SP	PA, QL (1 syringe/56 days)
<b>tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)</b>	1		
<b>tretinoin gel 0.01%, 0.025% (Retin-a)</b>	1		
<b>triamcinolone acetone aerosol soln 0.147 mg/gm (Kenalog)</b>	1		QL (126 grams/30 days)
<b>triamcinolone acetone cream 0.025%, 0.1%, 0.5%</b>	1		QL (454 grams/30 days)
<b>triamcinolone acetone lotion 0.025%, 0.1%</b>	1		QL (120 mls/30 days)
<b>triamcinolone acetone oint 0.025%, 0.1%</b>	1		QL (454 grams/30 days)
<b>triamcinolone acetone oint 0.5%</b>	1		QL (120 grams/30 days)
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	2	SP	LD

**MISCELLANEOUS PRODUCTS****ANTIDOTES**

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CHEMET - succimer cap 100 mg	2	SP	PA
<b>deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)</b>	1	SP	
<b>deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)</b>	1	SP	
<b>deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)</b>	1	SP	
<b>deferiprone tab 500 mg, 1000 mg (Ferriprox)</b>	1	SP	
EXJADE - deferasirox tab for oral susp 125 mg, 250 mg, 500 mg	3	SP	
FERRIPROX - deferiprone tab 500 mg, 1000 mg	3	SP	LD
FERRIPROX - deferiprone oral soln 100 mg/ml	3	SP	LD
JADENU - deferasirox tab 90 mg, 180 mg, 360 mg	3	SP	
JADENU SPRINKLE - deferasirox granules packet 90 mg, 180 mg, 360 mg	3	SP	
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	2		QL (4 bottles/30 days)
<b>naloxone hcl inj 0.4 mg/ml</b>	1		QL (4 vials/30 days)
<b>naloxone hcl inj 4 mg/10ml</b>	1		QL (1 vial/30 days)
<b>naloxone hcl nasal spray 4 mg/0.1ml (Narcan)</b>	1		QL (4 bottles/30 days)
<b>naloxone hcl soln prefilled syringe 2 mg/2ml</b>	1		QL (4 syringes/30 days)
NALOXONE HYDROCHLORIDE - naloxone hcl soln cartridge 0.4 mg/ml	3		QL (4 cartridges/30 days)
<b>naltrexone hcl tab 50 mg</b>	1		
NARCAN - naloxone hcl nasal spray 4 mg/0.1ml	3		QL (4 bottles/30 days)
OPVEE - nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	2		QL (4 bottles/30 days)
RADIOGARDASE - prussian blue insoluble cap 0.5 gm	3		
REXTOVY - naloxone hcl nasal spray 4 mg/0.25ml	2		QL (4 devices/30 days)
VISTOGARD - uridine triacetate oral granules packet 10 gm	3	SP	PA, LD
VIVITROL - naltrexone for im extended release susp 380 mg	3	SP	
ZIMHI - naloxone hcl soln prefilled syringe 5 mg/0.5ml	3		QL (4 syringes/30 days)
<b>DIAGNOSTIC PRODUCTS</b>			
ACCU-CHEK AVIVA PLUS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK COMPACT STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK COMPACT TEST DR - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK GUIDE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK GUIDE TEST STRI - glucose blood test strip	3		PA, QL (204 strips/30 days)

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ACCU-CHEK SMARTVIEW STRIP - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCUTREND GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVANCE INTUITION TEST ST - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVANCE MICRO-DRAW TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVOCATE REDI-CODE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVOCATE REDI-CODE+ TEST - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVOCATE TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX AMP NO CODE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX JAZZ TEST STRIP - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX KEYNOTE TEST ST - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX PRESTO TEST STR - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE II - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE II CHECK STRIP - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE II TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE PLATINUM TEST STRI - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE PRISM MULTI TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE PRO TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE 3 TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE 4 TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
AT LAST TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
BIOTEL CARE BLOOD GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
BLOOD GLUCOSE TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
BLULINK GLUCOSE TEST STRI - glucose blood test strip	3		PA, QL (204 strips/30 days)
CAREONE BLOOD GLUCOSE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
CARESENS N BLOOD GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
CARETOUCH BLOOD GLUCOSE T - glucose blood test strip	3		PA, QL (204 strips/30 days)

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CHEMSTRIP-K - acetone (urine) test strip	2		
CLEVER CHEK AUTO-CODE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
CLEVER CHEK AUTO-CODE VOI - glucose blood test strip	3		PA, QL (204 strips/30 days)
CLEVER CHEK TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
CLEVER CHOICE AUTO-CODE P - glucose blood test strip	3		PA, QL (204 strips/30 days)
CLEVER CHOICE MICRO TEST - glucose blood test strip	3		PA, QL (204 strips/30 days)
CLEVER CHOICE NO CODING T - glucose blood test strip	3		PA, QL (204 strips/30 days)
CLEVER CHOICE TALK NO COD - glucose blood test strip	3		PA, QL (204 strips/30 days)
CONTOUR BLOOD GLUCOSE TES - glucose blood test strip	2		QL (204 strips/30 days)
CONTOUR NEXT BLOOD GLUCOS - glucose blood test strip	2		QL (204 strips/30 days)
CONTOUR PLUS BLOOD GLUCOS - glucose blood test strip	2		QL (204 strips/30 days)
COOL BLOOD GLUCOSE TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)
CVS ADVANCED GLUCOSE METE - glucose blood test strip	3		PA, QL (204 strips/30 days)
CVS GLUCOSE METER TEST ST - glucose blood test strip	3		PA, QL (204 strips/30 days)
CVS TRUE METRIX BLOOD GLU - glucose blood test strip	3		PA, QL (204 strips/30 days)
DIATHRIVE BLOOD GLUCOSE T - glucose blood test strip	3		PA, QL (204 strips/30 days)
DIATHRIVE+ BLOOD GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
DUO-CARE TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
EASY MAX BLOOD GLUCOSE TE - glucose blood test strip	3		PA, QL (204 strips/30 days)
EASY PLUS II BLOOD GLUCOS - glucose blood test strip	3		PA, QL (204 strips/30 days)
EASY STEP TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
EASY TALK BLOOD GLUCOSE T - glucose blood test strip	3		PA, QL (204 strips/30 days)
EASY TALK PLUS II BLOOD G - glucose blood test strip	3		PA, QL (204 strips/30 days)
EASY TOUCH GLUCOSE TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)

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KROGER PREMIUM BLOOD GLUC - glucose blood test strip	3		PA, QL (204 strips/30 days)
LIBERTY NEXT GENERATION B - glucose blood test strip	3		PA, QL (204 strips/30 days)
LIBERTY TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
MEIJER BLOOD GLUCOSE TEST - glucose blood test strip	3		PA, QL (204 strips/30 days)
MEIJER ESSENTIAL BLOOD GL - glucose blood test strip	3		PA, QL (204 strips/30 days)
MEIJER TRUETEST BLOOD GLU - glucose blood test strip	3		PA, QL (204 strips/30 days)
MEIJER TRUETRACK BLOOD GL - glucose blood test strip	3		PA, QL (204 strips/30 days)
METOPIRONE - metyrapone cap 250 mg	3	SP	LD
MICRODOT TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
MICRODOT XTRA TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
MM BLULINK GLUCOSE TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)
MM EASY TOUCH GLUCOSE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
MYGLUCOHEALTH BLOOD GLUCO - glucose blood test strip	3		PA, QL (204 strips/30 days)
NEUTEK 2TEK TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
NOVA MAX GLUCOSE TEST STR - glucose blood test strip	3		PA, QL (204 strips/30 days)
ON CALL EXPRESS BLOOD GLU - glucose blood test strip	3		PA, QL (204 strips/30 days)
ONE DROP BLOOD GLUCOSE TE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ONETOUCH ULTRA - glucose blood test strip	2		QL (204 strips/30 days)
ONETOUCH ULTRA BLUE TEST - glucose blood test strip	2		QL (204 strips/30 days)
ONETOUCH ULTRA TEST STRIP - glucose blood test strip	2		QL (204 strips/30 days)
ONETOUCH VERIO TEST STRIP - glucose blood test strip	2		QL (204 strips/30 days)
OPTIUMEZ TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
PHARMACIST CHOICE AUTOCOD - glucose blood test strip	3		PA, QL (204 strips/30 days)
PHARMACIST CHOICE NO CODI - glucose blood test strip	3		PA, QL (204 strips/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PIP BLOOD GLUCOSE TEST ST - glucose blood test strip	3		PA, QL (204 strips/30 days)
POCKETCHEM EZ BLOOD GLUCO - glucose blood test strip	3		PA, QL (204 strips/30 days)
POGO AUTOMATIC TEST CARTR - glucose blood test automatic cartridge	3		PA, QL (200 strips/30 days)
PRECISION SOF-TACT TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)
PRECISION XTRA BLOOD GLUC - glucose blood test strip	3		PA, QL (204 strips/30 days)
PREMIUM BLOOD GLUCOSE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
PRO VOICE V8/V9 BLOOD GLU - glucose blood test strip	3		PA, QL (204 strips/30 days)
PRODIGY NO CODING BLOOD G - glucose blood test strip	3		PA, QL (204 strips/30 days)
PTS PANELS EGLU - glucose blood test strip	3		PA, QL (204 strips/30 days)
QUICKTEK TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
QUINTET AC BLOOD GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
QUINTET BLOOD GLUCOSE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
REFUAH PLUS BLOOD GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
RELION CONFIRM/MICRO TEST - glucose blood test strip	3		PA, QL (204 strips/30 days)
RELION KETONE TEST STRIPS - acetone (urine) test strip	2		
RELION PLATINUM BLOOD GLU - glucose blood test strip	3		PA, QL (204 strips/30 days)
RELION PREMIER BLOOD GLUC - glucose blood test strip	3		PA, QL (204 strips/30 days)
RELION PRIME BLOOD GLUCOS - glucose blood test strip	3		PA, QL (204 strips/30 days)
RELION TRUE METRIX BLOOD - glucose blood test strip	3		PA, QL (204 strips/30 days)
RELION ULTIMA BLOOD GLUCO - glucose blood test strip	3		PA, QL (204 strips/30 days)
REXALL BLOOD GLUCOSE TEST - glucose blood test strip	3		PA, QL (204 strips/30 days)
RIGHTEST GS100 BLOOD GLUC - glucose blood test strip	3		PA, QL (204 strips/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ACCU-CHEK SAFE-T-PRO PLUS - lancets	2		
ACCU-CHEK SOFTCLIX LANCET - lancets	2		
ACCU-CHEK SOFTCLIX LANCET - lancets kit	2		
ACTI-LANCE LANCETS 28G - lancets	2		
ACTI-LANCE LITE SAFETY LA - lancets	2		
ACTI-LANCE SPECIAL SAFETY - lancets	2		
ACTI-LANCE UNIVERSAL SAFE - lancets	2		
ADJUSTABLE LANCING DEVICE - lancet devices	2		
ADVANCE INTUITION BLOOD G - blood glucose monitoring devices	3		
ADVANCE INTUITION BLOOD G - blood glucose monitoring kit w/ device	3		
ADVANCE MICRO-DRAW METER - blood glucose monitoring devices	3		
ADVANCED MOBILE LANCET 30 - lancets	2		
ADVOCATE BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
ADVOCATE BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
ADVOCATE INSULIN PEN NEED - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ADVOCATE INSULIN PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
ADVOCATE INSULIN PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ADVOCATE INSULIN PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
ADVOCATE INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ADVOCATE LANCETS - lancets	2		
ADVOCATE LANCETS 30G - lancets	2		
ADVOCATE LANCING DEVICE - lancet devices	2		
ADVOCATE RAPID-SAFE LANCI - lancet devices	2		
ADVOCATE REDI-CODE - blood glucose monitoring devices	3		
ADVOCATE REDI-CODE+ BLOOD - blood glucose monitoring devices	3		
ADVOCATE REDI-CODE/TALKIN - blood glucose monitoring kit w/ device	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ADVOCATE SAFETY LANCETS 2 - lancets	2		
AEROCHAMBER HOLDING CHAMB - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER MINI AEROSOL - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER MV - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER PLUS FLOW VU - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER PLUS FLOW-VU/ - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER Z-STAT PLUS V - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER Z-STAT PLUS/F - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER Z-STAT PLUS/L - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER Z-STAT PLUS/M - spacer/aerosol-holding chambers - device	2		
AEROCHAMBER Z-STAT PLUS/S - spacer/aerosol-holding chambers - device	2		
AF LANCETS SUPER THIN - lancets	2		
AGAMATRIX AMP NO CODE ADV - blood glucose monitoring devices	3		
AGAMATRIX JAZZ WIRELESS 2 - blood glucose monitoring kit w/ device	3		
AGAMATRIX PRESTO - blood glucose monitoring kit w/ device	3		
AGAMATRIX PRESTO PRO METE - blood glucose monitoring devices	3		
AGAMATRIX ULTRA-THIN LANC - lancets	2		
AIMSCO LUBRICATED - condoms latex lubricated	3		
AIMSCO TWIST LANCETS 32G - lancets	2		
AIMSCO TWIST LANCETS 33G - lancets	2		
AQ INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 30 x 5/16"	2		
AQ INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
AQ INSULIN SYRINGE/1ML/31 - insulin syringe/needle u-100 1 ml 31 x 5/16"	2		
AQINJECT PEN NEEDLE/31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
AQINJECT PEN NEEDLE/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ASSURE COMFORT LANCETS UL - lancets	2		
ASSURE ID DUO PRO SAFETY - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ASSURE ID PRO SAFETY PEN - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
ASSURE ID SAFETY PEN NEED - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
ASSURE LANCE LANCETS - lancets	2		
ASSURE LANCE LANCETS 21G - lancets	2		
ASSURE LANCE PLUS SAFETY - lancets	2		
ASSURE LANCE SAFETY LANCE - lancets	2		
ASSURE PLATINUM BLOOD GLU - blood glucose monitoring devices	3		
ASSURE PRISM MULTI BLOOD - blood glucose monitoring devices	3		
ASSURE PRO BLOOD GLUCOSE - blood glucose monitoring devices	3		
ASSURE 3 METER - blood glucose monitoring kit	3		
ASSURE 4 BLOOD GLUCOSE ME - blood glucose monitoring devices	3		
AT LAST BLOOD GLUCOSE SYS - blood glucose monitoring kit	3		
AT LAST LANCETS - lancets	2		
AUM INSULIN SAFETY PEN NE - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
AUM MINI INSULIN PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
AUM MINI INSULIN PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
AUM PEN NEEDLE/32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
AUM PEN NEEDLE/32GX5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2		
AUM PEN NEEDLE/32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
AUM PEN NEEDLE/33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
AUM PEN NEEDLE/33GX5MM - insulin pen needle 33 g x 5 mm (1/5" or 3/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
AUM PEN NEEDLE/33GX6MM - insulin pen needle 33 g x 6 mm (1/4" or 15/64")	2		
AUM READYGARD DUO SAFETY - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
AUM SAFETY PEN NEEDLE/31 - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
AURORA LANCET SUPER THIN - lancets	2		
AURORA LANCET THIN 23G - lancets	2		
AURORA PEN NEEDLES 29GX12 - insulin pen needle 29 g x 12 mm (1/2")	2		
AURORA PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
AUTO-LANCET - lancet devices	2		
AUTO-LANCET MINI - lancet devices	2		
AUTOLET IMPRESSION LANCIN - lancet devices	2		
AUTOLET LANCING DEVICE - lancet devices	2		
AUTOLET MINI - lancet devices	2		
AUTOLET PLUS - lancet devices	2		
AUTOPEN - injection device for insulin	3		
B-D INSULIN SYRINGE MICRO - insulin syringe/needle u-100 1 ml 28 x 1/2"	2		
B-D INSULIN SYRINGE ULTRA - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 5/16"	2		
BD LO-DOSE INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2		
BD ALLERGY SYRINGE 0.5ML/ - tuberculin/allergy syringe/needle (disp) 1/2 ml 27 x 1/2", 1/2 ml 27 x 3/8"	3		
BD ALLERGY SYRINGE 1ML/27 - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 3/8"	3		
BD ALLERGY SYRINGE/NEEDLE - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 3/8"	3		
BD ALLERGY/SYRINGE/NEEDLE - tuberculin/allergy syringe/needle (disp) 1 ml 28 x 1/2"	3		
BD AUTOSHIELD DUO 30G X 5 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
BD BLUNT FILL NEEDLE/FILT - needle (disp) 18 x 1-1/2"	3		
BD BLUNT FILL NEEDLE/18G - needle (disp) 18 x 1-1/2"	3		
BD DISPOSABLE NEEDLE REGU - needle (disp) 25 x 1"	2		
BD DISPOSABLE NEEDLE 23GX - needle (disp) 23 x 1"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BD ECLIPSE NEEDLE 21G X 1 - needle (disp) 21 x 1", 21 x 1-1/2"	3		
BD ECLIPSE NEEDLE 25G X 1 - needle (disp) 25 x 1-1/2"	3		
BD ECLIPSE NEEDLE 25GX1" - needle (disp) 25 x 1"	2		
BD ECLIPSE NEEDLE 27G X 1 - needle (disp) 27 x 1/2"	3		
BD ECLIPSE NEEDLE/LUER-LO - needle (disp) 30 x 1/2"	3		
BD ECLIPSE NEEDLE/18G X 1 - needle (disp) 18 x 1-1/2"	3		
BD ECLIPSE NEEDLE/23G X 1 - needle (disp) 23 x 1"	3		
BD ECLIPSE NEEDLE/25G X - needle (disp) 25 x 5/8"	3		
BD ECLIPSE 18G X 1-1/2" - needle (disp) 18 x 1-1/2"	3		
BD ECLIPSE 23G X 1" NEEDL - needle (disp) 23 x 1"	3		
BD HYPODERMIC NEEDLE REGU - needle (disp) 18 x 1-1/2"	2		
BD HYPODERMIC NEEDLES 16G - needle (disp) 16 x 1"	3		
BD HYPODERMIC NEEDLES 18G - needle (disp) 18 x 1"	2		
BD HYPODERMIC NEEDLES 18G - needle (disp) 18 x 1-1/2"	3		
BD HYPODERMIC NEEDLES 19G - needle (disp) 19 x 1", 19 x 1-1/2"	3		
BD HYPODERMIC NEEDLES 21G - needle (disp) 21 x 1"	2		
BD HYPODERMIC NEEDLES 21G - needle (disp) 21 x 2"	3		
BD HYPODERMIC NEEDLES 22G - needle (disp) 22 x 1", 22 x 1-1/2"	2		
BD HYPODERMIC NEEDLES 23G - needle (disp) 23 x 3/4", 23 x 1"	3		
BD HYPODERMIC NEEDLES 25G - needle (disp) 25 x 1-1/2"	3		
BD HYPODERMIC NEEDLES 26G - needle (disp) 26 x 1/2"	2		
BD INSULIN SYRINGE LUER-L - insulin syringe (disp) u-100 1 ml	2		
BD INSULIN SYRINGE MICROF - insulin syringe/needle u-100 0.3 ml 28 x 1/2", u-100 1/2 ml 28 x 1/2", u-100 1 ml 27 x 5/8", u-100 1 ml 28 x 1/2"	2		
BD INSULIN SYRINGE SAFETY - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BD NEEDLE/21G 1-1/2" - needle (disp) 21 x 1-1/2"	2		
BD NEEDLE/22G X 1-1/2" - needle (disp) 22 x 1-1/2"	2		
BD NEEDLE/25G X 5/8" - needle (disp) 25 x 5/8"	2		
BD NEEDLE/25G X 7/8" - needle (disp) 25 x 7/8"	2		
BD NEEDLE/27G X 1/2" - needle (disp) 27 x 1/2"	2		
BD NEEDLE/30G X 1/2" - needle (disp) 30 x 1/2"	2		
BD NOKOR NEEDLE ADMIX THI - needle (disp) 18 x 1-1/2"	3		
BD NOKOR VENTED NEEDLE 18 - needle (disp) 18 x 1"	3		
BD PEN - injection device for insulin	3		
BD PEN MINI - injection device for insulin	3		
BD PEN NEEDLE/MICRO/ULTRA - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
BD PEN NEEDLE/MINI/ULTRA- - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
BD PEN NEEDLE/NANO 2ND GE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
BD PEN NEEDLE/NANO/ULTRA - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
BD PEN NEEDLE/ORIGINAL/UL - insulin pen needle 29 g x 12.7 mm (1/2")	2		
BD PEN NEEDLE/SHORT/ULTRA - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
BD PLASTIPAK SYRINGES ALL - tuberculin/allergy syringe/needle (disp) 1 ml 28 x 1/2"	3		
BD PRECISIONGLIDE NEEDLE - needle (disp) 27 x 3/8", 27 x 1-1/2"	3		
BD PRECISIONGLIDE 23GX1-1 - needle (disp) 23 x 1-1/2"	3		
BD SAFETY-GLIDE INSULIN S - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
BD SAFETYGLIDE HYPODERMIC - needle (disp) 18 x 1-1/2"	3		
BD SAFETYGLIDE HYPODERMIC - needle (disp) 25 x 5/8"	2		
BD SAFETYGLIDE INJECTION - needle (disp) 23 x 1-1/2"	3		
BD SAFETYGLIDE INSULIN SY - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BD SAFETYGLIDE NEEDLE 25G - needle (disp) 25 x 1"	3		
BD SAFETYGLIDE NEEDLE/SHI - needle (disp) 22 x 1-1/2"	3		
BD SAFETYGLIDE SHIELDED N - needle (disp) 23 x 1"	3		
BD SAFETYGLIDE SYRINGE 5M - syringe/needle (disp) 5 ml 22 x 1-1/2"	2		
BD SAFETYGLIDE 21G X 1-1/ - needle (disp) 21 x 1-1/2"	3		
BD SAFETYGLIDE 21G X 1" - needle (disp) 21 x 1"	3		
BD SYRINGE BLUNT PLASTIC - syringe (disposable) 10 ml	2		
BD SYRINGE LUER-LOK/1ML - syringe (disposable) 1 ml	2		
BD SYRINGE 10ML/20G X 1" - syringe/needle (disp) 10 ml 20 x 1"	2		
BD TB SYRINGE/NEEDLE/1ML/ - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 3/8"	3		
BD TUBERCULIN SYRINGE/NEE - tuberculin/allergy syringe/needle (disp) 1 ml 21 x 1"	3		
BD TUBERCULIN SYRINGE/SAF - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 3/8"	3		
BD VEO INSULIN SYRINGE UL - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
BD 1/2ML TUBERCULIN SYRIN - tuberculin/allergy syringe/needle (disp) 1/2 ml 27 x 1/2"	3		
BD 1ML ALLERGY SYRINGE SA - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 1/2"	3		
BD 1ML SLIP TIP SYRINGE 2 - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 26 x 3/8"	2		
BD 1ML TUBERCULIN SYRINGE - tuberculin/allergy syringe/needle (disp) 1 ml 26 x 3/8", 1 ml 27 x 1/2"	2		
BD 10ML LUER-LOK SYRINGE - syringe/needle (disp) 10 ml 21 x 1"	2		
BD 10ML SYRINGE/DUAL CANN - syringe (disposable) 10 ml	2		
BD 3ML LUER-LOK SYRINGE 1 - syringe/needle (disp) 3 ml 18 x 1-1/2"	2		
BD 3ML LUER-LOK SYRINGE/2 - syringe/needle (disp) 3 ml 20 x 1", 3 ml 23 x 1-1/2", 3 ml 25 x 1", 3 ml 26 x 5/8"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BD 3ML SYRINGE LUER-LOK 2 - syringe/needle (disp) 3 ml 21 x 1-1/2", 3 ml 22 x 1", 3 ml 22 x 1-1/2", 3 ml 23 x 1", 3 ml 25 x 5/8", 3 ml 25 x 1-1/2"	2		
BD 5ML LUER-LOK SYRINGE/2 - syringe/needle (disp) 5 ml 20 x 1", 5 ml 21 x 1-1/2", 5 ml 22 x 1", 5 ml 22 x 1-1/2"	2		
BIGFOOT UNITY PROGRAM KIT - blood glucose monitor kit w/ monitor device & digital app	3		
BIOTEL CARE BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
BIOTEL CARE CONNECTED BLO - blood glucose monitoring kit w/ device	3		
BLOOD GLUCOSE MONITORING - blood glucose monitoring devices	3		
BLOOD GLUCOSE MONITORING - blood glucose monitoring kit w/ device	3		
BLOOD GLUCOSE SYSTEM PAK - blood glucose monitoring kit w/ device	3		
BLULINK BLOOD GLUCOSE MON - blood glucose monitoring devices	3		
CARDIOCOM LANCING DEVICE - lancet devices	2		
CAREFINE PEN NEEDLE 32GX4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CAREFINE PEN NEEDLES 29GX - insulin pen needle 29 g x 12 mm (1/2")	2		
CAREFINE PEN NEEDLES 30GX - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
CAREFINE PEN NEEDLES 31GX - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CAREFINE PEN NEEDLES 32GX - insulin pen needle 32 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
CAREONE ADVANCED LANCING - lancet devices	2		
CAREONE BLOOD GLUCOSE MON - blood glucose monitoring kit w/ device	3		
CAREONE INSULIN SYRINGES/ - insulin syringe/ needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
CAREONE LANCET SUPER THIN - lancets	2		
CAREONE LANCET THIN - lancets	2		
CAREONE LANCET ULTRA THIN - lancets	2		
CAREONE UNIFINE PENTIPS P - insulin pen needle 29 g x 12 mm (1/2")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CLEVER CHOICE COMFORT EZ - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLEVER CHOICE COMFORT EZ - lancets	2		
CLEVER CHOICE MICRO BLOOD - blood glucose monitoring kit w/ device	3		
CLEVER CHOICE MINI BLOOD - blood glucose monitoring devices	3		
CLEVER CHOICE TALK BLOOD - blood glucose monitoring devices	3		
CLICKFINE PEN NEEDLE UNIV - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLICKFINE PEN NEEDLE 32GX - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CLICKFINE PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLICKFINE PEN NEEDLES 32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CLICKFINE UNIVERSAL PEN N - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
COAGUCHEK LANCETS - lancets	2		
COMFORT ASSIST INSULIN SY - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
COMFORT ASSURED LANCETS M - lancets	2		
COMFORT ASSURED LANCETS S - lancets	2		
COMFORT EZ INSULIN SYRING - insulin syringe/ needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16"	2		
COMFORT EZ MICRO/32G X 4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
COMFORT EZ PRO SAFETY PEN - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
COMFORT EZ PRO SAFETY PEN - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
COMFORT EZ SHORT/31G X 8M - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
COMFORT EZ/31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
COMFORT EZ/31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
COMFORT LANCETS - lancets	2		
COMFORT TOUCH LANCETS ULT - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CVS LANCETS THIN 26G - lancets	2		
CVS LANCETS ULTRA THIN 30 - lancets	2		
CVS LANCETS ULTRA-THIN 30 - lancets	2		
CVS LANCETS 21G - lancets	2		
CVS LANCING DEVICE - lancet devices	2		
CVS ULTRA THIN LANCETS - lancets	2		
D-CARE GLUCOMETER KIT/GLU - blood glucose monitoring kit w/ device	3		
DEXCOM G6 RECEIVER - continuous glucose system receiver	2		ST, QL (1 receiver/365 days)
DEXCOM G6 SENSOR - continuous glucose system sensor	2		ST, QL (3 sensors/30 days)
DEXCOM G6 TRANSMITTER - continuous glucose system transmitter	2		ST, QL (1 transmitter/90 days)
DEXCOM G7 RECEIVER - continuous glucose system receiver	2		ST, QL (1 receiver/365 days)
DEXCOM G7 SENSOR - continuous glucose system sensor	2		ST, QL (3 sensors/30 days)
DIABETES CARE - blood glucose monitor kit w/ monitor device & digital app	3		
DIABETES MONITORING DIGIT - blood glucose monitor kit w/ monitor device & digital app	3		
DIATHRIVE BLOOD GLUCOSE M - blood glucose monitoring devices	3		
DIATHRIVE LANCETS - lancets	2		
DIATHRIVE LANCETS ULTRA T - lancets	2		
DIATHRIVE LANCING DEVICE - lancet devices	2		
DIATHRIVE PEN NEEDLE/31 G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
DIATHRIVE PEN NEEDLE/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
DIATHRIVE PEN NEEDLE/32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
DIATHRIVE+ BLOOD GLUCOSE - blood glucose monitoring devices	3		
DROPLET GENTEEL LANCING D - lancet devices	2		
DROPLET INSULIN SYRINGE U - insulin syringe/ needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 30 x 15/64", u-100 0.5 ml 30 x 15/64", u-100 1 ml 30 x 15/64", u-100 1 ml 30 x 5/16", u-100 1 ml 30	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1 ml 31 x 15/64"			
DROPLET INSULIN SYRINGE 0 - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 1/2 ml 29 x 1/2"	2		
DROPLET INSULIN SYRINGE 1 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
DROPLET INSULIN SYRINGE/U - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 15/64", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
DROPLET LANCETS ULTRA THI - lancets	2		
DROPLET LANCING DEVICE - lancet devices	2		
DROPLET MICRON 34G X 9/64 - insulin pen needle 34 g x 3.5 mm (9/64")	2		
DROPLET PEN NEEDLE/MICRON - insulin pen needle 34 g x 3.5 mm (9/64")	2		
DROPLET PEN NEEDLES 29G X - insulin pen needle 29 g x 12 mm (1/2")	2		
DROPLET PEN NEEDLES 29GX1 - insulin pen needle 29 g x 10 mm, x 12 mm (1/2")	2		
DROPLET PEN NEEDLES 30G X - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
DROPLET PEN NEEDLES 31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
DROPLET PEN NEEDLES 31GX5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
DROPLET PEN NEEDLES 31GX6 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
DROPLET PEN NEEDLES 31GX8 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
DROPLET PEN NEEDLES 32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
DROPLET PEN NEEDLES 32GX4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
DROPLET PEN NEEDLES 32GX5 - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2		
DROPLET PEN NEEDLES 32GX6 - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
DROPLET PEN NEEDLES 32GX8 - insulin pen needle 32 g x 8 mm (1/3" or 5/16")	2		
DROPLET PERSONAL LANCETS - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
EASY TOUCH HYPODERMIC NEE - needle (disp) 16 x 1", 16 x 1-1/2", 18 x 1", 18 x 1.25" (30 mm), 18 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 1", 21 x 1-1/2", 22 x 1", 22 x 1-1/2", 23 x 3/4", 23 x 1", 23 x 1-1/4", 23 x 1-1/2", 24 x 1", 24 x 1.25" (30 mm), 25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 3/8", 26 x 1/2", 26 x 5/8", 27 x 1/2", 27 x 1-1/4", 27 x 1-1/2", 30 x 1/2", 30 x 1", 31 x 5/16" (8 mm), 32 x 5/16" (8 mm)	3		
EASY TOUCH INSULIN SYRINGE - insulin syringe/ needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 27 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 27 x 1/2", u-100 1 ml 27 x 5/8", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
EASY TOUCH LANCETS 21G/PR - lancets	2		
EASY TOUCH LANCETS 23G/PR - lancets	2		
EASY TOUCH LANCETS 26G/PR - lancets	2		
EASY TOUCH LANCETS 26G/PU - lancets	2		
EASY TOUCH LANCETS 28G/PR - lancets	2		
EASY TOUCH LANCETS 28G/PU - lancets	2		
EASY TOUCH LANCETS 28G/TW - lancets	2		
EASY TOUCH LANCETS 30G/BU - lancets	2		
EASY TOUCH LANCETS 30G/PR - lancets	2		
EASY TOUCH LANCETS 30G/PU - lancets	2		
EASY TOUCH LANCETS 30G/TW - lancets	2		
EASY TOUCH LANCETS 32G/PR - lancets	2		
EASY TOUCH LANCETS 32G/PU - lancets	2		
EASY TOUCH LANCETS 32G/TW - lancets	2		
EASY TOUCH LANCETS 33G/TW - lancets	2		
EASY TOUCH LANCING DEVICE - lancet devices	2		
EASY TOUCH PEN NEEDLE 30 - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
EASY TOUCH PEN NEEDLE/30 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
EASY TOUCH PEN NEEDLES 29 - insulin pen needle 29 g x 12 mm (1/2")	2		
EASY TOUCH PEN NEEDLES 31 - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
EASY TOUCH PEN NEEDLES 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
EASY TOUCH PEN NEEDLES/31 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
EASY TOUCH SAFETY LANCETS - lancets	2		
EASY TOUCH SAFETY PEN NEE - insulin pen needle 29 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
EASY TOUCH SAFETY PEN NEE - insulin pen needle 30 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
EASY TOUCH SHEATHLOCK SAF - insulin syringe/ needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2		
EASY TOUCH TUBERCULIN FLI - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 1/2", 1 ml 28 x 1/2"	3		
EASY TOUCH TUBERCULIN SHE - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 27 x 1/2", 1 ml 28 x 1/2"	3		
EASY TOUCH 32GX5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2		
EASY TOUCH 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
EASY TRAK BLOOD GLUCOSE M - blood glucose monitoring devices	3		
EASY TRAK II BLOOD GLUCOS - blood glucose monitoring devices	3		
EASYGLUCO - blood glucose monitoring kit	3		
EASYMAX NG SELF-MONITORIN - blood glucose monitoring devices	3		
EASYMAX NG SELF-MONITORIN - blood glucose monitoring kit w/ device	3		
EASYMAX V BLOOD GLUCOSE S - blood glucose monitoring devices	3		
EASYPOINT NEEDLE 23G X 1" - needle (disp) 23 x 1"	3		
EASYPOINT NEEDLE 25G X 1" - needle (disp) 25 x 1"	3		
EASYPOINT NEEDLE 25G X 5/ - needle (disp) 25 x 5/8"	3		
EASYPOINT NEEDLE 25GX1-1/ - needle (disp) 25 x 1-1/2"	3		
EASYPOINT NEEDLE/18G X 1- - needle (disp) 18 x 1-1/2"	3		
EASYPOINT NEEDLE/18G X 1" - needle (disp) 18 x 1"	3		
EASYPOINT NEEDLE/20G X 1- - needle (disp) 20 x 1-1/2"	3		
EASYPOINT NEEDLE/20G X 1" - needle (disp) 20 x 1"	3		
EASYPOINT NEEDLE/21G X 1- - needle (disp) 21 x 1-1/2"	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FIFTY50 SUPERIOR COMFORT - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
FIFTY50 UNILET LANCETS 33 - lancets	2		
FINGERSTIX LANCETS - lancets	2		
FLOW-EZE VENTED NEEDLE - hypodermic needles (disposable)	3		
FORA GD20 BLOOD GLUCOSE M - blood glucose monitoring devices	3		
FORA GD50 BLOOD GLUCOSE M - blood glucose monitoring devices	3		
FORA GTEL BLOOD GLUCOSE M - blood glucose monitoring devices	3		
FORA G20 BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
FORA G30A BLOOD GLUCOSE M - blood glucose monitoring devices	3		
FORA LANCETS - lancets	2		
FORA LANCING DEVICE - lancet devices	2		
FORA LANCING DEVICE/CLEAR - lancet devices	2		
FORA PREMIUM V10 BLE BLOO - blood glucose monitoring devices	3		
FORA TEST N' GO VOICE BLO - blood glucose monitoring devices	3		
FORA TN'G VOICE BLOOD GLU - blood glucose monitoring kit w/ device	3		
FORA V10 BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
FORA V10/V12/D10/D20 BLOO - blood glucose monitoring kit	3		
FORA V12 BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
FORA V20 BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
FORA V30A BLOOD GLUCOSE M - blood glucose monitoring devices	3		
FORA V30A BLOOD GLUCOSE M - blood glucose monitoring kit w/ device	3		
FORACARE GD40 BLOOD GLUCO - blood glucose monitoring devices	3		
FORACARE PREMIUM V10 BLOO - blood glucose monitoring devices	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FORACARE TEST N GO BLOOD - blood glucose monitoring devices	3		
FREESTYLE FREEDOM LITE - blood glucose monitoring kit w/ device	3		
FREESTYLE LANCETS - lancets	2		
FREESTYLE LIBRE 14 DAY/RE - continuous glucose system receiver	2		ST, QL (1 reader/365 days)
FREESTYLE LIBRE 14 DAY/SE - continuous glucose system sensor	2		ST, QL (2 sensors/28 days)
FREESTYLE LIBRE 2 PLUS/SE - continuous glucose system sensor	2		ST, QL (2 sensors/28 days)
FREESTYLE LIBRE 2/READER/ - continuous glucose system receiver	2		ST, QL (1 reader/365 days)
FREESTYLE LIBRE 2/SENSOR/ - continuous glucose system sensor	2		ST, QL (2 sensors/28 days)
FREESTYLE LIBRE 3 PLUS/SE - continuous glucose system sensor	2		ST, QL (2 sensors/28 days)
FREESTYLE LIBRE 3/READER/ - continuous glucose system receiver	2		ST, QL (1 reader/365 days)
FREESTYLE LIBRE 3/SENSOR/ - continuous glucose system sensor	2		ST, QL (2 sensors/28 days)
FREESTYLE LIBRE/READER/FL - continuous glucose system receiver	2		ST, QL (1 reader/365 days)
FREESTYLE LITE BLOOD GLUC - blood glucose monitoring devices	3		
FREESTYLE LITE BLOOD GLUC - blood glucose monitoring kit w/ device	3		
FREESTYLE PRECISION NEO B - blood glucose monitoring kit w/ device	3		
FREESTYLE UNISTICK II LAN - lancets	2		
GENTEEL BUTTERFLY TOUCH L - lancets	2		
GENTEEL PLUS LANCING DEVI - lancet devices	2		
GENTLE-LET LANCETS GENERA - lancets	2		
GENTLE-LET LANCETS SAFETY - lancets	2		
GE100 BLOOD GLUCOSE MONIT - blood glucose monitoring devices	3		
GE100 BLOOD GLUCOSE MONIT - blood glucose monitoring kit w/ device	3		
GHT BLOOD GLUCOSE MONITO - blood glucose monitoring kit w/ device	3		
GLOBAL EASE INJECT PEN NE - insulin pen needle 29 g x 12 mm (1/2")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
GLOBAL EASE INJECT PEN NE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
GLOBAL EASE INJECT PEN NE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
GLOBAL EASY GLIDE INSULIN - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
GLOBAL EASY GLIDE PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
GLOBAL INJECT EASE INSULI - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
GLOBAL INJECT EASE LANCET - lancets	2		
GLOBAL INSULIN SYRINGE/U- - insulin syringe/needle u-100 0.3 ml 30 x 1/2"	2		
GLOBAL INSULIN SYRINGES/U - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2		
GLOBAL LANCING DEVICE - lancet devices	2		
GLUCO PERFECT 3 BLOOD GLU - blood glucose monitoring devices	3		
GLUCOCARD EXPRESSION AUDI - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE - blood glucose monitoring devices	3		
GLUCOCARD SHINE - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE CONNEX BL - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE EXPRESS B - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE XL - blood glucose monitoring devices	3		
GLUCOCARD VITAL BLOOD GLU - blood glucose monitoring kit w/ device	3		
GLUCOCARD X-METER - blood glucose monitoring kit w/ device	3		
GLUCOCARD 01 BLOOD GLUCOS - blood glucose monitoring devices	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
GLUCOCARD 01 BLOOD GLUCOS - blood glucose monitoring kit w/ device	3		
GLUCOCARD 01-MINI BLOOD G - blood glucose monitoring kit w/ device	3		
GLUCOCOM AUTOLINK TELEMON - blood glucose monitoring misc.	3		
GLUCOCOM BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
GLUCOCOM BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
GLUCOCOM LANCETS 28G - lancets	2		
GLUCOCOM LANCETS 30G - lancets	2		
GLUCOCOM LANCETS 33G - lancets	2		
GLUCONAVII BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
GLUCOPRO INSULIN SYRINGE/ - insulin syringe/ needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
GNP CLICKFINE UNIVERSAL P - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
GNP EASY TOUCH GLUCOSE MO - blood glucose monitoring devices	3		
GNP INSULIN SYRINGE/0.3ML - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
GNP INSULIN SYRINGE/0.5ML - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2		
GNP INSULIN SYRINGE/1ML/2 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
GNP INSULIN SYRINGE/1ML/3 - insulin syringe/needle u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2		
GNP INSULIN SYRINGES/0.3M - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2		
GNP INSULIN SYRINGES/1/2M - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
GNP INSULIN SYRINGES/1ML/ - insulin syringe/needle u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2		
GNP INSULIN SYRINGES/3ML/ - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
GNP LANCETS THIN 26G - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
GNP LANCETS 21G - lancets	2		
GNP LANCING SYSTEM DEVICE - lancet devices	2		
GNP STERILE LANCETS 28G - lancets	2		
GNP STERILE LANCETS 30G - lancets	2		
GNP STERILE LANCETS 33G - lancets	2		
GNP TRUE METRIX AIR SELF - blood glucose monitoring kit w/ device	3		
GNP TRUE METRIX SELF MONI - blood glucose monitoring kit w/ device	3		
GNP ULTICARE PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
GNP ULTICARE PEN NEEDLES/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
GNP ULTIGUARD SAFEPACK/MI - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
GNP ULTIGUARD SAFEPACK/MI - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
GNP ULTIGUARD SAFEPACK/SH - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
GNP ULTRA COMFORT INSULIN - insulin syringe/ needle u-100 1 ml 28 x 1/2"	2		
GOJJI LANCING DEVICE/CLEA - lancet devices	2		
GOJJI STERILE LANCETS 30G - lancets	2		
GOODSENSE CLICKFINE SAFET - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
GOODSENSE COLOR LANCETS M - lancets	2		
GOODSENSE LANCETS MICRO-T - lancets	2		
GOODSENSE LANCETS ULTRA-T - lancets	2		
GOODSENSE LANCING DEVICE - lancet devices	2		
GOODSENSE PEN NEEDLE/PENF - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
GOODSENSE PEN NEEDLE/PENF - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
GOODSENSE PREMIUM BLOOD - blood glucose monitoring kit w/ device	3		
H-E-B IN CONTROL PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
H-E-B IN CONTROL PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
H-E-B IN CONTROL UNIFINE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
H-E-B IN CONTROL UNIFINE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
H-E-B IN CONTROL UNIFINE - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
H-E-B INCONTROL ADVANCED - lancet devices	2		
H-E-B INCONTROL LANCETS M - lancets	2		
H-E-B INCONTROL LANCETS S - lancets	2		
H-E-B INCONTROL LANCETS U - lancets	2		
H-E-B INCONTROL PEN NEEDL - insulin pen needle 29 g x 12 mm (1/2")	2		
HAEMOLANCE - lancets	2		
HAEMOLANCE LOW FLOW LANCE - lancets	2		
HAEMOLANCE PLUS - lancets	2		
HAEMOLANCE PLUS HIGH FLOW - lancets	2		
HAEMOLANCE PLUS LOW FLOW - lancets	2		
HAEMOLANCE PLUS MAX FLOW - lancets	2		
HAEMOLANCE PLUS PEDIATRIC - lancets	2		
HEALTH CARE LANCING DEVIC - lancet devices	2		
HEALTHPRO BLOOD GLUCOSE M - blood glucose monitoring kit w/ device	3		
HEALTHWISE INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
HEALTHWISE MICRON PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
HEALTHWISE MINI PEN NEEDL - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
HEALTHWISE PEN NEEDLES 29 - insulin pen needle 29 g x 12 mm (1/2")	2		
HEALTHWISE SHORT PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
HM ULTICARE INSULIN SYRIN - insulin syringe/needle u-100 1 ml 30 x 1/2", u-100 0.3 ml 31 x 5/16"	2		
HM ULTICARE MINI PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
HM ULTICARE SHORT PEN NEE - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
HW EMBRACE PRO BLOOD GLUC - blood glucose monitoring devices	3		
HW EMBRACE TALK BLOOD GLU - blood glucose monitoring devices	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
HW EMBRACE TALK BLOOD GLU - blood glucose monitoring kit w/ device	3		
HY-VEE LANCETS - lancets	2		
HY-VEE THIN LANCETS - lancets	2		
HYPODERMIC NEEDLES 18GX1- - needle (disp) 18 x 1-1/2"	3		
HYPODERMIC NEEDLES 18GX1" - needle (disp) 18 x 1"	3		
HYPODERMIC NEEDLES 20GX1- - needle (disp) 20 x 1-1/2"	3		
HYPODERMIC NEEDLES 20GX1" - needle (disp) 20 x 1"	3		
HYPODERMIC NEEDLES 21GX1- - needle (disp) 21 x 1-1/2"	3		
HYPODERMIC NEEDLES 21GX1" - needle (disp) 21 x 1"	3		
HYPODERMIC NEEDLES 22GX1- - needle (disp) 22 x 1-1/2"	3		
HYPODERMIC NEEDLES 22GX1" - needle (disp) 22 x 1"	3		
HYPODERMIC NEEDLES 23GX1- - needle (disp) 23 x 1-1/2"	3		
HYPODERMIC NEEDLES 23GX1" - needle (disp) 23 x 1"	3		
HYPODERMIC NEEDLES 25GX1- - needle (disp) 25 x 1-1/2"	3		
HYPODERMIC NEEDLES 25GX5/ - needle (disp) 25 x 5/8"	3		
HYPODERMIC NEEDLES 26GX1/ - needle (disp) 26 x 1/2"	3		
HYPODERMIC NEEDLES 27GX1- - needle (disp) 27 x 1-1/2"	3		
HYPODERMIC NEEDLES 27GX1/ - needle (disp) 27 x 1/2"	3		
IGLUOSE BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
IHEALTH GLUCO+ - blood glucose monitor kit w/ monitor device & digital app	3		
IHEALTH LANCING DEVICE - lancet devices	2		
IN TOUCH - blood glucose monitoring devices	3		
IN TOUCH DIABETES MANAGEM - blood glucose monitoring misc.	2		
IN TOUCH LANCING DEVICE - lancet devices	2		

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INSULIN SYRINGE/U-100/1ML - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2		
INSULIN SYRINGE/0.3ML/30G - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2		
INSULIN SYRINGE/0.3ML/31G - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
INSULIN SYRINGE/0.5ML/28G - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2		
INSULIN SYRINGE/0.5ML/30G - insulin syringe/needle u-100 1/2 ml 30 x 5/16"	2		
INSULIN SYRINGE/0.5ML/31G - insulin syringe/needle u-100 1/2 ml 31 x 5/16"	2		
INSULIN SYRINGE/1ML/29G X - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
INSULIN SYRINGE/1ML/30G X - insulin syringe/needle u-100 1 ml 30 x 5/16"	2		
INSULIN SYRINGES 0.3ML/31 - insulin syringe/needle u-100 0.3 ml 31 x 1/4" (6 mm)	2		
INSULIN SYRINGES 0.5ML/31 - insulin syringe/needle u-100 0.5 ml 31 x 1/4" (6 mm)	2		
INSULIN SYRINGES/U-100/0. - insulin syringe/needle u-100 1/2 ml 27 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2		
INSULIN SYRINGES/U-100/1M - insulin syringe/needle u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2		
INSUPEN 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
INSUPEN 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
INSUPEN 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
INSUPEN 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
INSUPEN 33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
KAMELEON LUBRICATED - condoms latex lubricated	3		
KIMONO COLORS - condoms latex lubricated	3		
KIMONO LUBRICATED - condoms latex lubricated	3		
KIMONO MAXX/LARGE FLARE - condoms latex lubricated	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
LEADER LANCETS COLORED - lancets	2		
LEADER SUPER THIN LANCET - lancets	2		
LEADER THIN LANCETS - lancets	2		
LEADER UNIFINE PENTIPS PL - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
LEADER UNIFINE PENTIPS/MI - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
LEADER UNIFINE PENTIPS/NA - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
LEADER UNIFINE PENTIPS/PL - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
LIBERTY BLOOD GLUCOSE MET - blood glucose monitoring devices	3		
LIBERTY MEDICAL LANCETS 3 - lancets	2		
LIBERTY MINI LANCING DEVI - lancet devices	2		
LIBERTY NEXT GENERATION B - blood glucose monitoring devices	3		
LIFESCAN UNISTIK 2 DEEP P - lancets	2		
LITE TOUCH LANCETS - lancets	2		
LITE TOUCH LANCING PEN - lancet devices	2		
LITETOUCH INSULIN PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
LITETOUCH INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
LITETOUCH LANCETS MICRO T - lancets	2		
LITETOUCH PEN NEEDLES 29G - insulin pen needle 29 g x 12.7 mm (1/2")	2		
LITETOUCH PEN NEEDLES 31G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
LITETOUCH PEN NEEDLES/31 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
LITETOUCH PEN NEEDLES/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
LIVE BETTER ADVANCED LANC - lancet devices	2		
LIVE BETTER LANCET SUPER - lancets	2		
LIVE BETTER LANCET ULTRA - lancets	2		
LIVE BETTER PEN NEEDLES 2 - insulin pen needle 29 g x 12 mm (1/2")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MEDLANCE PLUS LANCETS LIT - lancets	2		
MEDLANCE PLUS LITE LANCET - lancets	2		
MEDLANCE PLUS SPECIAL LAN - lancets	2		
MEDLANCE PLUS SUPERLITE 3 - lancets	2		
MEDLANCE PLUS UNIVERSAL L - lancets	2		
MEDLANCE PLUS/LITE 25G - lancets	2		
MEIJER BLOOD GLUCOSE MONI - blood glucose monitoring kit w/ device	3		
MEIJER COLOR LANCETS UNIV - lancets	2		
MEIJER ESSENTIAL BLOOD GL - blood glucose monitoring kit w/ device	3		
MEIJER LANCETS - lancets	2		
MEIJER LANCETS THIN - lancets	2		
MEIJER LANCETS UNIVERSAL - lancets	2		
MEIJER PEN NEEDLES 29G X - insulin pen needle 29 g x 12 mm (1/2")	2		
MEIJER PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
MEIJER PREMIUM BLOOD GLUC - blood glucose monitoring kit w/ device	3		
MEIJER SUPER THIN LANCETS - lancets	2		
MEIJER TRUERESULT BLOOD G - blood glucose monitoring kit w/ device	3		
MEIJER TRUETRACK BLOOD GL - blood glucose monitoring kit w/ device	3		
MEIJER TRUE2GO BLOOD GLUC - blood glucose monitoring kit w/ device	3		
MICRODOT BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
MICRODOT PEN NEEDLE/31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
MICRODOT PEN NEEDLE/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
MICRODOT PEN NEEDLE/33G X - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
MICROLET LANCETS - lancets	2		
MICROLET NEXT - lancet devices	2		
MINI LANCING DEVICE - lancet devices	2		
MM BLOOD GLUCOSE MONITORI - blood glucose monitoring kit	3		
MM BLOOD GLUCOSE MONITORI - blood glucose monitoring kit w/ device	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MM BLULINK GLUCOSE MONITO - blood glucose monitoring devices	3		
MM EASY TOUCH BLOOD GLUCO - blood glucose monitoring kit w/ device	3		
MM INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
MM LANCING DEVICE - lancet devices	2		
MM PEN NEEDLES 31G X 1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
MM PEN NEEDLES 31G X 3/16 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
MM PEN NEEDLES 31G X 5/16 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
MM PEN NEEDLES 32G X 5/32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
MM TWIST LANCETS - lancets	2		
MONOJECT BLUNT CANNULA/20 - needle (disp) 20 x 1-1/2"	3		
MONOJECT BLUNT CANNULA/21 - needle (disp) 21 x 1"	3		
MONOJECT HYPO/ALUM HUB/LU - needle (disp) 14 x 1", 14 x 2", 16 x 5/8", 16 x 3/4", 16 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 22 x 1", 22 x 1-1/2", 23 x 1", 25 x 5/8", 25 x 1-1/4", 25 x 2", 27 x 1/2", 27 x 1-1/4"	3		
MONOJECT HYPO/ALUM HUB/LU - needle (disp) 18 x 1", 18 x 1-1/2", 20 x 1-1/2"	2		
MONOJECT HYPO/ALUM HUB/16 - needle (disp) 16 x 1"	3		
MONOJECT HYPO/ALUM HUB/18 - needle (disp) 18 x 1-1/2"	2		
MONOJECT HYPO/POLYPROPYLE - needle (disp) 18 x 1", 18 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 1", 21 x 1-1/2", 22 x 1", 22 x 1-1/2", 23 x 3/4", 23 x 1", 25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 1/2", 27 x 1/2", 30 x 3/4"	3		
MONOJECT HYPODERMIC NEEDL - needle (disp) 18 x 1", 27 x 1-1/2", 30 x 3/4"	3		
MONOJECT INSULIN SYRINGE - insulin syringe (disp) u-100 1 ml	2		
MONOJECT INSULIN SYRINGE/ - insulin syringe (disp) u-100 1 ml	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MONOJECT INSULIN SYRINGE/ - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 25 x 5/8", u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2		
MONOJECT MAGELLAN SAFETY - needle (disp) 18 x 1", 18 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 5/8", 21 x 1", 21 x 1-1/2", 22 x 1", 22 x 1-1/2", 23 x 5/8", 23 x 1", 25 x 5/8", 25 x 1"	2		
MONOJECT MAGELLAN SAFETY - needle (disp) 19 x 1", 19 x 1-1/2"	3		
MONOJECT MEDICATION TRANS - hypodermic needles (disposable)	3		
MONOJECT STANDARD HYPODER - needle (disp) 14 x 1-1/2", 18 x 1", 18 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 1", 21 x 1-1/2", 21 x 2", 22 x 1", 22 x 1-1/2", 23 x 1", 25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 1-1/2", 27 x 1/2"	3		
MONOJECT SYRINGE PHARMACY - syringe (disposable) 1 ml	2		
MONOJECT TB SYRINGE-NDL 1 - tuberculin/allergy syringe/needle (disp) 1 ml 26 x 3/8", 1 ml 27 x 1/2"	3		
MONOJECT TUBERCULIN SAFET - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 28 x 1/2"	3		
MONOJECT TUBERCULIN SYRIN - syringe (disposable) 1 ml	2		
MONOJECT TUBERCULIN SYRIN - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8"	2		
MONOJECT TUBERCULIN SYRIN - tuberculin/allergy syringe/needle (disp) 1 ml 26 x 3/8", 1 ml 27 x 1/2", 1 ml 28 x 1/2"	3		
MONOJECT ULTRA COMFORT IN - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 0.3 ml 31 x 5/16"	2		
MONOJECT 1ML LUER LOCK TU - syringe (disposable) 1 ml	2		
MONOLET LANCETS - lancets	2		
MONOLET OPD LANCETS - lancets	2		
MONOLETTOR SAFETY LANCETS - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
OMNIPOD GO 25 UNITS/DAY - insulin infusion disposable pump kit 25 unit/24hr	3		QL (10 kits/30 days)
OMNIPOD GO 30 UNITS/DAY - insulin infusion disposable pump kit 30 unit/24hr	3		QL (10 kits/30 days)
OMNIPOD GO 35 UNITS/DAY - insulin infusion disposable pump kit 35 unit/24hr	3		QL (10 kits/30 days)
OMNIPOD GO 40 UNITS/DAY - insulin infusion disposable pump kit 40 unit/24hr	3		QL (10 kits/30 days)
OMNIPOD 5 DEXCOM G7G6 INT - insulin infusion disposable pump kit	3		QL (1 kit/720 days)
OMNIPOD 5 DEXCOM G7G6 POD - insulin infusion disposable pump reservoir	3		QL (30 pods/30 days)
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump reservoir	3		QL (30 pods/30 days)
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump kit	3		QL (1 kit/720 days)
ON CALL EXPRESS BLOOD GLU - blood glucose monitoring kit w/ device	3		
ONE DROP BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
ONETOUCH DELICA LANCETS E - lancets	2		
ONETOUCH DELICA LANCETS F - lancets	2		
ONETOUCH DELICA LANCING D - lancet devices	2		
ONETOUCH DELICA PLUS LANC - lancets	2		
ONETOUCH DELICA PLUS LANC - lancet devices	2		
ONETOUCH DELICA SAFETY LA - lancets	2		
ONETOUCH LANCETS - lancets	2		
ONETOUCH ULTRA 2 - blood glucose monitoring kit w/ device	2		
ONETOUCH ULTRASOFT 2 LANC - lancets	2		
ONETOUCH VERIO - blood glucose monitoring kit w/ device	2		
ONETOUCH VERIO FLEX BLOOD - blood glucose monitoring kit w/ device	2		
ONETOUCH VERIO IQ BLOOD G - blood glucose monitoring kit w/ device	2		
ONETOUCH VERIO REFLECT - blood glucose monitoring kit w/ device	2		
PC UNIFINE PENTIPS 29G X - insulin pen needle 29 g x 12 mm (1/2")	2		
PC UNIFINE PENTIPS 31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PEN NEEDLE/5-BEVEL TIP/32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
PEN NEEDLES 30GX5MM - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 30GX8MM - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31G X 3/16" - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31GX5/16" - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 31GX6MM (1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31GX8MM (5/16 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES 32G X 5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 32G X 6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES 33G X 5/32" - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES/29G X 1/2" - insulin pen needle 29 g x 12 mm (1/2")	2		
PEN NEEDLES/31G X 1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES/31G X 3/16" - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PIP BLOOD GLUCOSE MONITOR - blood glucose monitoring devices	3		
PIP LANCETS/28G - lancets	2		
PIP LANCETS/30G - lancets	2		
PIP PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PIP PEN NEEDLES 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
POCKETCHEM EZ BLOOD GLUCO - blood glucose monitoring kit w/ device	3		
POGO AUTOMATIC BLOOD GLUC - blood glucose monitoring devices	3		
POLY HUB NEEDLE/18G X 1-1 - needle (disp) 18 x 1-1/2"	3		
POLY HUB NEEDLE/18G X 1" - needle (disp) 18 x 1"	3		
POLY HUB NEEDLE/21G X 1-1 - needle (disp) 21 x 1-1/2"	3		
POLY HUB NEEDLE/21G X 1" - needle (disp) 21 x 1"	3		
POLY HUB NEEDLE/22G X 1-1 - needle (disp) 22 x 1-1/2"	3		
POLY HUB NEEDLE/22G X 1" - needle (disp) 22 x 1"	3		
POLY HUB NEEDLE/23G X 1-1 - needle (disp) 23 x 1-1/2"	3		
POLY HUB NEEDLE/23G X 1" - needle (disp) 23 x 1"	3		
POLY HUB NEEDLE/25G X 1-1 - needle (disp) 25 x 1-1/2"	3		
POLY HUB NEEDLE/25G X 1" - needle (disp) 25 x 1"	3		
POLY HUB NEEDLE/25G X 5/8 - needle (disp) 25 x 5/8"	3		
POLY HUB NEEDLE/27G X 1-1 - needle (disp) 27 x 1-1/4"	3		
POLY HUB NEEDLE/27G X 1/2 - needle (disp) 27 x 1/2"	3		
POLY HUB NEEDLE/30G X 1/2 - needle (disp) 30 x 1/2"	3		
PRECISION SURE-DOSE INSUL - insulin syringe/ needle u-100 0.3 ml 30 x 5/16"	2		
PRECISION XTRA - blood glucose monitoring kit w/ device	3		
PREFERRED PLUS INSULIN SY - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2		
PREFERRED PLUS LANCETS CO - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PURE COMFORT PEN NEEDLE 3 - insulin pen needle 32 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
PURE COMFORT PEN NEEDLE/3 - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
PURE COMFORT SAFETY PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
PURE COMFORT SAFETY PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PX ADVANCED LANCING DEVIC - lancet devices	2		
PX EXTRA SHORT PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PX INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 1/2 ml 30 x 1/2"	2		
PX LANCETS MICROTHIN 33G - lancets	2		
PX LANCETS ULTRA THIN - lancets	2		
PX LANCETS ULTRA THIN 28G - lancets	2		
PX MINI PEN NEEDLES 31GX5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PX PEN NEEDLE 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
PX PEN NEEDLE 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
QC ADVANCED LANCING DEVIC - lancet devices	2		
QC INSULIN SYRINGE/0.3ML/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2		
QC INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2"	2		
QC INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
QC INSULIN SYRINGE/1ML/31 - insulin syringe/needle u-100 1 ml 31 x 5/16"	2		
QC LANCETS SUPER THIN - lancets	2		
QC LANCETS ULTRA THIN - lancets	2		
QC PEN NEEDLES 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
QC PEN NEEDLES 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
QC PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
QC UNIFINE PENTIPS 32GX4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
QC UNILET LANCETS 28G/ULT - lancets	2		
QC UNILET LANCETS 33G/MIC - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
RELION INSULIN SYRINGE 1M - insulin syringe/needle u-100 1 ml 31 x 15/64"	2		
RELION INSULIN SYRINGE/U- - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 0.3 ml 31 x 15/64", u-100 1 ml 29 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1 ml 31 x 15/64"	2		
RELION LANCETS - lancets	2		
RELION LANCETS MICRO-THIN - lancets	2		
RELION LANCETS THIN 26G - lancets	2		
RELION LANCETS ULTRA-THIN - lancets	2		
RELION LANCING DEVICE - lancet devices	2		
RELION MICRO BLOOD GLUCOS - blood glucose monitoring kit w/ device	3		
RELION MINI PEN NEEDLES 3 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
RELION PEN NEEDLES 29GX12 - insulin pen needle 29 g x 12 mm (1/2")	2		
RELION PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
RELION PEN NEEDLES 31GX5/ - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
RELION PEN NEEDLES 31GX6M - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
RELION PEN NEEDLES 31GX8M - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
RELION PEN NEEDLES 32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
RELION PEN NEEDLES 32GX4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
RELION PEN NEEDLES/31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
RELION PREMIER BLU BLOOD - blood glucose monitoring devices	3		
RELION PREMIER CLASSIC BL - blood glucose monitoring devices	3		
RELION PREMIER COMPACT BL - blood glucose monitoring kit w/ device	3		
RELION PREMIER VOICE BLOO - blood glucose monitoring devices	3		
RELION PRIME BLOOD GLUCOS - blood glucose monitoring devices	3		

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SCHNUCKS INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2		
SECURESAFE SAFETY HYPODER - needle (disp) 19 x 1", 19 x 1-1/2", 21 x 1-1/2", 22 x 1", 25 x 1-1/2", 26 x 1/2", 27 x 1/2"	3		
SECURESAFE SAFETY INSULIN - insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2"	2		
SECURESAFE SAFETY PEN NEE - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
SELECT-LITE LANCING DEVIC - lancet devices	2		
SIMPLE DIAGNOSTICS LANCIN - lancet devices	2		
SINGLE-LET - lancets	2		
SM MICRO THIN LANCETS 33G - lancets	2		
SM TRUEDRAW LANCING DEVIC - lancet devices	2		
SMART DIABETES VANTAGE LA - lancet devices	2		
SMART SENSE COLOR LANCETS - lancets	2		
SMART SENSE PREMIUM BLOOD - blood glucose monitoring kit w/ device	3		
SMART SENSE STANDARD LANC - lancets	2		
SMART SENSE SUPER THIN LA - lancets	2		
SMART SENSE THIN LANCETS - lancets	2		
SMART SENSE VALUE BLOOD - blood glucose monitoring kit w/ device	3		
SMARTEST EJECT BLOOD GLUC - blood glucose monitoring devices	3		
SMARTEST EJECT STARTER KI - blood glucose monitoring kit w/ device	3		
SMARTEST LANCETS 28G - lancets	2		
SMARTEST PERSONA STARTER - blood glucose monitoring kit w/ device	3		
SMARTEST PRONTO STARTER - blood glucose monitoring kit w/ device	3		
SMARTEST PROTEGE BLOOD GL - blood glucose monitoring devices	3		
SMARTEST PROTEGE STARTER - blood glucose monitoring kit w/ device	3		
SOLUS V2 AUDIBLE BLOOD GL - blood glucose monitoring devices	3		
SOLUS V2 AUDIBLE BLOOD GL - blood glucose monitoring kit w/ device	3		
SOLUS V2 LANCING DEVICE - lancet devices	2		
SOLUS V2 PRESSURE ACTIVAT - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
SOLUS V2 TWIST LANCETS 30 - lancets	2		
STERILANCE TL - lancets	2		
SUPER THIN LANCETS - lancets	2		
SUPREME II CONFIDENCE PAD - blood glucose monitoring misc.	3		
SURE COMFORT AUTOKEEPER S - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
SURE COMFORT AUTOKEEPER S - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
SURE COMFORT INSULIN SYRI - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 1/4" (6 mm), u-100 0.5 ml 31 x 1/4" (6 mm), u-100 1 ml 31 x 1/4" (6 mm), u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
SURE COMFORT LANCETS 18G - lancets	2		
SURE COMFORT LANCETS 21G - lancets	2		
SURE COMFORT LANCETS 23G - lancets	2		
SURE COMFORT LANCETS 28G - lancets	2		
SURE COMFORT LANCETS 30G - lancets	2		
SURE COMFORT LANCING PEN - lancet devices	2		
SURE COMFORT PEN NEEDLES - insulin pen needle 29 g x 12.7 mm (1/2")	2		
SURE COMFORT PEN NEEDLES - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
SURE COMFORT PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
SURE COMFORT PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
SURELITE LANCETS - lancets	2		
TECHLITE AST LANCETS - lancets	2		
TECHLITE INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
TECHLITE LANCETS - lancets	2		
TECHLITE LANCETS 26G - lancets	2		
TECHLITE PEN NEEDLES 29G - insulin pen needle 29 g x 12 mm (1/2")	2		

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TRUEPLUS 5-BEVEL PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
TRUERESULT BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
TRUETRACK BLOOD GLUCOSE M - blood glucose monitoring devices	3		
TRUETRACK BLOOD GLUCOSE M - blood glucose monitoring kit w/ device	3		
TRUETRACK SMART SYSTEM - blood glucose monitoring kit w/ device	3		
TRUSTEX COLOR CONDOMS + L - condoms latex lubricated	3		
TRUSTEX LUBRICATED - condoms latex lubricated	3		
TRUSTEX LUBRICATED EXTRA - condoms latex lubricated	3		
TRUSTEX LUBRICATED/RIBBED - condoms latex lubricated	3		
TRUSTEX LUBRICATED/SPERMI - condoms latex lubricated	3		
TRUSTEX NATURAL CONDOMS + - condoms latex lubricated	3		
TRUSTEX NON-LUBRICATED - condoms latex non- lubricated	3		
TRUSTEX WITH NONOXYNOL-9/ - condoms latex lubricated	3		
TRUSTEX/RIA LUBRICATED - condoms latex lubricated	3		
TRUSTEX/RIA LUBRICATED SP - condoms latex lubricated	3		
TRUSTEX/RIA LUBRICATED/SP - condoms latex lubricated	3		
TRUSTEX/RIA NON-LUBRICATE - condoms latex non- lubricated	3		
TWIST TOP LANCETS 30G - lancets	2		
ULTI-LANCE AUTOMATIC/ CLE - lancet devices	2		
ULTICARE INSULIN SAFETY S - insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2"	2		
ULTICARE INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTICARE INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"			
ULTICARE MICRO PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
ULTICARE MICRO PEN NEEDLE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ULTICARE MINI PEN NEEDLES - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
ULTICARE MINI PEN NEEDLES - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
ULTICARE MINI SAFETY PEN - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
ULTICARE ORIGINAL PEN NEE - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTICARE PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ULTICARE PEN NEEDLES/29G - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTICARE SHORT PEN NEEDLE - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
ULTICARE SHORT SAFETY PEN - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
ULTICARE TUBERCULIN SAFET - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 25 x 1"	2		
ULTICARE U-100 INSULIN SY - insulin syringe/needle u-100 0.3 ml 31 x 1/4" (6 mm), u-100 0.5 ml 31 x 1/4" (6 mm), u-100 1 ml 31 x 1/4" (6 mm)	2		
ULTIGUARD INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2		
ULTIGUARD SAFEPACK INSULI - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTIGUARD SAFEPACK MINI P - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ULTIGUARD SAFEPACK PEN NE - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTIGUARD SAFEPACK/MICRO - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ULTRA INSULIN SYRINGE/U-1 - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
ULTRA THIN LANCETS 28G - lancets	2		
ULTRA THIN LANCETS 31G - lancets	2		
ULTRA THIN PEN NEEDLES 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ULTRA-THIN II AUTO LANCET - lancets	2		
ULTRA-THIN II INSULIN SYR - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTRA-THIN II LANCETS 28G - lancets	2		
ULTRA-THIN II LANCETS 30G - lancets	2		
ULTRA-THIN II MINI PEN NE - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ULTRA-THIN II PEN NEEDLES - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTRA-THIN II PEN NEEDLES - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
ULTRACARE INSULIN SYRINGE - insulin syringe/ needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTRACARE PEN NEEDLES/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
ULTRACARE PEN NEEDLES/32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
ULTRACARE PEN NEEDLES/33G - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
ULTRATRAK ACTIVE - blood glucose monitoring devices	3		
UNIFINE PENTIPS PLUS 29GX - insulin pen needle 29 g x 12 mm (1/2")	2		
UNIFINE PENTIPS PLUS 31GX - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
UNIFINE PENTIPS PLUS 32GX - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
UNIFINE PENTIPS PLUS 33G - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
UNIFINE PENTIPS PLUS 33GX - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
UNIFINE PENTIPS PLUS/30G - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
UNIFINE PENTIPS 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
UNIFINE PENTIPS 31G X 3/1 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
UNIFINE PENTIPS 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
UNIFINE PENTIPS 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
UNIFINE PENTIPS 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
UNIFINE PENTIPS 31GX6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
UNIFINE PENTIPS 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
UNIFINE PENTIPS 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
UNIFINE PENTIPS 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
UNIFINE PENTIPS 33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
UNIFINE PENTIPS/30G X 3/1 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
UNIFINE PROTECT SAFETY PE - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
UNIFINE PROTECT SAFETY PE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
UNIFINE SAFECONTROL PEN N - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
UNIFINE SAFECONTROL PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
UNIFINE SAFECONTROL PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
UNIFINE ULTRA PEN NEEDLE/ - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
UNIFINE ULTRA PEN NEEDLE/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
UNILET COMFORTOUCH LANCET - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VERIFINE PLUS INSULIN PEN - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
VERIFINE PLUS INSULIN PEN - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
VERIFINE PLUS PEN NEEDLE/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
VERIFINE SAFETY LANCET MI - lancets	2		
VERIFINE UNIVERSAL LANCET - lancets	2		
VIVAGUARD INO BLOOD GLUCO - blood glucose monitoring devices	3		
VIVAGUARD INO BLOOD GLUCO - blood glucose monitoring kit	3		
VIVAGUARD INO SMART BLOOD - blood glucose monitoring devices	3		
VIVAGUARD LANCETS - lancets	2		
VIVAGUARD LANCETS 30G - lancets	2		
VIVAGUARD LANCING DEVICE - lancet devices	2		
VIVAGUARD SAFETY LANCETS - lancets	2		
VIVAGUARD SAFETY LANCETS/ - lancets	2		
VP INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2		
WALGREENS COMFORT ASSURED - lancets	2		
WALGREENS LANCETS - lancets	2		
WALGREENS THIN LANCETS - lancets	2		
WALGREENS ULTRA THIN LANC - lancets	2		
WAVESENSE AMP - blood glucose monitoring kit w/ device	3		
WEGMANS UNIFINE PENTIPS P - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
WEGMANS UNIFINE PENTIPS P - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
WIDE-SEAL SILICONE DIAPHR - diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	3		
YALE NEEDLES 21G X 1-1/4" - needle (disp) 21 x 1-1/4"	3		
ZEVRX INSULIN SYRINGE/0.5 - insulin syringe/needle u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2"	2		
ZEVRX INSULIN SYRINGE/1ML - insulin syringe/needle u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2"	2		
ZEVRX PEN NEEDLES 31G X 5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ZEVRX PEN NEEDLES 31G X 6 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
ZEVRX PEN NEEDLES 31G X 8 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
ZEVRX PEN NEEDLES 32G X 4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ZEVRX TWIST TOP LANCETS 3 - lancets	2		
1ML VANISHPOINT TUBERCULI - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 25 x 1", 1 ml 27 x 1/2"	2		
1ST CHOICE LANCETS SUPER - lancets	2		
1ST CHOICE LANCETS THIN - lancets	2		
1ST CHOICE LANCETS ULTRA - lancets	2		
1ST TIER UNIFINE PENTIPS - insulin pen needle 29 g x 12 mm (1/2")	2		
1ST TIER UNIFINE PENTIPS - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
1ST TIER UNIFINE PENTIPS - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
1ST TIER UNIFINE PENTIPS - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
10ML SYRINGE LUER-LOK TIP - syringe (disposable) 10 ml	2		
<b>ASSORTED CLASSES</b>			
ASTAGRAF XL - tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	3		
<b>azathioprine tab 50 mg (Imuran)</b>	1		
BENLYSTA - belimumab subcutaneous solution auto- injector 200 mg/ml	3	SP	PA, LD, QL (4 pens/28 days)
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	3	SP	PA, LD, QL (4 syringes/28 days)
CELLCEPT - mycophenolate mofetil cap 250 mg	3		
CELLCEPT - mycophenolate mofetil tab 500 mg	3		
CELLCEPT - mycophenolate mofetil for oral susp 200 mg/ml	3		
<b>cyclosporine cap 25 mg, 100 mg (Sandimmune)</b>	1		
<b>cyclosporine modified cap 25 mg, 100 mg (Neoral)</b>	1		
<b>cyclosporine modified cap 50 mg</b>	1		
<b>cyclosporine modified oral soln 100 mg/ml (Neoral)</b>	1		
ENSPRYNG - satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	3	SP	PA, LD, QL (1 syringe/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ENVARUSUS XR - tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	3		
<b>everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)</b>	1		
IMURAN - azathioprine tab 50 mg	3		
<b>irrigation solution, physiological</b>	1		
JOENJA - leniolisib phosphate tab 70 mg	3	SP	PA, LD, QL (60 tablets/30 days)
<b>lactated ringer's for irrigation</b>	1		
<b>lenalidomide caps 2.5 mg (Revlimid)</b>	1	SP	PA, QL (30 capsules/30 days)
<b>lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)</b>	1	SP	PA, QL (30 capsules/30 days)
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	2		
LUPKYNIS - voclosporin cap 7.9 mg	3	SP	PA, LD, QL (180 capsules/30 days)
<b>mycophenolate mofetil cap 250 mg (Cellcept)</b>	1		
<b>mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)</b>	1		
<b>mycophenolate mofetil tab 500 mg (Cellcept)</b>	1		
<b>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)</b>	1		
MYFORTIC - mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	3		
MYHIBBIN - mycophenolate mofetil oral susp 200 mg/ml	2		
NEORAL - cyclosporine modified cap 25 mg, 100 mg	3		
NEORAL - cyclosporine modified oral soln 100 mg/ml	3		
<b>penicillamine tab 250 mg (Depen titratabs)</b>	1	SP	PA
PROGRAF - tacrolimus cap 0.5 mg, 1 mg, 5 mg	3		
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	3		
RAPAMUNE - sirolimus tab 0.5 mg, 1 mg, 2 mg	3		
RAPAMUNE - sirolimus oral soln 1 mg/ml	3		
REVLIMID - lenalidomide caps 2.5 mg	2	SP	PA, LD, QL (30 capsules/30 days)
REVLIMID - lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	2	SP	PA, LD, QL (30 capsules/30 days)
REZUROCK - belumosudil mesylate tab 200 mg	3	SP	PA, LD, QL (30 tablets/30 days)
<b>ringer's solution for irrigation</b>	1		
SANDIMMUNE - cyclosporine cap 25 mg, 100 mg	3		
<b>sirolimus oral soln 1 mg/ml (Rapamune)</b>	1		
<b>sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)</b>	1		
<b>sodium polystyrene sulfonate powder</b>	1		

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<b>sodium polystyrene sulfonate susp 15 gm/60ml</b>	1		
SPS - sodium polystyrene sulfonate rectal susp 30 gm/120ml	2		
SYPRINE - trientine hcl cap 250 mg	3	SP	PA
<b>tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)</b>	1		
THALOMID - thalidomide cap 50 mg	2	SP	PA, LD, QL (90 capsules/30 days)
THALOMID - thalidomide cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
<b>trientine hcl cap 250 mg (Syprine)</b>	1	SP	PA
TRIENTINE HYDROCHLORIDE - trientine hcl cap 500 mg	3	SP	PA
VELTASSA - patiromer sorbitex calcium for susp packet 1 gm (base eq), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	2		
VIJOICE - alpelisib (pros) oral granules packet 50 mg	3	SP	PA, QL (28 packets/28 days)
VIJOICE - alpelisib (pros) tab therapy pack 50 mg daily dose	3	SP	PA, QL (28 tablets/28 day)
VIJOICE - alpelisib (pros) tab therapy pack 125 mg daily dose	3	SP	PA, QL (28 tablets/28 days)
VIJOICE - alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	3	SP	PA, QL (56 tablets/28 days)
<b>water for irrigation, sterile irrigation soln</b>	1		
ZOKINVY - lonafarnib cap 50 mg, 75 mg	2	SP	PA, LD
ZORTRESS - everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3		

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BASAGLAR TEMPO PEN.....	35	BD MAGNI-GUIDE MAGNIFIER.....	125
BAXDELA.....	3	BD MICROTAINER LANCETS.....	125
BD 1/2ML TUBERCULIN SYRIN.....	127	BD 1ML ALLERGY SYRINGE SA.....	127
BD ALLERGY/SYRINGE/NEEDLE.....	123	BD 3ML LUER-LOK SYRINGE 1.....	127
BD ALLERGY SYRINGE/NEEDLE.....	123	BD 10ML LUER-LOK SYRINGE.....	127
BD ALLERGY SYRINGE 0.5ML/.....	123	BD 3ML LUER-LOK SYRINGE/2.....	127
BD ALLERGY SYRINGE 1ML/27.....	123	BD 5ML LUER-LOK SYRINGE/2.....	128
BD AUTOSHIELD DUO 30G X 5.....	123	BD 1ML SLIP TIP SYRINGE 2.....	127
BD BLUNT FILL NEEDLE/FILT.....	123	BD 10ML SYRINGE/DUAL CANN.....	127
BD BLUNT FILL NEEDLE/18G.....	123	BD 3ML SYRINGE LUER-LOK 2.....	128
BD DISPOSABLE NEEDLE 23GX.....	123	BD 1ML TUBERCULIN SYRINGE.....	127
		BD NEEDLE/18G 1-1/2".....	125
		BD NEEDLE/21G 1-1/2".....	126

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BD NEEDLE/16G X 1-1/2".....	125	<b>benzoyl peroxide-erythromycin gel 5-3%.....</b>	<b>105</b>
BD NEEDLE/20G X 1-1/2".....	125	<b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg.....</b>	<b>88</b>
BD NEEDLE/22G X 1-1/2".....	126	<b>bepotastine besilate ophth soln 1.5%.....</b>	<b>99</b>
BD NEEDLE/25G X 5/8".....	126	BEPREVE.....	99
BD NEEDLE/25G X 7/8".....	126	BERINERT.....	96
BD NEEDLE/27G X 1/2".....	126	BESIVANCE.....	99
BD NEEDLE/30G X 1/2".....	126	BESREMI.....	17
BD NEEDLE/19G X 1".....	125	BETADINE OPHTHALMIC PREP.....	99
BD NEEDLE/20G X 1".....	125	<b>betaine powder for oral solution.....</b>	<b>36</b>
BD NEEDLE 30G X 1".....	125	BETAMETHASONE DIPROPIONAT.....	105
BD NEEDLE SAFETYGLIDE/27G.....	125	<b>betamethasone dipropionate augmented cream</b>	
BD NOKOR NEEDLE ADMIX THI.....	126	<b>0.05%.....</b>	<b>105</b>
BD NOKOR VENTED NEEDLE 18.....	126	<b>betamethasone dipropionate augmented lotion</b>	
BD PEN.....	126	<b>0.05%.....</b>	<b>105</b>
BD PEN MINI.....	126	<b>betamethasone dipropionate augmented oint</b>	
BD PEN NEEDLE/MICRO/ULTRA.....	126	<b>0.05%.....</b>	<b>105</b>
BD PEN NEEDLE/MINI/ULTRA.....	126	<b>betamethasone dipropionate cream 0.05%.....</b>	<b>105</b>
BD PEN NEEDLE/NANO/ULTRA.....	126	<b>betamethasone dipropionate lotion 0.05%.....</b>	<b>105</b>
BD PEN NEEDLE/NANO 2ND GE.....	126	<b>betamethasone dipropionate oint 0.05%.....</b>	<b>105</b>
BD PEN NEEDLE/ORIGINAL/UL.....	126	<b>betamethasone valerate cream 0.1% (base</b>	
BD PEN NEEDLE/SHORT/ULTRA.....	126	<b>equivalent).....</b>	<b>105</b>
BD PLASTIPAK SYRINGES ALL.....	126	<b>betamethasone valerate lotion 0.1% (base</b>	
BD PRECISIONGLIDE 23GX1-1.....	126	<b>equivalent).....</b>	<b>105</b>
BD PRECISIONGLIDE NEEDLE.....	126	<b>betamethasone valerate oint 0.1% (base</b>	
BD SAFETYGLIDE 21G X 1-1/.....	127	<b>equivalent).....</b>	<b>105</b>
BD SAFETYGLIDE 21G X 1".....	127	BETASERON.....	72
BD SAFETYGLIDE HYPODERMIC.....	126	BETAXOLOL HCL.....	99
BD SAFETYGLIDE INJECTION.....	126	<b>betaxolol hcl tab 10 mg, 20 mg.....</b>	<b>40</b>
BD SAFETY-GLIDE INSULIN S.....	126	<b>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50</b>	
BD SAFETYGLIDE INSULIN SY.....	126	<b>mg.....</b>	<b>60</b>
BD SAFETYGLIDE NEEDLE/SHI.....	127	BETHKIS.....	3
BD SAFETYGLIDE NEEDLE 25G.....	127	BEVESPI AEROSPHERE.....	52
BD SAFETYGLIDE SHIELDED N.....	127	<b>bexarotene cap 75 mg.....</b>	<b>17</b>
BD SAFETYGLIDE SYRINGE 5M.....	127	<b>bexarotene gel 1%.....</b>	<b>105</b>
BD SYRINGE BLUNT PLASTIC.....	127	BEXSERO.....	12
BD SYRINGE LUER-LOK/1ML.....	127	BEYAZ.....	28
BD SYRINGE 10ML/20G X 1".....	127	<b>bicalutamide tab 50 mg.....</b>	<b>17</b>
BD TB SYRINGE/NEEDLE/1ML/.....	127	BIDIL.....	48
BD TUBERCULIN SYRINGE/NEE.....	127	BIGFOOT UNITY PROGRAM KIT.....	128
BD TUBERCULIN SYRINGE/SAF.....	127	BIJUVA.....	27
BD VEO INSULIN SYRINGE UL.....	127	BIKTARVY.....	5
BELBUCA.....	75	BILTRICIDE.....	10
BELSOMRA.....	68	<b>bimatoprost ophth soln 0.03%.....</b>	<b>99</b>
<b>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg.....</b>	<b>43</b>	BINOSTO.....	36
<b>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg,</b>		BIOTEL CARE BLOOD GLUCOSE.....	112
<b>20-12.5 mg, 20-25 mg.....</b>	<b>43</b>	BIOTEL CARE CONNECTED BLO.....	128
<b>benazepril hcl tab 5 mg.....</b>	<b>43</b>	<b>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg,</b>	
<b>benazepril hcl tab 10 mg, 20 mg, 40 mg.....</b>	<b>43</b>	<b>5-6.25 mg, 10-6.25 mg.....</b>	<b>43</b>
BENEFIX.....	96	<b>bisoprolol fumarate tab 5 mg, 10 mg.....</b>	<b>40</b>
BENLYSTA.....	180	BLOOD GLUCOSE MONITORING.....	128
BENZAMYCIN.....	105	BLOOD GLUCOSE SYSTEM PAK.....	128
BENZNIDAZOLE.....	10	BLOOD GLUCOSE TEST STRIPS.....	112
<b>benzonatate cap 100 mg, 200 mg.....</b>	<b>50</b>	BLULINK BLOOD GLUCOSE MON.....	128

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BLULINK GLUCOSE TEST STRI.....	112	bupropion hcl tab er 24hr 150 mg, 300 mg.....	63
BONJESTA.....	56	bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg.....	63
BOOSTRIX.....	15	bupropion hcl tab 75 mg, 100 mg.....	63
bosentan tab 62.5 mg, 125 mg.....	48	bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg.....	62
BOSULIF.....	17	butalbital-acetaminophen-caffeine tab 50-325-40 mg.....	75
BRAFTOVI.....	17	butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg.....	76
BREO ELLIPTA.....	52	butalbital-acetaminophen cap 50-300 mg.....	75
BREZTRI AEROSPHERE.....	52	butalbital-acetaminophen tab 50-325 mg.....	75
BRILINTA.....	96	butalbital-aspirin-caffeine cap 50-325-40 mg.....	75
brimonidine tartrate gel 0.33% (base equivalent).....	105	butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg.....	76
brimonidine tartrate ophth soln 0.15%.....	100	butorphanol tartrate nasal soln 10 mg/ml.....	76
brimonidine tartrate ophth soln 0.2%.....	100	BYDUREON BCISE.....	30
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%.....	100	BYLVAY.....	57
BRIVIACT.....	83	BYLVAY (PELLETS).....	57
BRIXADI.....	75		
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily).....	100	<b>C</b>	
bromocriptine mesylate cap 5 mg (base equivalent).....	88	cabergoline tab 0.5 mg.....	36
bromocriptine mesylate tab 2.5 mg (base equivalent).....	88	CABLIVI.....	96
BRONCHITOL.....	54	CABOMETYX.....	18
BRONCHITOL TOLERANCE TEST.....	54	caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv).....	69
BROVANA.....	52	CALCIPOTRIENE.....	105
BRUKINSA.....	17	calcipotriene-betamethasone dipropionate oint 0.005-0.064%.....	105
BUDESONIDE.....	25	calcipotriene-betamethasone dipropionate susp 0.005-0.064%.....	105
budesonide delayed release particles cap 3 mg.....	25	calcipotriene cream 0.005%.....	105
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act.....	52	calcipotriene oint 0.005%.....	105
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml.....	52	calcitonin (salmon) inj 200 unit/ml.....	36
budesonide tab er 24hr 9 mg.....	25	calcitonin (salmon) nasal soln 200 unit/act.....	36
bumetanide tab 0.5 mg.....	45	CALCITRIOL.....	105
bumetanide tab 1 mg, 2 mg.....	45	calcitriol cap 0.25 mcg, 0.5 mcg.....	36
BUMEX.....	45	calcitriol oral soln 1 mcg/ml.....	36
BUPHENYL.....	36	calcium acetate (phosphate binder) cap 667 mg (169 mg ca).....	58
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv).....	76	calcium acetate (phosphate binder) tab 667 mg.....	58
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv).....	76	CALQUENCE.....	18
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv), 12-3 mg (base equiv).....	76	CAMZYOS.....	48
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv).....	76	candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg.....	43
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv).....	76	candesartan cilexetil tab 32 mg.....	43
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....	76	candesartan cilexetil tab 4 mg, 8 mg, 16 mg.....	43
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr.....	76	capecitabine tab 150 mg, 500 mg.....	18
bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	72	CAPLYTA.....	65
		CAPRELSA.....	18
		captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....	43
		CAPVAXIVE.....	12
		CARBAGLU.....	36
		CARBAMAZEPINE.....	83

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carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg.....	83	CARETOUCH INSULIN SYRINGE.....	129
carbamazepine chew tab 100 mg.....	83	CARETOUCH LANCING DEVICE.....	129
carbamazepine susp 100 mg/5ml.....	83	CARETOUCH PEN NEEDLE 29GX.....	129
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg.....	83	CARETOUCH PEN NEEDLE 33GX.....	129
carbamazepine tab 200 mg.....	83	CARETOUCH PEN NEEDLES 31.....	129
CARBATROL.....	83	CARETOUCH PEN NEEDLES 31G.....	129
CARBIDOPA/LEVODOPA ODT.....	88	CARETOUCH PEN NEEDLES 32G.....	130
carbidopa & levodopa tab er 25-100 mg, 50-200 mg.....	88	CARETOUCH SAFETY LANCETS/.....	130
carbidopa & levodopa tab 25-250 mg.....	88	CARETOUCH TWIST LANCETS 2.....	130
carbidopa & levodopa tab 10-100 mg, 25-100 mg.....	88	CARETOUCH TWIST LANCETS 3.....	130
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg.....	88	CARETOUCH TWIST LANCETS M.....	130
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg.....	88	carglumic acid soluble tab 200 mg.....	36
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg.....	88	carisoprodol tab 350 mg.....	89
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg.....	88	CARNITOR.....	36
carbidopa-levodopa-entacapone tabs 25-100-200 mg.....	88	CARNITOR SF.....	36
carbidopa-levodopa-entacapone tabs 50-200-200 mg.....	88	CARTEOLOL HCL.....	100
carbidopa tab 25 mg.....	88	carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg.....	40
carbinoxamine maleate tab 4 mg.....	50	CAYA.....	130
carbonyl iron susp 15 mg/1.25ml (elemental iron).....	93	CAYSTON.....	11
CARDIOCOM LANCING DEVICE.....	128	CEFACTOR.....	1
CAREFINE PEN NEEDLE 32GX4.....	128	CEFADROXIL.....	1
CAREFINE PEN NEEDLES 29GX.....	128	cefadroxil cap 500 mg.....	1
CAREFINE PEN NEEDLES 30GX.....	128	cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....	1
CAREFINE PEN NEEDLES 31GX.....	128	cefdinir cap 300 mg.....	1
CAREFINE PEN NEEDLES 32GX.....	128	cefdinir for susp 125 mg/5ml, 250 mg/5ml.....	1
CAREONE ADVANCED LANCING.....	128	cefixime cap 400 mg.....	2
CAREONE BLOOD GLUCOSE MON.....	128	cefixime for susp 100 mg/5ml.....	2
CAREONE BLOOD GLUCOSE TES.....	112	cefixime for susp 200 mg/5ml.....	2
CAREONE INSULIN SYRINGES/.....	128	cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml.....	2
CAREONE LANCET SUPER THIN.....	128	cefpodoxime proxetil tab 100 mg, 200 mg.....	2
CAREONE LANCET THIN.....	128	cefprozil for susp 125 mg/5ml, 250 mg/5ml.....	2
CAREONE LANCET ULTRA THIN.....	128	cefprozil tab 250 mg, 500 mg.....	2
CAREONE UNIFINE PENTIPS P.....	128	cefuroxime axetil tab 250 mg, 500 mg.....	2
CAREPOINT PRECISION POLY.....	129	celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg.....	78
CAREPOINT PRECISION SYRIN.....	129	CELLCEPT.....	180
CAREPOINT SAFETY 1ST NEED.....	129	cephalexin cap 250 mg, 500 mg.....	2
CARESENS LANCETS.....	129	cephalexin for susp 125 mg/5ml, 250 mg/5ml.....	2
CARESENS N BLOOD GLUCOSE.....	112	cephalexin tab 250 mg, 500 mg.....	2
CARESENS N FELIZ.....	129	CEQUA.....	100
CARESENS N FELIZ BT.....	129	CERDELGA.....	93
CARESENS N GLUCOSE MONITO.....	129	cevimeline hcl cap 30 mg.....	103
CARESENS N VOICE BLOOD GL.....	129	CHEMET.....	111
CARETOUCH BLOOD GLUCOSE M.....	129	CHEMSTRIP BG LOG BOOK.....	130
CARETOUCH BLOOD GLUCOSE T.....	112	CHEMSTRIP-K.....	113
CARETOUCH HYPODERMIC NEED.....	129	CHENODAL.....	58
		CHLORDIAZEPOXIDE/AMITRIPT.....	72
		chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg.....	62
		chlorhexidine gluconate soln 0.12%.....	103
		chloroquine phosphate tab 250 mg, 500 mg.....	10
		chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....	65
		CHLORPROMAZINE HYDROCHLOR.....	65

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chlorthalidone tab 25 mg, 50 mg.....	45	CLEVER CHEK AUTO CODE VOI.....	130
chlorzoxazone tab 500 mg.....	89	CLEVER CHEK BLOOD GLUCOSE.....	130
CHOLBAM.....	58	CLEVER CHEK LANCETS ULTRA.....	130
cholecalciferol cap 1.25 mg (50000 unit).....	90	CLEVER CHEK TEST STRIPS.....	113
cholestyramine light powder 4 gm/dose.....	47	CLEVER CHOICE AUTO-CODE P.....	113
cholestyramine light powder packets 4 gm.....	47	CLEVER CHOICE COMFORT EZ.....	130
cholestyramine powder 4 gm/dose.....	47	CLEVER CHOICE MICRO BLOOD.....	131
cholestyramine powder packets 4 gm.....	47	CLEVER CHOICE MICRO TEST.....	113
choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv).....	47	CLEVER CHOICE MINI BLOOD.....	131
CHOSEN LANCETS 30G.....	130	CLEVER CHOICE NO CODING T.....	113
CHOSEN LANCING DEVICE.....	130	CLEVER CHOICE TALK BLOOD.....	131
CHOSEN SAFETY LANCETS 28G.....	130	CLEVER CHOICE TALK NO COD.....	113
CIALIS.....	50	CLICKFINE PEN NEEDLE 32GX.....	131
CIBINQO.....	105	CLICKFINE PEN NEEDLES 31G.....	131
ciclopirox gel 0.77%.....	105	CLICKFINE PEN NEEDLES 32G.....	131
ciclopirox olamine cream 0.77% (base equiv).....	106	CLICKFINE PEN NEEDLE UNIV.....	131
ciclopirox olamine susp 0.77% (base equiv).....	106	CLICKFINE UNIVERSAL PEN N.....	131
ciclopirox shampoo 1%.....	106	CLIMARA PRO.....	27
ciclopirox solution 8%.....	106	clindamycin hcl cap 75 mg, 150 mg, 300 mg.....	11
cilostazol tab 50 mg, 100 mg.....	96	clindamycin palmitate hcl for soln 75 mg/5ml (base equiv).....	11
CIMDUO.....	5	clindamycin phosphate-benzoyl peroxide gel 1-5%.....	106
CIMETIDINE HYDROCHLORIDE.....	55	clindamycin phosphate gel 1%.....	106
CIMZIA.....	58	clindamycin phosphate lotion 1%.....	106
CIMZIA STARTER KIT.....	58	clindamycin phosphate soln 1%.....	106
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv).....	36	clindamycin phosphate swab 1%.....	106
CINRYZE.....	96	clindamycin phosphate vaginal cream 2%.....	60
CIPRO.....	3	clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%.....	106
ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....	103	CLINDESSE.....	60
ciprofloxacin hcl ophth soln 0.3% (base equivalent).....	100	clobazam suspension 2.5 mg/ml.....	83
ciprofloxacin hcl otic soln 0.2% (base equivalent).....	103	clobazam tab 10 mg, 20 mg.....	83
ciprofloxacin hcl tab 750 mg (base equiv).....	3	clobetasol propionate cream 0.05%.....	106
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv).....	3	clobetasol propionate emollient base cream 0.05%.....	106
CIPRO HC.....	103	clobetasol propionate gel 0.05%.....	106
citalopram hydrobromide oral soln 10 mg/5ml.....	63	clobetasol propionate oint 0.05%.....	106
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv).....	63	clobetasol propionate soln 0.05%.....	106
CITRANATAL B-CALM.....	90	clocortolone pivalate cream 0.1%.....	106
CITRANATAL MEDLEY.....	90	CLODERM.....	106
CLARITHROMYCIN.....	2	clomipramine hcl cap 25 mg, 50 mg, 75 mg.....	63
clarithromycin tab er 24hr 500 mg.....	2	clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	83
clarithromycin tab 250 mg, 500 mg.....	2	clonazepam tab 0.5 mg, 1 mg, 2 mg.....	83
CLEANLET LANCETS 28G.....	130	clonidine hcl tab er 12hr 0.1 mg.....	69
CLEMASTINE FUMARATE.....	50	clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg.....	43
CLEOCIN.....	11	clonidine td patch weekly 0.1 mg/24hr.....	43
CLEOCIN PEDIATRIC GRANULE.....	11	clonidine td patch weekly 0.2 mg/24hr.....	43
CLEOCIN-T.....	106	clonidine td patch weekly 0.3 mg/24hr.....	43
CLEVER CHEK AUTO-CODE BLO.....	130	clopidogrel bisulfate tab 75 mg (base equiv).....	96
CLEVER CHEK AUTO-CODE TES.....	113	clopidogrel bisulfate tab 300 mg (base equiv).....	96
CLEVER CHEK AUTO-CODE VOI.....	113	clorazepate dipotassium tab 7.5 mg.....	62

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clorazepate dipotassium tab 3.75 mg, 15 mg.....	62	CONTOUR NEXT EZ BLOOD GLU.....	132
clotrimazole troche 10 mg.....	103	CONTOUR NEXT GEN BLOOD GL.....	132
clotrimazole w/ betamethasone cream 1-0.05%.....	106	CONTOUR NEXT LINK BLOOD G.....	132
CLOZAPINE ODT.....	65	CONTOUR NEXT LINK 2.4 WIR.....	132
clozapine orally disintegrating tab 25 mg, 100 mg, 150 mg, 200 mg.....	65	CONTOUR NEXT LINK WIRELES.....	132
clozapine tab 25 mg, 50 mg, 100 mg, 200 mg.....	65	CONTOUR NEXT ONE BLOOD GL.....	132
COAGADEX.....	96	CONTOUR PLUS BLOOD GLUCOS.....	113
COAGUCHEK LANCETS.....	131	CONTOUR PLUS BLUE BLOOD G.....	132
COARTEM.....	10	COOL BLOOD GLUCOSE MONITO.....	132
CODEINE SULFATE.....	76	COOL BLOOD GLUCOSE TEST S.....	113
codeine sulfate tab 30 mg.....	76	COPIKTRA.....	18
colchicine tab 0.6 mg.....	82	CORDRAN.....	106
colchicine w/ probenecid tab 0.5-500 mg.....	82	CORIFACT.....	96
colesevelam hcl packet for susp 3.75 gm.....	47	CORLANOR.....	48
colesevelam hcl tab 625 mg.....	47	CORTENEMA.....	104
COLESTID.....	47	CORTIFOAM.....	104
colestipol hcl granule packets 5 gm.....	47	CORTISONE ACETATE.....	25
colestipol hcl granules 5 gm.....	47	CORTISPORIN-TC.....	103
colestipol hcl tab 1 gm.....	47	COSENTYX.....	106
colistimethate sod for inj 150 mg (colistin base activity).....	11	COSENTYX SENSOREADY PEN.....	106
COLY-MYCIN M.....	11	COSENTYX UNOREADY.....	106
COMBIPATCH.....	27	COTELLIC.....	18
COMBIVENT RESPIMAT.....	52	CREON.....	57
COMETRIQ.....	18	CRESEMBA.....	4
COMFORT ASSIST INSULIN SY.....	131	CRINONE.....	60
COMFORT ASSURED LANCETS M.....	131	CROMOLYN SODIUM.....	100
COMFORT ASSURED LANCETS S.....	131	<b>cromolyn sodium oral conc 100 mg/5ml.....</b>	<b>58</b>
COMFORT EZ/31G X 5MM.....	131	<b>cromolyn sodium soln nebu 20 mg/2ml.....</b>	<b>52</b>
COMFORT EZ/31G X 6MM.....	131	CROTAN.....	106
COMFORT EZ INSULIN SYRING.....	131	CUVPOSA.....	55
COMFORT EZ MICRO/32G X 4M.....	131	CVS ADVANCED GLUCOSE METE.....	113
COMFORT EZ PRO SAFETY PEN.....	131	CVS GLUCOSE METER TEST ST.....	113
COMFORT EZ SHORT/31G X 8M.....	131	CVS LANCETS 21G.....	133
COMFORT LANCETS.....	131	CVS LANCETS MICRO-THIN 33.....	132
COMFORT TOUCH LANCETS ULT.....	131	CVS LANCETS MICRO THIN 33.....	132
COMFORT TOUCH PEN NEEDLES.....	132	CVS LANCETS ORIGINAL.....	132
COMFORT TOUCH PLUS SAFETY.....	132	CVS LANCETS THIN 26G.....	133
COMFORT TOUCH TWIST LANCE.....	132	CVS LANCETS ULTRA-THIN 30.....	133
COMIRNATY 2024-25.....	12	CVS LANCETS ULTRA THIN 30.....	133
COMPLERA.....	5	CVS LANCING DEVICE.....	133
COMPLETE NATAL DHA.....	90	CVS TRUE METRIX BLOOD GLU.....	113
COMPLETENATE.....	90	CVS ULTRA THIN LANCETS.....	133
CO-NATAL FA.....	90	<b>cyanocobalamin inj 1000 mcg/ml.....</b>	<b>93</b>
CONCEPT DHA.....	90	<b>cyclobenzaprine hcl tab 5 mg, 10 mg.....</b>	<b>89</b>
CONCEPT OB.....	90	CYCLOGYL.....	100
CONCERTA.....	69	CYCLOMYDRIL.....	100
CONDOMS.....	132	<b>cyclopentolate hcl ophth soln 1%.....</b>	<b>100</b>
CONDYLOX.....	106	CYCLOPHOSPHAMIDE.....	18
CONTOUR BLOOD GLUCOSE MON.....	132	<b>cyclophosphamide cap 25 mg, 50 mg.....</b>	<b>18</b>
CONTOUR BLOOD GLUCOSE TES.....	113	<b>cycloserine cap 250 mg.....</b>	<b>4</b>
CONTOUR NEXT BLOOD GLUCOS.....	113	CYCLOSET.....	30
		<b>cyclosporine cap 25 mg, 100 mg.....</b>	<b>180</b>
		<b>cyclosporine modified cap 50 mg.....</b>	<b>180</b>

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cyclosporine modified cap 25 mg, 100 mg.....	180	DERMA-SMOOTH/FS BODY.....	106
cyclosporine modified oral soln 100 mg/ml.....	180	DERMA-SMOOTH/FS SCALP.....	106
cyproheptadine hcl syrup 2 mg/5ml.....	50	DERMOTIC.....	103
cyproheptadine hcl tab 4 mg.....	50	DESCOVY.....	5
CYSTADANE.....	36	desipramine hcl tab 10 mg, 25 mg.....	63
CYSTADROPS.....	100	desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg.....	63
CYSTAGON.....	61	desloratadine tab 5 mg.....	50
CYSTARAN.....	100	DESMOPRESSIN ACETATE.....	36
CYTOTEC.....	55	desmopressin acetate inj 4 mcg/ml.....	36
<b>D</b>		desmopressin acetate nasal spray soln 0.01% (refrigerated), 0.01%.....	37
dabigatran etexilate mesylate cap 110 mg (etexilate base eq).....	94	desmopressin acetate preservative free (pf) inj 4 mcg/ ml.....	37
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq).....	94	desmopressin acetate tab 0.1 mg, 0.2 mg.....	37
dalfampridine tab er 12hr 10 mg.....	72	desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5).....	28
danazol cap 50 mg, 100 mg, 200 mg.....	26	desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	28
DANTRIUM.....	89	desonide cream 0.05%.....	106
dantrolene sodium cap 25 mg.....	89	desonide oint 0.05%.....	106
dantrolene sodium cap 50 mg, 100 mg.....	89	desoximetasone cream 0.05%, 0.25%.....	106
dapsone tab 25 mg, 100 mg.....	11	desoximetasone gel 0.05%.....	107
DAPTACEL.....	15	desoximetasone oint 0.05%, 0.25%.....	107
DARAPRIM.....	10	desoximetasone spray 0.25%.....	107
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv).....	60	DESOXYN.....	70
darunavir tab 600 mg.....	5	DESVENLAFAXINE ER.....	63
darunavir tab 800 mg.....	5	desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv).....	63
dasatinib tab 20 mg.....	18	DEXAMETHASONE.....	25
dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg.....	18	dexamethasone elixir 0.5 mg/5ml.....	25
DAURISMO.....	18	DEXAMETHASONE INTENSOL.....	25
DAYBUE.....	89	DEXAMETHASONE SODIUM PHOS.....	100
DAYPRO.....	79	dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg.....	25
D-CARE GLUCOMETER KIT/GLU.....	133	DEXCOM G6 RECEIVER.....	133
DDAVP.....	36	DEXCOM G7 RECEIVER.....	133
deferasirox granules packet 90 mg, 180 mg, 360 mg.....	111	DEXCOM G6 SENSOR.....	133
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg.....	111	DEXCOM G7 SENSOR.....	133
deferasirox tab 90 mg, 180 mg, 360 mg.....	111	DEXCOM G6 TRANSMITTER.....	133
deferiprone tab 500 mg, 1000 mg.....	111	dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg.....	70
deflazacort susp 22.75 mg/ml.....	25	dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg.....	70
deflazacort tab 6 mg.....	25	dextroamphetamine sulfate cap er 24hr 5 mg.....	70
deflazacort tab 18 mg.....	25	dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg.....	70
deflazacort tab 30 mg, 36 mg.....	25	dextroamphetamine sulfate oral solution 5 mg/5ml.....	70
DELESTROGEN.....	27	dextroamphetamine sulfate tab 5 mg.....	70
DELSTRIGO.....	5	dextroamphetamine sulfate tab 10 mg.....	70
DELZICOL.....	58	DIABETES CARE.....	133
demeclocycline hcl tab 150 mg, 300 mg.....	3	DIABETES MONITORING DIGIT.....	133
DENTA 5000 PLUS SENSITIVE.....	103	DIACOMIT.....	83
DEPAKOTE.....	83	DIATHRIVE+ BLOOD GLUCOSE.....	113
DEPAKOTE ER.....	83	DIATHRIVE BLOOD GLUCOSE M.....	133
DEPAKOTE SPRINKLES.....	83		

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DIATHRIVE BLOOD GLUCOSE T.....	113	dimethyl fumarate capsule delayed release 240 mg.....	72
DIATHRIVE LANCETS.....	133	dimethyl fumarate capsule dr starter pack 120 mg &	
DIATHRIVE LANCETS ULTRA T.....	133	240 mg.....	72
DIATHRIVE LANCING DEVICE.....	133	diphenoxylate w/ atropine tab 2.5-0.025 mg.....	55
DIATHRIVE PEN NEEDLE/31G.....	133	DIPROLENE.....	107
DIATHRIVE PEN NEEDLE/32G.....	133	dipyridamole tab 25 mg, 50 mg, 75 mg.....	96
DIATHRIVE PEN NEEDLE/31 G.....	133	disopyramide phosphate cap 100 mg, 150 mg.....	42
diazepam conc 5 mg/ml.....	62	disulfiram tab 250 mg, 500 mg.....	72
diazepam oral soln 1 mg/ml.....	62	DIURIL.....	46
DIAZEPAM RECTAL GEL.....	83	divalproex sodium cap delayed release sprinkle 125	
diazepam rectal gel delivery system 10 mg, 20 mg.....	83	mg.....	83
diazepam tab 2 mg, 5 mg, 10 mg.....	62	divalproex sodium tab delayed release 125 mg, 250	
diazoxide susp 50 mg/ml.....	30	mg, 500 mg.....	83
DIBENZYLINE.....	43	divalproex sodium tab er 24 hr 250 mg, 500 mg.....	83
dichlorphenamide tab 50 mg.....	46	DIVIGEL.....	27
DICLEGIS.....	56	dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg),	
diclofenac potassium tab 50 mg.....	79	500 mcg (0.5 mg).....	42
diclofenac sodium ophth soln 0.1%.....	100	DOJOLVI.....	93
diclofenac sodium soln 1.5%.....	107	donepezil hydrochloride orally disintegrating tab 5 mg,	
diclofenac sodium tab delayed release 25 mg, 50 mg,		10 mg.....	72
75 mg.....	79	donepezil hydrochloride tab 5 mg, 10 mg, 23 mg.....	72
diclofenac w/ misoprostol tab delayed release 50-0.2		DOPTLET.....	93
mg.....	79	dorzolamide hcl ophth soln 2%.....	100
diclofenac w/ misoprostol tab delayed release 75-0.2		dorzolamide hcl-timolol maleate ophth soln	
mg.....	79	2-0.5%.....	100
dicloxacillin sodium cap 250 mg, 500 mg.....	1	dorzolamide hcl-timolol maleate pf ophth soln	
dicyclomine hcl cap 10 mg.....	55	2-0.5%.....	100
dicyclomine hcl oral soln 10 mg/5ml.....	55	DOVATO.....	5
dicyclomine hcl tab 20 mg.....	55	doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg.....	43
DIFICID.....	2	doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg,	
DIFLUCAN.....	4	150 mg.....	63
diflunisal tab 500 mg.....	75	doxepin hcl conc 10 mg/ml.....	63
difluprednate ophth emulsion 0.05%.....	100	doxepin hcl cream 5%.....	107
DIGOXIN.....	39	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base	
digoxin oral soln 0.05 mg/ml.....	39	equiv).....	68
digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg),		doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg.....	37
250 mcg (0.25 mg).....	39	doxycycline hyclate cap 50 mg.....	3
dihydroergotamine mesylate inj 1 mg/ml.....	81	doxycycline hyclate cap 100 mg.....	3
dihydroergotamine mesylate nasal spray 4 mg/ml.....	81	doxycycline hyclate tab 20 mg, 100 mg.....	3
DILANTIN.....	83	doxycycline monohydrate cap 50 mg, 100 mg.....	3
DILANTIN-125.....	83	doxycycline monohydrate for susp 25 mg/5ml.....	3
DILANTIN INFATABS.....	83	doxycycline monohydrate tab 50 mg, 75 mg, 100	
DILAUDID.....	76	mg.....	3
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	41	doxylamine-pyridoxine tab delayed release 10-10	
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	41	mg.....	56
diltiazem hcl coated beads cap er 24hr 120 mg, 180		DRISDOL.....	90
mg, 240 mg, 300 mg, 360 mg.....	41	dronabinol cap 2.5 mg.....	56
diltiazem hcl extended release beads cap er 24hr 120		dronabinol cap 5 mg, 10 mg.....	56
mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg.....	41	DROPLET GENTEEL LANCING D.....	133
diltiazem hcl tab er 24hr 420 mg.....	41	DROPLET INSULIN SYRINGE 0.....	134
diltiazem hcl tab 90 mg.....	41	DROPLET INSULIN SYRINGE 1.....	134
diltiazem hcl tab 30 mg, 60 mg, 120 mg.....	41	DROPLET INSULIN SYRINGE/U.....	134
dimethyl fumarate capsule delayed release 120 mg.....	72	DROPLET INSULIN SYRINGE U.....	133

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DROPLET LANCETS ULTRA THIN.....	134	<b>E</b>	EASY COMFORT INSULIN SYRI.....	135
DROPLET LANCING DEVICE.....	134		EASY COMFORT PEN NEEDLES.....	136
DROPLET MICRON 34G X 9/64.....	134		EASY COMFORT SAFETY PEN N.....	136
DROPLET PEN NEEDLE/MICRON.....	134		EASY GLIDE PEN NEEDLES 33.....	136
DROPLET PEN NEEDLES 29GX1.....	134		EASYGLUCO.....	114
DROPLET PEN NEEDLES 31GX5.....	134		EASY MAX BLOOD GLUCOSE TE.....	113
DROPLET PEN NEEDLES 31GX6.....	134		EASYMAX NG SELF-MONITORIN.....	138
DROPLET PEN NEEDLES 31GX8.....	134		EASYMAX TEST STRIPS.....	114
DROPLET PEN NEEDLES 32GX4.....	134		EASYMAX 15 TEST STRIPS.....	114
DROPLET PEN NEEDLES 32GX5.....	134		EASY MAX T1 SELF-MONITORI.....	136
DROPLET PEN NEEDLES 32GX6.....	134		EASYMAX V BLOOD GLUCOSE S.....	138
DROPLET PEN NEEDLES 32GX8.....	134		EASY MINI EJECT LANCING D.....	136
DROPLET PEN NEEDLES 29G X.....	134		EASY MINI LANCING DEVICE.....	136
DROPLET PEN NEEDLES 30G X.....	134		EASY PLUS II BLOOD GLUCOS.....	113
DROPLET PEN NEEDLES 31G X.....	134		EASYPOINT NEEDLE/18G X 1-.....	138
DROPLET PEN NEEDLES 32G X.....	134		EASYPOINT NEEDLE/20G X 1-.....	138
DROPLET PERSONAL LANCETS.....	134		EASYPOINT NEEDLE/21G X 1-.....	138
DROPSAFE INSULIN SAFETY S.....	135		EASYPOINT NEEDLE/22G X 1-.....	139
DROPSAFE SAFETY PEN NEEDL.....	135		EASYPOINT NEEDLE/18G X 1".....	138
DROPSAFE SAFTEY PEN NEEDL.....	135		EASYPOINT NEEDLE/20G X 1".....	138
DROPSAFE SICURA.....	135		EASYPOINT NEEDLE/21G X 1".....	139
<b>drosiprenone-ethinyl estradiol tab 3-0.02 mg.....</b>	<b>28</b>		EASYPOINT NEEDLE/22G X 1".....	139
<b>drosiprenone-ethinyl estradiol tab 3-0.03 mg.....</b>	<b>28</b>		EASYPOINT NEEDLE 25GX1-1/.....	138
<b>drosiprenone-ethinyl estrad-levomefolate tab</b>			EASYPOINT NEEDLE 25G X 5/.....	138
<b>3-0.02-0.451 mg.....</b>	<b>28</b>		EASYPOINT NEEDLE 23G X 1".....	138
<b>drosiprenone-ethinyl estrad-levomefolate tab</b>			EASYPOINT NEEDLE 25G X 1".....	138
<b>3-0.03-0.451 mg.....</b>	<b>28</b>		EASYPRO BLOOD GLUCOSE MON.....	139
DROXIA.....	93		EASYPRO BLOOD GLUCOSE TES.....	114
DRUG MART LANCETS THIN.....	135		EASYPRO PLUS.....	114
DRUG MART LANCETS ULTRA T.....	135		EASY STEP BLOOD GLUCOSE M.....	136
DRUG MART ON-THE-GO LANCE.....	135		EASY STEP TEST STRIPS.....	113
DRUG MART UNIFINE PENTIPS.....	135		EASY TALK BLOOD GLUCOSE M.....	136
DRUG MART UNILET LANCETS.....	135		EASY TALK BLOOD GLUCOSE T.....	113
DRUG MART UNILET MICRO TH.....	135		EASY TALK PLUS II BLOOD G.....	113
DUANE READE LANCET ALTERN.....	135		EASY TOUCH ALLERGY TRAY S.....	136
DUANE READE LANCET SUPER.....	135		EASY TOUCH FLIPLOCK NEEDL.....	136
DUANE READE LANCET ULTRA.....	135		EASY TOUCH FLIPLOCK SAFET.....	136
DUANE READE UNIFINE PENTI.....	135		EASY TOUCH GLUCOSE MONITO.....	136
DUAVEE.....	27		EASY TOUCH GLUCOSE TEST S.....	113
DULERA.....	52		EASY TOUCH 32GX5MM.....	138
<b>duloxetine hcl enteric coated pellets cap 20 mg (base</b>			EASY TOUCH 32GX6MM.....	138
<b>eq), 30 mg (base eq), 60 mg (base eq).....</b>	<b>63</b>		EASY TOUCH HEALTHPRO GLUC.....	114
DUO-CARE TEST STRIPS.....	113		EASY TOUCH HYPODERMIC NEE.....	137
DUPIXENT.....	107		EASY TOUCH INSULIN SYRING.....	137
DUREX EXTRA SENSITIVE THI.....	135		EASY TOUCH LANCETS 30G/BU.....	137
DUREX REALFEEL NON-LATEX.....	135		EASY TOUCH LANCETS 21G/PR.....	137
DUREX TROPICAL.....	135		EASY TOUCH LANCETS 23G/PR.....	137
DUREZOL.....	100		EASY TOUCH LANCETS 26G/PR.....	137
<b>dutasteride cap 0.5 mg.....</b>	<b>61</b>		EASY TOUCH LANCETS 28G/PR.....	137
<b>dutasteride-tamsulosin hcl cap 0.5-0.4 mg.....</b>	<b>61</b>		EASY TOUCH LANCETS 30G/PR.....	137
DUVYZAT.....	89		EASY TOUCH LANCETS 32G/PR.....	137
DYCLOPRO.....	107			
DYRENIUM.....	46			

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EASY TOUCH LANCETS 26G/PU.....	137	EMBRACE BLOOD GLUCOSE MON.....	139
EASY TOUCH LANCETS 28G/PU.....	137	EMBRACE BLOOD GLUCOSE TES.....	114
EASY TOUCH LANCETS 30G/PU.....	137	EMBRACE EVO BLOOD GLUCOSE.....	114
EASY TOUCH LANCETS 32G/PU.....	137	EMBRACE EVO COMPACT BLOOD.....	139
EASY TOUCH LANCETS 28G/TW.....	137	EMBRACE LANCETS ULTRA THI.....	139
EASY TOUCH LANCETS 30G/TW.....	137	EMBRACE LANCING DEVICE WI.....	139
EASY TOUCH LANCETS 32G/TW.....	137	EMBRACE PEN NEEDLES/29G X.....	139
EASY TOUCH LANCETS 33G/TW.....	137	EMBRACE PEN NEEDLES/30G X.....	139
EASY TOUCH LANCING DEVICE.....	137	EMBRACE PEN NEEDLES/31G X.....	139
EASY TOUCH PEN NEEDLE 30.....	137	EMBRACE PEN NEEDLES/32G X.....	139
EASY TOUCH PEN NEEDLE/30.....	137	EMBRACE PRESSURE ACTIVATE.....	139
EASY TOUCH PEN NEEDLES 29.....	137	EMBRACE PRO BLOOD GLUCOSE.....	114
EASY TOUCH PEN NEEDLES 31.....	137	EMBRACE TALK BLOOD GLUCOS.....	114
EASY TOUCH PEN NEEDLES 32.....	137	EMBRACE WAVE BLOOD GLUCOS.....	114
EASY TOUCH PEN NEEDLES/31.....	138	EMEND.....	56
EASY TOUCH SAFETY LANCETS.....	138	EMEND TRIPACK.....	57
EASY TOUCH SAFETY PEN NEE.....	138	EMFLAZA.....	25
EASY TOUCH SHEATHLOCK SAF.....	138	EMGALITY.....	81
EASY TOUCH TUBERCULIN FLI.....	138	EMPAVELI.....	96
EASY TOUCH TUBERCULIN SHE.....	138	EMSAM.....	63
EASY TRAK BLOOD GLUCOSE M.....	138	<b>emtricitabine caps 200 mg.....</b>	<b>6</b>
EASY TRAK BLOOD GLUCOSE T.....	114	<b>emtricitabine-tenofovir disoproxil fumarate tab</b>	
EASY TRAK II BLOOD GLUCOS.....	114	<b>100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg.....</b>	<b>6</b>
<b>econazole nitrate cream 1%.....</b>	<b>107</b>	EMTRIVA.....	6
EDECRIN.....	46	EMVERM.....	10
EDURANT.....	5	<b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5</b>	
E.E.S. 400.....	2	<b>mg.....</b>	<b>43</b>
E.E.S. GRANULES.....	2	<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25</b>	
<b>efavirenz-emtricitabine-tenofovir df tab 600-200-300</b>		<b>mg.....</b>	<b>43</b>
<b>mg.....</b>	<b>5</b>	<b>enalapril maleate oral soln 1 mg/ml.....</b>	<b>44</b>
<b>efavirenz-lamivudine-tenofovir df tab 400-300-300</b>		<b>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg.....</b>	<b>44</b>
<b>mg.....</b>	<b>5</b>	ENBREL.....	79
<b>efavirenz-lamivudine-tenofovir df tab 600-300-300</b>		ENBREL MINI.....	79
<b>mg.....</b>	<b>6</b>	ENBREL SURECLICK.....	79
<b>efavirenz tab 600 mg.....</b>	<b>5</b>	ENCARE.....	60
EFUDEX.....	107	ENDARI.....	93
EGATEN.....	10	ENGERIX-B.....	13
EGRIFTA SV.....	37	<b>enoxaparin sodium inj 300 mg/3ml.....</b>	<b>95</b>
ELEMENT AUTOCODE SYSTEM.....	139	<b>enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40</b>	
ELEMENT COMPACT BLOOD GLU.....	139	<b>mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120</b>	
ELEMENT COMPACT TEST STRI.....	114	<b>mg/0.8ml, 150 mg/ml.....</b>	<b>94</b>
ELEMENT COMPACT V BLOOD.....	139	ENSPRYNG.....	180
ELEMENT PLUS BLOOD GLUCOS.....	139	<b>entacapone tab 200 mg.....</b>	<b>88</b>
ELEMENT TEST STRIPS.....	114	<b>entecavir tab 0.5 mg, 1 mg.....</b>	<b>6</b>
ELESTRIN.....	27	ENTRESTO.....	48
<b>eletriptan hydrobromide tab 20 mg (base equivalent),</b>		ENTYVIO PEN.....	58
<b>40 mg (base equivalent).....</b>	<b>81</b>	ENVARUS XR.....	181
ELIMITE.....	107	EOHILIA.....	25
ELIQUIS.....	94	EPANED.....	44
ELIQUIS STARTER PACK.....	94	EPCLUSA.....	6
ELLA.....	28	EPIDIOLEX.....	84
ELMIRON.....	61	EPIFOAM.....	107
ELOCTATE.....	96	<b>epinastine hcl ophth soln 0.05%.....</b>	<b>100</b>

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EPINEPHRINE.....	46	esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg.....	56
<b>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000).....</b>	<b>46</b>	ESPEROCT.....	96
<b>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000).....</b>	<b>46</b>	estazolam tab 1 mg, 2 mg.....	68
EPIVIR.....	6	ESTRACE.....	27
<b>eplerenone tab 25 mg, 50 mg.....</b>	<b>44</b>	estradiol & norethindrone acetate tab 0.5-0.1 mg.....	27
EPOGEN.....	93	estradiol & norethindrone acetate tab 1-0.5 mg.....	27
EPRONTIA.....	84	estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump).....	27
EQ BLOOD GLUCOSE TEST STR.....	114	estradiol tab 0.5 mg, 1 mg, 2 mg.....	27
EQL COLOR LANCETS 21G.....	140	estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%).....	27
EQL COLOR LANCETS MICRO T.....	139	estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr.....	27
EQL INSULIN SYRINGE/0.3ML.....	140	estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr.....	27
EQL INSULIN SYRINGE/0.5ML.....	140	estradiol vaginal cream 0.1 mg/gm.....	60
EQL INSULIN SYRINGE/1ML/2.....	140	estradiol vaginal tab 10 mcg.....	60
EQL INSULIN SYRINGE/1ML/3.....	140	estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ ml.....	27
EQL SHORT PEN NEEDLES 31G.....	140	ESTRING.....	60
EQL SUPER THIN LANCETS 30.....	140	ESTROGEL.....	27
EQL THIN LANCETS 26G.....	140	eszopiclone tab 1 mg, 2 mg, 3 mg.....	68
EQL ULTRA SHORT PEN NEEDL.....	140	ethacrynic acid tab 25 mg.....	46
EQUETRO.....	65	ethambutol hcl tab 100 mg.....	4
<b>ergocalciferol cap 1.25 mg (50000 unit).....</b>	<b>90</b>	ethambutol hcl tab 400 mg.....	4
ERGOLOID MESYLATES.....	72	ethosuximide cap 250 mg.....	84
ERGOMAR.....	81	ethosuximide soln 250 mg/5ml.....	84
ERGOTAMINE TARTRATE/CAFFE.....	81	ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg.....	28
ERIVEDGE.....	18	etodolac cap 200 mg, 300 mg.....	79
ERLEADA.....	18	etodolac tab er 24hr 400 mg, 500 mg, 600 mg.....	79
<b>erlotinib hcl tab 25 mg (base equivalent).....</b>	<b>18</b>	etodolac tab 400 mg.....	79
<b>erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent).....</b>	<b>18</b>	etodolac tab 500 mg.....	79
ERMEZA.....	35	etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr.....	28
ERTACZO.....	107	ETOPOSIDE.....	18
ERY.....	107	etravirine tab 100 mg, 200 mg.....	6
ERYGEL.....	107	EULEXIN.....	18
ERYPED 200.....	2	EVAMIST.....	27
ERYPED 400.....	2	EVENCARE BLOOD GLUCOSE MO.....	140
ERYTHROMYCIN.....	100	EVENCARE BLOOD GLUCOSE TE.....	114
ERYTHROMYCIN ETHYLSUCCINA.....	2	everolimus tab for oral susp 3 mg.....	18
<b>erythromycin ethylsuccinate for susp 200 mg/5ml.....</b>	<b>2</b>	everolimus tab for oral susp 2 mg, 5 mg.....	18
<b>erythromycin ethylsuccinate for susp 400 mg/5ml.....</b>	<b>2</b>	everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg.....	18
erythromycin gel 2%.....	107	everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg.....	181
erythromycin ophth oint 5 mg/gm.....	100	EVOLUTION AUTOCODE.....	114
erythromycin soln 2%.....	107	EVOTAZ.....	6
erythromycin tab delayed release 250 mg, 333 mg, 500 mg.....	2	EVRYSDI.....	89
erythromycin tab 250 mg, 500 mg.....	2	EXELDERM.....	107
ESBRIET.....	54		
escitalopram oxalate soln 5 mg/5ml (base equiv).....	63		
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv).....	63		
esomeprazole magnesium cap delayed release 40 mg (base eq).....	55		

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EXELON.....	72	FIASP FLEXTOUCH.....	32
<b>exemestane tab 25 mg.....</b>	<b>18</b>	FIASP PENFILL.....	32
EXJADE.....	111	FIBRYGA.....	96
EYSUVIS.....	100	FIFTY50 GLUCOSE METER 2.0.....	140
<b>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40</b>		FIFTY50 GLUCOSE TEST STRI.....	114
<b>mg, 10-80 mg.....</b>	<b>47</b>	FIFTY50 PEN NEEDLES/31GX8.....	140
<b>ezetimibe tab 10 mg.....</b>	<b>47</b>	FIFTY50 PEN NEEDLES/32GX4.....	140
E-Z JECT LANCETS.....	135	FIFTY50 PEN NEEDLES/32GX6.....	140
E-Z JECT LANCETS COLOR.....	135	FIFTY50 PEN NEEDLES 31GX5.....	140
E-Z JECT LANCETS 21G.....	135	FIFTY50 PEN NEEDLES 31G X.....	140
E-ZJECT LANCETS MICRO-THI.....	135	FIFTY50 SAFETY SEAL LANCE.....	140
E-Z JECT LANCETS SUPER TH.....	135	FIFTY50 SUPERIOR COMFORT.....	141
E-Z JECT LANCETS THIN 26G.....	135	FIFTY50 UNILET LANCETS 33.....	141
EZ-LETS LANCETS 21G.....	140	FILSPARI.....	61
EZ-LETS LANCETS 30G.....	140	FILSUVEZ.....	107
EZ-LETS LANCETS 26G SUPER.....	140	<b>finasteride tab 5 mg.....</b>	<b>61</b>
EZ-LETS LANCETS 28G ULTRA.....	140	FINGERSTIX LANCETS.....	141
<b>F</b>		<b>ingolimod hcl cap 0.5 mg (base equiv).....</b>	<b>72</b>
FABHALTA.....	96	FINTEPLA.....	84
<b>famciclovir tab 125 mg, 250 mg, 500 mg.....</b>	<b>6</b>	FIRDAPSE.....	90
<b>famotidine for susp 40 mg/5ml.....</b>	<b>56</b>	FIRVANQ.....	11
<b>famotidine tab 20 mg, 40 mg.....</b>	<b>56</b>	FLAREX.....	100
FANAPT.....	65	<b>flavoxate hcl tab 100 mg.....</b>	<b>60</b>
FANAPT TITRATION PACK.....	66	<b>flecainide acetate tab 50 mg, 100 mg, 150 mg.....</b>	<b>42</b>
FANTASY LUBRICATED.....	140	FLORIVA.....	92
FANTASY LUBRICATED/SPERMI.....	140	FLOW-EZE VENTED NEEDLE.....	141
FARESTON.....	19	FLUAD 2024-2025.....	13
FARXIGA.....	30	FLUARIX 2024-2025.....	13
FASENRA PEN.....	52	FLUBLOK 2024-2025.....	13
FC2 FEMALE CONDOM.....	140	FLUCELVAX 2024-2025.....	13
<b>febuxostat tab 40 mg, 80 mg.....</b>	<b>82</b>	<b>fluconazole for susp 10 mg/ml, 40 mg/ml.....</b>	<b>4</b>
FEIBA.....	96	<b>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg.....</b>	<b>4</b>
<b>felbamate susp 600 mg/5ml.....</b>	<b>84</b>	<b>flucytosine cap 250 mg, 500 mg.....</b>	<b>4</b>
<b>felbamate tab 400 mg, 600 mg.....</b>	<b>84</b>	<b>fludrocortisone acetate tab 0.1 mg.....</b>	<b>25</b>
FELBATOL.....	84	FLULAVAL 2024-2025.....	13
<b>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg.....</b>	<b>41</b>	FLUMIST NASAL VACCINE 202.....	13
FEMCAP.....	140	<b>flunisolide nasal soln 25 mcg/act (0.025%).....</b>	<b>50</b>
<b>fenofibrate micronized cap 43 mg, 67 mg, 130 mg, 134</b>		<b>fluocinolone acetonide cream 0.01%.....</b>	<b>107</b>
<b>mg, 200 mg.....</b>	<b>47</b>	<b>fluocinolone acetonide cream 0.025%.....</b>	<b>107</b>
<b>fenofibrate tab 48 mg, 145 mg.....</b>	<b>47</b>	<b>fluocinolone acetonide oil 0.01% (body oil).....</b>	<b>107</b>
<b>fenofibrate tab 54 mg, 160 mg.....</b>	<b>47</b>	<b>fluocinolone acetonide oil 0.01% (scalp oil).....</b>	<b>107</b>
<b>fenoprofen calcium tab 600 mg.....</b>	<b>79</b>	<b>fluocinolone acetonide oint 0.025%.....</b>	<b>107</b>
FENTANYL CITRATE ORAL TRA.....	76	<b>fluocinolone acetonide (otic) oil 0.01%.....</b>	<b>103</b>
<b>fantanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr,</b>		<b>fluocinolone acetonide soln 0.01%.....</b>	<b>107</b>
<b>75 mcg/hr, 100 mcg/hr.....</b>	<b>76</b>	FLUOCINONIDE.....	107
FERRIPROX.....	111	<b>fluocinonide cream 0.05%.....</b>	<b>107</b>
<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe),</b>		<b>fluocinonide emulsified base cream 0.05%.....</b>	<b>107</b>
<b>220 mg/5ml (44 mg/5ml elemental fe).....</b>	<b>93</b>	<b>fluocinonide oint 0.05%.....</b>	<b>107</b>
<b>fesoterodine fumarate tab er 24hr 4 mg, 8 mg.....</b>	<b>60</b>	<b>fluocinonide soln 0.05%.....</b>	<b>107</b>
FETZIMA.....	63	FLUORIDEX SENSITIVITY REL.....	103
FETZIMA TITRATION PACK.....	63	FLUORIMAX 5000 SENSITIVE.....	103
FIASP.....	32	<b>fluorometholone ophth susp 0.1%.....</b>	<b>100</b>
		FLUOROURACIL.....	107

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<b>fluorouracil cream 5%</b> .....	<b>107</b>	FORA GD50 BLOOD GLUCOSE M.....	141
<b>fluorouracil soln 5%</b> .....	<b>107</b>	FORA GD50 BLOOD GLUCOSE T.....	114
FLUOXETINE DR.....	63	FORA GD20 TEST STRIPS.....	114
<b>fluoxetine hcl cap 10 mg, 20 mg, 40 mg</b> .....	<b>63</b>	FORA GTEL BLOOD GLUCOSE M.....	141
<b>fluoxetine hcl solution 20 mg/5ml</b> .....	<b>63</b>	FORA GTEL BLOOD GLUCOSE T.....	115
<b>fluoxetine hcl tab 60 mg</b> .....	<b>64</b>	FORA LANCETS.....	141
<b>fluphenazine decanoate inj 25 mg/ml</b> .....	<b>66</b>	FORA LANCING DEVICE.....	141
FLUPHENAZINE HCL.....	66	FORA LANCING DEVICE/CLEAR.....	141
<b>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</b> .....	<b>66</b>	FORA PREMIUM V10 BLE BLOO.....	141
FLUPHENAZINE HYDROCHLORID.....	66	FORA TEST N' GO VOICE BLO.....	141
FLURBIPROFEN.....	79	FORA TN'G/TN'G VOICE BLOO.....	115
FLURBIPROFEN SODIUM.....	100	FORA TN'G ADVANCE PRO BLO.....	115
<b>flurbiprofen tab 100 mg</b> .....	<b>79</b>	FORA TN'G VOICE BLOOD GLU.....	141
FLUTICASONE PROPIONATE/SA.....	52	FORA V10/V12/D10/D20 BLOO.....	141
<b>fluticasone propionate cream 0.05%</b> .....	<b>108</b>	FORA V30A BLOOD GLUCOSE M.....	141
FLUTICASONE PROPIONATE DI.....	52	FORA V30A BLOOD GLUCOSE T.....	115
FLUTICASONE PROPIONATE HF.....	52	FORA V10 BLOOD GLUCOSE MO.....	141
<b>fluticasone propionate nasal susp 50 mcg/act</b> .....	<b>50</b>	FORA V12 BLOOD GLUCOSE MO.....	141
<b>fluticasone propionate oint 0.005%</b> .....	<b>108</b>	FORA V20 BLOOD GLUCOSE MO.....	141
<b>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</b> .....	<b>52</b>	FORA V10 BLOOD GLUCOSE TE.....	115
<b>fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)</b> .....	<b>47</b>	FORA V12 BLOOD GLUCOSE TE.....	115
<b>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</b> .....	<b>47</b>	FORA V20 BLOOD GLUCOSE TE.....	115
<b>fluvoxamine maleate tab 100 mg</b> .....	<b>64</b>	FOSAMAX.....	37
<b>fluvoxamine maleate tab 25 mg, 50 mg</b> .....	<b>64</b>	<b>fosamprenavir calcium tab 700 mg (base equiv)</b> .....	<b>6</b>
FLUZONE 2024-2025.....	13	<b>fosfomycin tromethamine powd pack 3 gm (base equivalent)</b> .....	<b>11</b>
FLUZONE HIGH-DOSE 2024-20.....	13	<b>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b> .....	<b>44</b>
FML FORTE.....	100	<b>fosinopril sodium tab 10 mg, 20 mg, 40 mg</b> .....	<b>44</b>
FML LIQUIFILM.....	100	FOSRENOL.....	58
FOCALIN.....	70	FOTIVDA.....	19
<b>folic acid tab 400 mcg, 800 mcg, 1 mg</b> .....	<b>93</b>	FRAGMIN.....	95
FOLIVANE-OB.....	90	FREESTYLE FREEDOM LITE.....	142
<b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml</b> .....	<b>95</b>	FREESTYLE INSULINX BLOOD.....	115
FORA BLOOD GLUCOSE TEST S.....	114	FREESTYLE LANCETS.....	142
FORACARE GD40.....	115	FREESTYLE LIBRE 2/READER/.....	142
FORACARE GD40 BLOOD GLUCO.....	141	FREESTYLE LIBRE 3/READER/.....	142
FORACARE PREMIUM V10 BLOO.....	141	FREESTYLE LIBRE/READER/FL.....	142
FORACARE PREMIUM V10 TEST.....	115	FREESTYLE LIBRE 2/SENSOR/.....	142
FORACARE TEST N GO BLOOD.....	142	FREESTYLE LIBRE 3/SENSOR/.....	142
FORACARE TEST N GO TEST S.....	115	FREESTYLE LIBRE 14 DAY/RE.....	142
FORA 6 CONNECT.....	115	FREESTYLE LIBRE 14 DAY/SE.....	142
FORA 6 CONNECT/GTEL BLOOD.....	115	FREESTYLE LIBRE 2 PLUS/SE.....	142
FORA D40/G31 BLOOD GLUCOS.....	114	FREESTYLE LIBRE 3 PLUS/SE.....	142
FORA D20 BLOOD GLUCOSE TE.....	114	FREESTYLE LITE BLOOD GLUC.....	142
FORA D15G BLOOD GLUCOSE T.....	114	FREESTYLE LITE TEST STRIP.....	115
FORA G30/PREMIUM V10 BLOO.....	115	FREESTYLE PRECISION NEO B.....	115
FORA G30A BLOOD GLUCOSE M.....	141	FREESTYLE TEST STRIPS.....	115
FORA G20 BLOOD GLUCOSE MO.....	141	FREESTYLE UNISTICK II LAN.....	142
FORA G20 BLOOD GLUCOSE TE.....	115	<b>frovatriptan succinate tab 2.5 mg (base equivalent)</b> .....	<b>81</b>
FORA GD20 BLOOD GLUCOSE M.....	141	FRUZAQLA.....	19
		FULPHILA.....	93

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FUROSCIX.....	46	<b>glipizide tab 5 mg, 10 mg.....</b>	<b>30</b>
FUROSEMIDE.....	46	GLOBAL EASE INJECT PEN NE.....	142
<b>furosemide oral soln 10 mg/ml.....</b>	<b>46</b>	GLOBAL EASY GLIDE INSULIN.....	143
<b>furosemide tab 20 mg, 40 mg, 80 mg.....</b>	<b>46</b>	GLOBAL EASY GLIDE PEN NEE.....	143
FUZEON.....	6	GLOBAL INJECT EASE INSULI.....	143
FYCOMPA.....	84	GLOBAL INJECT EASE LANCET.....	143
FYLNETRA.....	93	GLOBAL INSULIN SYRINGE/U.....	143
<b>G</b>			
<b>gabapentin cap 100 mg, 300 mg, 400 mg.....</b>	<b>84</b>	GLOBAL INSULIN SYRINGES/U.....	143
<b>gabapentin oral soln 250 mg/5ml.....</b>	<b>84</b>	GLOBAL LANCING DEVICE.....	143
<b>gabapentin tab 600 mg, 800 mg.....</b>	<b>84</b>	GLUCAGON EMERGENCY KIT FO.....	30
GALAFOLD.....	37	GLUCOCARD 01 BLOOD GLUCOS.....	143
GALANTAMINE HYDROBROMIDE.....	72	GLUCOCARD EXPRESSION AUDI.....	143
<b>galantamine hydrobromide cap er 24hr 8 mg, 16 mg,</b>	<b>72</b>	GLUCOCARD EXPRESSION BLOO.....	115
<b>24 mg.....</b>	<b>72</b>	GLUCOCARD 01-MINI BLOOD G.....	144
<b>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg.....</b>	<b>72</b>	GLUCOCARD 01 SENSOR PLUS.....	116
GALZIN.....	92	GLUCOCARD SHINE.....	143
GAMMAGARD LIQUID.....	15	GLUCOCARD SHINE CONNEX BL.....	143
GAMMAKED.....	15	GLUCOCARD SHINE EXPRESS B.....	143
GAMUNEX-C.....	15	GLUCOCARD SHINE TEST STRI.....	115
GARDASIL 9.....	13	GLUCOCARD SHINE XL.....	143
<b>gatifloxacin ophth soln 0.5%.....</b>	<b>100</b>	GLUCOCARD VITAL BLOOD GLU.....	143
GATTEX.....	58	GLUCOCARD VITAL TEST STRI.....	116
GAVILYTE-C.....	55	GLUCOCARD X-METER.....	143
GAVRETO.....	19	GLUCOCARD X-SENSOR.....	116
GE100 BLOOD GLUCOSE MONIT.....	142	GLUCOCOM AUTOLINK TELEMON.....	144
GE100 BLOOD GLUCOSE TEST.....	115	GLUCOCOM BLOOD GLUCOSE MO.....	144
<b>gefitinib tab 250 mg.....</b>	<b>19</b>	GLUCOCOM LANCETS 28G.....	144
<b>gemfibrozil tab 600 mg.....</b>	<b>47</b>	GLUCOCOM LANCETS 30G.....	144
GENOTROPIN.....	37	GLUCOCOM LANCETS 33G.....	144
GENOTROPIN MINIQUICK.....	37	GLUCOCOM TEST STRIPS.....	116
<b>gentamicin sulfate cream 0.1%.....</b>	<b>108</b>	GLUCONAVII BLOOD GLUCOSE.....	116
<b>gentamicin sulfate oint 0.1%.....</b>	<b>108</b>	GLUCO PERFECT 3 BLOOD GLU.....	143
<b>gentamicin sulfate ophth soln 0.3%.....</b>	<b>100</b>	GLUCO PERFECT 3 TEST STRI.....	115
GENTEEL BUTTERFLY TOUCH L.....	142	GLUCOPRO INSULIN SYRINGE/.....	144
GENTEEL PLUS LANCING DEVI.....	142	GLUCOSE METER TEST STRIPS.....	116
GENTLE-LET LANCETS GENERA.....	142	<b>glutamine (sickle cell) powd pack 5 gm.....</b>	<b>93</b>
GENTLE-LET LANCETS SAFETY.....	142	<b>glyburide-metformin tab 1.25-250 mg, 2.5-500 mg,</b>	
GENULTIMATE TEST STRIPS.....	115	<b>5-500 mg.....</b>	<b>30</b>
GENVOYA.....	6	GLYBURIDE MICRONIZED.....	30
GEODON.....	66	<b>glyburide tab 1.25 mg, 2.5 mg, 5 mg.....</b>	<b>30</b>
GHT BLOOD GLUCOSE MONITO.....	142	<b>glycopyrrolate oral soln 1 mg/5ml.....</b>	<b>56</b>
GHT TEST STRIPS.....	115	<b>glycopyrrolate tab 1 mg.....</b>	<b>56</b>
GILOTRIF.....	19	<b>glycopyrrolate tab 2 mg.....</b>	<b>56</b>
<b>glatiramer acetate soln prefilled syringe 20 mg/ml.....</b>	<b>72</b>	GLYXAMBI.....	30
<b>glatiramer acetate soln prefilled syringe 40 mg/ml.....</b>	<b>72</b>	GNP CLICKFINE UNIVERSAL P.....	144
GLEOSTINE.....	19	GNP EASY TOUCH GLUCOSE MO.....	144
<b>glimepiride tab 1 mg, 2 mg, 4 mg.....</b>	<b>30</b>	GNP EASY TOUCH GLUCOSE TE.....	116
GLIPIZIDE.....	30	GNP INSULIN SYRINGE/0.3ML.....	144
<b>glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg,</b>	<b>30</b>	GNP INSULIN SYRINGE/0.5ML.....	144
<b>5-500 mg.....</b>	<b>30</b>	GNP INSULIN SYRINGE/1ML/2.....	144
<b>glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg.....</b>	<b>30</b>	GNP INSULIN SYRINGE/1ML/3.....	144
		GNP INSULIN SYRINGES/1/2M.....	144
		GNP INSULIN SYRINGES/0.3M.....	144

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GNP INSULIN SYRINGES/1ML/.....	144	HAEMOLANCE PLUS MAX FLOW.....	146
GNP INSULIN SYRINGES/3ML/.....	144	HAEMOLANCE PLUS PEDIATRIC.....	146
GNP LANCETS 21G.....	145	<b>halcinonide cream 0.1%.....</b>	<b>108</b>
GNP LANCETS THIN 26G.....	144	HALDOL DECANOATE 50.....	66
GNP LANCING SYSTEM DEVICE.....	145	HALDOL DECANOATE 100.....	66
GNP STERILE LANCETS 28G.....	145	<b>halobetasol propionate cream 0.05%.....</b>	<b>108</b>
GNP STERILE LANCETS 30G.....	145	HALOG.....	108
GNP STERILE LANCETS 33G.....	145	<b>haloperidol decanoate im soln 50 mg/ml.....</b>	<b>66</b>
GNP TRUE METRIX AIR SELF.....	145	<b>haloperidol decanoate im soln 100 mg/ml.....</b>	<b>66</b>
GNP TRUE METRIX SELF MONI.....	116	<b>haloperidol lactate oral conc 2 mg/ml.....</b>	<b>66</b>
GNP TRUETRACK BLOOD GLUCO.....	116	<b>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20</b>	<b>66</b>
GNP TRUETRACK SMART SYSTE.....	116	<b>mg.....</b>	<b>66</b>
GNP ULTICARE PEN NEEDLES.....	145	HARVONI.....	6
GNP ULTICARE PEN NEEDLES/.....	145	HAVRIX.....	13
GNP ULTIGUARD SAFEPACK/MI.....	145	HEALTH CARE LANCING DEVIC.....	146
GNP ULTIGUARD SAFEPACK/SH.....	145	HEALTHPRO BLOOD GLUCOSE M.....	146
GNP ULTRA COMFORT INSULIN.....	145	HEALTHWISE INSULIN SYRING.....	146
GOJJI BLOOD GLUCOSE TEST.....	116	HEALTHWISE MICRON PEN NEE.....	146
GOJJI LANCING DEVICE/CLEA.....	145	HEALTHWISE MINI PEN NEEDL.....	146
GOJJI STERILE LANCETS 30G.....	145	HEALTHWISE PEN NEEDLES 29.....	146
GOLYTELY.....	55	HEALTHWISE SHORT PEN NEED.....	146
GOODSENSE CLICKFINE SAFET.....	145	H-E-B INCONTROL ADVANCED.....	146
GOODSENSE COLOR LANCETS M.....	145	H-E-B INCONTROL LANCETS M.....	146
GOODSENSE LANCETS MICRO-T.....	145	H-E-B INCONTROL LANCETS S.....	146
GOODSENSE LANCETS ULTRA-T.....	145	H-E-B INCONTROL LANCETS U.....	146
GOODSENSE LANCING DEVICE.....	145	H-E-B IN CONTROL PEN NEED.....	145
GOODSENSE PEN NEEDLE/PENF.....	145	H-E-B INCONTROL PEN NEEDL.....	146
GOODSENSE PREMIUM BLOOD.....	145	H-E-B IN CONTROL UNIFINE.....	145
GOODSENSE PREMIUM BLOOD G.....	116	HELIDAC THERAPY.....	56
<b>granisetron hcl tab 1 mg.....</b>	<b>57</b>	HEMLIBRA.....	97
GRASTEK.....	16	HEMOFIL M.....	97
<b>griseofulvin microsize susp 125 mg/5ml.....</b>	<b>4</b>	HEPARIN SODIUM.....	95
<b>griseofulvin microsize tab 500 mg.....</b>	<b>4</b>	<b>heparin sodium (porcine) inj 5000 unit/ml, 10000 unit/</b>	<b>95</b>
<b>griseofulvin ultramicrosize tab 125 mg, 250 mg.....</b>	<b>4</b>	<b>ml.....</b>	<b>95</b>
<b>guanfacine hcl tab er 24hr 1 mg (base equiv), 2</b>		HEPLISAV-B.....	13
<b>mg (base equiv), 3 mg (base equiv), 4 mg (base</b>		HETLIOZ LQ.....	68
<b>equiv).....</b>	<b>70</b>	HIBERIX.....	13
<b>guanfacine hcl tab 1 mg, 2 mg.....</b>	<b>44</b>	HIPREX.....	11
GVOKE HYPOPEN 1-PACK.....	31	HIZENTRA.....	16
GVOKE HYPOPEN 2-PACK.....	31	HM ULTICARE INSULIN SYRIN.....	146
GVOKE KIT.....	31	HM ULTICARE MINI PEN NEED.....	146
GVOKE PFS.....	31	HM ULTICARE SHORT PEN NEE.....	146
GYNAZOLE-1.....	60	HUMALOG.....	32
<b>H</b>		HUMALOG JUNIOR KWIKPEN.....	32
HADLIMA.....	79	HUMALOG KWIKPEN.....	33
HADLIMA PUSH TOUCH.....	79	HUMALOG MIX 50/50.....	34
HAEGARDA.....	97	HUMALOG MIX 75/25.....	34
HAEMOLANCE.....	146	HUMALOG MIX 50/50 KWIKPEN.....	34
HAEMOLANCE LOW FLOW LANCE.....	146	HUMALOG MIX 75/25 KWIKPEN.....	34
HAEMOLANCE PLUS.....	146	HUMALOG TEMPO PEN.....	33
HAEMOLANCE PLUS HIGH FLOW.....	146	HUMATE-P.....	97
HAEMOLANCE PLUS LOW FLOW.....	146	HUMATIN.....	3
		HUMIRA.....	79

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HUMIRA PEN.....	79	<b>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....</b>	<b>62</b>
HUMIRA PEN-CD/UC/HS START.....	79	HYDROXYZINE PAMOATE.....	62
HUMIRA PEN-PS/UV STARTER.....	79	<b>hydroxyzine pamoate cap 25 mg, 50 mg.....</b>	<b>62</b>
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HYCODAN.....	50	HYPODERMIC NEEDLES 26GX1/.....	147
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<b>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....</b>	<b>46</b>	HYPODERMIC NEEDLES 21GX1".....	147
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<b>hydrocodone-acetaminophen soln 7.5-325</b>		HYPODERMIC NEEDLES 23GX1".....	147
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<b>hydrocodone-acetaminophen tab 5-325 mg.....</b>	<b>76</b>	HY-VEE LANCETS.....	147
<b>hydrocodone-acetaminophen tab 10-325 mg, 7.5-325</b>		HY-VEE THIN LANCETS.....	147
<b>mg.....</b>	<b>76</b>	<b>I</b>	
<b>hydrocodone bitart-homatropine methylbromide tab</b>		<b>ibandronate sodium tab 150 mg (base equivalent).....</b>	<b>37</b>
<b>5-1.5 mg.....</b>	<b>51</b>	IBRANCE.....	19
<b>hydrocodone bitart-homatropine methylbrom soln</b>		<b>ibuprofen tab 400 mg, 600 mg, 800 mg.....</b>	<b>79</b>
<b>5-1.5 mg/5ml.....</b>	<b>50</b>	<b>icatibant acetate subcutaneous soln pref syr 30</b>	
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HYDROCORTISONE ACETATE/PR.....	104	IGLUCOSE BLOOD GLUCOSE TE.....	116
HYDROCORTISONE BUTYRATE.....	108	IHEALTH BLOOD GLUCOSE TES.....	116
<b>hydrocortisone cream 2.5%.....</b>	<b>108</b>	IHEALTH GLUCO+.....	147
<b>hydrocortisone enema 100 mg/60ml.....</b>	<b>104</b>	IHEALTH LANCING DEVICE.....	147
<b>hydrocortisone oint 2.5%.....</b>	<b>108</b>	ILEVRO.....	101
<b>hydrocortisone perianal cream 1%.....</b>	<b>104</b>	<b>imatinib mesylate tab 100 mg (base equivalent).....</b>	<b>19</b>
<b>hydrocortisone perianal cream 2.5%.....</b>	<b>104</b>	<b>imatinib mesylate tab 400 mg (base equivalent).....</b>	<b>19</b>
<b>hydrocortisone tab 5 mg, 10 mg, 20 mg.....</b>	<b>25</b>	IMBRUVICA.....	19
<b>hydrocortisone valerate cream 0.2%.....</b>	<b>108</b>	IMCIVREE.....	70
<b>hydrocortisone valerate oint 0.2%.....</b>	<b>108</b>	<b>imipramine hcl tab 10 mg, 25 mg, 50 mg.....</b>	<b>64</b>
<b>hydrocortisone w/ acetic acid otic soln 1-2%.....</b>	<b>103</b>	<b>imiquimod cream 5%.....</b>	<b>108</b>
<b>hydromorphone hcl liqd 1 mg/ml.....</b>	<b>76</b>	IMPAVIDO.....	11
<b>hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32</b>		IMURAN.....	181
<b>mg.....</b>	<b>77</b>	IMVEXXY MAINTENANCE PACK.....	60
<b>hydromorphone hcl tab 2 mg, 4 mg, 8 mg.....</b>	<b>77</b>	IMVEXXY STARTER PACK.....	60
<b>hydroxychloroquine sulfate tab 200 mg.....</b>	<b>10</b>	INATAL GT.....	90
<b>hydroxychloroquine sulfate tab 100 mg, 300 mg, 400</b>		INBRIJA.....	88
<b>mg.....</b>	<b>10</b>	INCONTROL ULTICARE MINI P.....	148
<b>hydroxyurea cap 500 mg.....</b>	<b>19</b>	INCRELEX.....	37
<b>hydroxyzine hcl syrup 10 mg/5ml.....</b>	<b>62</b>		

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INCRUSE ELLIPTA.....	52	IN TOUCH STERILE LANCETS.....	148
<b>indapamide tab 1.25 mg, 2.5 mg.....</b>	<b>46</b>	INTRAROSA.....	60
<b>indomethacin cap er 75 mg.....</b>	<b>79</b>	INVEGA.....	66
<b>indomethacin cap 25 mg, 50 mg.....</b>	<b>79</b>	INVEGA HAFYERA.....	66
INFANRIX.....	15	INVEGA SUSTENNA.....	66
INFINITY BLOOD GLUCOSE MO.....	148	INVEGA TRINZA.....	66
INFINITY BLOOD GLUCOSE TE.....	116	IOPIDINE.....	101
INFINITY VOICE.....	116	IPOL INACTIVATED IPV.....	13
INGREZZA.....	72	<b>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....</b>	<b>52</b>
INLYTA.....	19	<b>ipratropium bromide inhal soln 0.02%.....</b>	<b>52</b>
INNOPRAN XL.....	40	<b>ipratropium bromide nasal soln 0.03% (21 mcg/spray),</b>	
INPEN 100/BLUE/HUMALOG.....	148	<b>0.06% (42 mcg/spray).....</b>	<b>50</b>
INPEN 100/BLUE/LILLY/HUMA.....	148	IQIRVO.....	58
INPEN 100/BLUE/NOVOLOG/FI.....	148	<b>irbesartan-hydrochlorothiazide tab 150-12.5 mg,</b>	
INPEN 100/GREY/HUMALOG.....	148	<b>300-12.5 mg.....</b>	<b>44</b>
INPEN 100/GREY/LILLY/HUMA.....	148	<b>irbesartan tab 75 mg, 150 mg, 300 mg.....</b>	<b>44</b>
INPEN 100/GREY/NOVOLOG/FI.....	148	IRESSA.....	19
INPEN 100/PINK/HUMALOG.....	148	<b>irrigation solution, physiological.....</b>	<b>181</b>
INPEN 100/PINK/LILLY/HUMA.....	148	ISENTRESS.....	6
INPEN 100/PINK/NOVOLOG/FI.....	148	ISENTRESS HD.....	6
INQOVI.....	19	<b>isoniazid syrup 50 mg/5ml.....</b>	<b>4</b>
INREBIC.....	19	<b>isoniazid tab 100 mg, 300 mg.....</b>	<b>4</b>
INSULIN DEGLUDEC.....	35	<b>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg.....</b>	<b>49</b>
INSULIN DEGLUDEC FLEXTOUC.....	35	<b>isosorbide dinitrate tab 5 mg, 40 mg.....</b>	<b>40</b>
INSULIN SYRINGE/0.3ML/30G.....	149	<b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg.....</b>	<b>40</b>
INSULIN SYRINGE/0.3ML/31G.....	149	<b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120</b>	
INSULIN SYRINGE/0.5ML/28G.....	149	<b>mg.....</b>	<b>40</b>
INSULIN SYRINGE/0.5ML/30G.....	149	<b>isosorbide mononitrate tab 10 mg, 20 mg.....</b>	<b>40</b>
INSULIN SYRINGE/0.5ML/31G.....	149	<b>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg.....</b>	<b>108</b>
INSULIN SYRINGE/1ML/29G X.....	149	<b>isradipine cap 2.5 mg, 5 mg.....</b>	<b>41</b>
INSULIN SYRINGE/1ML/30G X.....	149	ISTURISA.....	37
INSULIN SYRINGE/NEEDLE 0.....	148	ITOVEBI.....	19
INSULIN SYRINGE/NEEDLE 1M.....	148	<b>itraconazole cap 100 mg.....</b>	<b>4</b>
INSULIN SYRINGE/U-100/0.3.....	148	<b>itraconazole oral soln 10 mg/ml.....</b>	<b>4</b>
INSULIN SYRINGE/U-100/0.5.....	148	<b>ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base</b>	
INSULIN SYRINGE/U-100/1ML.....	149	<b>equiv).....</b>	<b>49</b>
INSULIN SYRINGE 1ML/31G X.....	148	<b>ivermectin cream 1%.....</b>	<b>108</b>
INSULIN SYRINGES/U-100/0.....	149	<b>ivermectin tab 3 mg.....</b>	<b>10</b>
INSULIN SYRINGES/U-100/1M.....	149	IWILFIN.....	19
INSULIN SYRINGES 0.3ML/31.....	149	IXINITY.....	97
INSULIN SYRINGES 0.5ML/31.....	149		
INSUL-TOTE.....	148	<b>J</b>	
INSUL-TOTE JR.....	148	JADENU.....	111
INSUPEN 33GX4MM.....	149	JADENU SPRINKLE.....	111
INSUPEN 29G X 12MM.....	149	JAKAFI.....	19
INSUPEN 31G X 5MM.....	149	JANUMET.....	31
INSUPEN 31G X 8MM.....	149	JANUMET XR.....	31
INSUPEN 32G X 4MM.....	149	JANUVIA.....	31
INTELENCE.....	6	JARDIANCE.....	31
IN TOUCH.....	147	JAYPIRCA.....	19
IN TOUCH BLOOD GLUCOSE TE.....	116	JENLIVA PRENATAL/POSTNATA.....	91
IN TOUCH DIABETES MANAGEM.....	147	JIVI.....	97
IN TOUCH LANCING DEVICE.....	147	JOENJA.....	181

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JULUCA.....	7	KORLYM.....	31
JUXTAPID.....	47	KOSELUGO.....	20
JYNARQUE.....	37	KOVALTRY.....	97
JYNNEOS.....	13	K-PHOS.....	92
<b>K</b>		K-PHOS NEUTRAL.....	92
KALBITOR.....	97	K-PHOS NO 2.....	61
KALETRA.....	7	KRAZATI.....	20
KALYDECO.....	54	KRINTAFEL.....	10
KAMELEON LUBRICATED.....	149	KROGER AUTOLET LANCING DE.....	150
KEPPRA.....	84	KROGER BLOOD GLUCOSE MONI.....	150
KEPPRA XR.....	84	KROGER BLOOD GLUCOSE TEST.....	116
KERENDIA.....	37	KROGER HEALTHPRO GLUCOSE.....	116
KESIMPTA.....	72	KROGER HEALTHPRO TWIST LA.....	150
KETOCARE.....	116	KROGER INSULIN SYRINGE/0.....	150
<b>ketoconazole cream 2%.....</b>	<b>108</b>	KROGER INSULIN SYRINGE/1M.....	150
<b>ketoconazole shampoo 2%.....</b>	<b>108</b>	KROGER INSULIN SYRINGE/U-.....	150
<b>ketoconazole tab 200 mg.....</b>	<b>4</b>	KROGER LANCETS.....	150
KETONE.....	116	KROGER LANCETS 21G.....	151
KETONE TEST STRIPS.....	116	KROGER LANCETS MICRO THIN.....	150
<b>ketorolac tromethamine ophth soln 0.4%.....</b>	<b>101</b>	KROGER LANCETS SUPER THIN.....	150
<b>ketorolac tromethamine ophth soln 0.5%.....</b>	<b>101</b>	KROGER LANCETS THIN.....	150
<b>ketorolac tromethamine tab 10 mg.....</b>	<b>79</b>	KROGER LANCETS THIN 26G.....	150
KETOSTIX.....	116	KROGER LANCETS ULTRATHIN.....	151
KEVEYIS.....	46	KROGER LANCING DEVICE.....	151
KEVZARA.....	79	KROGER PEN NEEDLES/31G X.....	151
KIMONO COLORS.....	149	KROGER PEN NEEDLES/32G X.....	151
KIMONO LUBRICATED.....	149	KROGER PEN NEEDLES/33G X.....	151
KIMONO MAXX/LARGE FLARE.....	149	KROGER PEN NEEDLES 29G X.....	151
KIMONO MICRO THIN.....	150	KROGER PEN NEEDLES 31G X.....	151
KIMONO MICRO THIN PLUS SP.....	150	KROGER PEN NEEDLES 31GX1/.....	151
KIMONO PLUS SPERMICIDE/LU.....	150	KROGER PREMIUM BLOOD GLUC.....	117
KIMONO PLUS SPERMICIDE LU.....	150	K-TAB.....	92
KIMONO PS LUBRICATED.....	150	KUVAN.....	37
KIMONO PS PLUS SPERMICIDE.....	150	<b>L</b>	
KIMONO SENSATION LUBRICAT.....	150	<b>labetalol hcl tab 100 mg, 200 mg, 300 mg.....</b>	<b>40</b>
KIMONO SENSATION PLUS SPE.....	150	<b>lacosamide oral solution 10 mg/ml.....</b>	<b>84</b>
KIMONO SPECIAL.....	150	<b>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg.....</b>	<b>84</b>
KINERET.....	80	<b>lactated ringer's for irrigation.....</b>	<b>181</b>
KINNEY LANCETS.....	150	<b>lactulose (encephalopathy) solution 10 gm/15ml.....</b>	<b>58</b>
KINNEY THIN LANCETS.....	150	<b>lactulose solution 10 gm/15ml.....</b>	<b>55</b>
KINRAY INSULIN SYRINGE/0.....	150	LAGEVRIO.....	7
KINRAY INSULIN SYRINGE PR.....	150	LAMICTAL.....	84
KINRIX.....	15	LAMICTAL CHEWABLE DISPERS.....	84
KISQALI.....	20	LAMICTAL ODT.....	84
KITABIS PAK.....	3	LAMICTAL STARTER/NOT TAKI.....	84
KLARON.....	108	LAMICTAL STARTER/TAKING C.....	84
KLISYRI.....	108	LAMICTAL STARTER/TAKING V.....	84
KLOXXADO.....	111	LAMICTAL XR.....	84
KMART VALU PLUS INSULIN S.....	150	<b>lamivudine oral soln 10 mg/ml.....</b>	<b>7</b>
KOATE.....	97	<b>lamivudine tab 150 mg.....</b>	<b>7</b>
KOATE-DVI.....	97	<b>lamivudine tab 300 mg.....</b>	<b>7</b>
KOGENATE FS.....	97	<b>lamivudine tab 100 mg (hbv).....</b>	<b>7</b>

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lamivudine-zidovudine tab 150-300 mg.....	7	LEDIPASVIR/SOFOSBUVIR.....	7
lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg.....	85	leflunomide tab 10 mg, 20 mg.....	80
lamotrigine tab chewable dispersible 5 mg, 25 mg.....	85	lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg.....	181
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit.....	85	lenalidomide caps 2.5 mg.....	181
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit.....	85	LENVIMA 4 MG DAILY DOSE.....	20
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit.....	85	LENVIMA 8 MG DAILY DOSE.....	20
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg.....	85	LENVIMA 10 MG DAILY DOSE.....	20
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg.....	85	LENVIMA 12MG DAILY DOSE.....	20
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit.....	85	LENVIMA 14 MG DAILY DOSE.....	20
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit.....	85	LENVIMA 18 MG DAILY DOSE.....	20
lamotrigine tab 35 x 25 mg starter kit.....	85	LENVIMA 20 MG DAILY DOSE.....	20
LAMPIT.....	11	LENVIMA 24 MG DAILY DOSE.....	20
LANCET DEVICE ADJUSTABLE.....	151	LETAIRIS.....	49
LANCET DEVICE WITH EJECTO.....	151	letrozole tab 2.5 mg.....	20
LANCETS.....	151	leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg.....	20
LANCETS 28G.....	151	LEUKERAN.....	20
LANCETS 30G.....	151	LEUKINE.....	93
LANCETS 30G/TWIST TOP.....	151	leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml).....	20
LANCETS 33G EXTRA FINE.....	151	levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv).....	52
LANCETS 30G TWIST TOP.....	151	levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv).....	53
LANCETS 33G UNIVERSAL DES.....	151	LEVEMIR.....	35
LANCETS MICRO THIN 33G.....	151	levetiracetam oral soln 100 mg/ml.....	85
LANCETS SUPER THIN 28G.....	151	levetiracetam tab er 24hr 500 mg, 750 mg.....	85
LANCETS THIN.....	151	levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg.....	85
LANCETS ULTRA THIN 30G.....	151	LEVOBUNOLOL HCL.....	101
LANCING DEVICE.....	151	levocarnitine oral soln 1 gm/10ml (10%).....	37
LANOXIN.....	40	levocarnitine tab 330 mg.....	37
lansoprazole cap delayed release 30 mg.....	56	levocetirizine dihydrochloride tab 5 mg.....	50
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental).....	58	LEVOFLOXACIN.....	101
LANTUS.....	35	levofloxacin oral soln 25 mg/ml.....	3
LANTUS SOLOSTAR.....	35	levofloxacin tab 250 mg, 500 mg, 750 mg.....	3
LANZO.....	151	levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg.....	28
lapatinib ditosylate tab 250 mg (base equiv).....	20	levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....	28
LASIX.....	46	levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg.....	28
latanoprost ophth soln 0.005%.....	101	levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	28
LAZCLUZE.....	20	levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	28
LEADER ADVANCED LANCING D.....	151	levonorgestrel tab 1.5 mg.....	28
LEADER INSULIN SYRINGE/0.....	151	levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7).....	28
LEADER INSULIN SYRINGE/1M.....	151	levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7).....	28
LEADER LANCETS COLORED.....	152	levorphanol tartrate tab 2 mg.....	77
LEADER SUPER THIN LANCET.....	152		
LEADER THIN LANCETS.....	152		
LEADER UNIFINE PENTIPS/MI.....	152		
LEADER UNIFINE PENTIPS/NA.....	152		
LEADER UNIFINE PENTIPS/PL.....	152		
LEADER UNIFINE PENTIPS PL.....	152		

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levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg.....	35	LIVTENCITY.....	7
LIBERTY BLOOD GLUCOSE MET.....	152	LODINE.....	80
LIBERTY MEDICAL LANCETS 3.....	152	LODOSYN.....	88
LIBERTY MINI LANCING DEVI.....	152	lofexidine hcl tab 0.18 mg (base equivalent).....	72
LIBERTY NEXT GENERATION B.....	117	LOKELMA.....	181
LIBERTY TEST STRIPS.....	117	LO LOESTRIN FE.....	29
LIDOCAINE HCL.....	103	LOMOTIL.....	55
lidocaine hcl soln 4%.....	108	LONGS INSULIN SYRINGE/0.5.....	153
lidocaine hcl urethral/mucosal gel prefilled syringe 2%.....	108	LONGS LANCETS STANDARD.....	153
lidocaine hcl viscous soln 2%.....	103	LONGS LANCETS THIN.....	153
lidocaine oint 5%.....	108	LONGS LANCETS ULTRA THIN.....	153
lidocaine patch 5%.....	108	LONSURF.....	20
lidocaine-prilocaine cream 2.5-2.5%.....	108	LOPID.....	47
LIFESCAN UNISTIK 2 DEEP P.....	152	lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml).....	7
linezolid for susp 100 mg/5ml.....	11	lopinavir-ritonavir tab 100-25 mg.....	7
linezolid tab 600 mg.....	11	lopinavir-ritonavir tab 200-50 mg.....	7
LINZESS.....	58	LOPRESSOR.....	40
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg.....	35	loratadine & pseudoephedrine tab er 12hr 5-120 mg.....	51
lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg.....	70	loratadine & pseudoephedrine tab er 24hr 10-240 mg.....	51
lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg.....	70	loratadine oral soln 5 mg/5ml.....	50
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg.....	44	loratadine rapidly-disintegrating tab 10 mg.....	50
lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg.....	44	loratadine tab 10 mg.....	50
LITETOUCH INSULIN PEN NEE.....	152	lorazepam conc 2 mg/ml.....	62
LITETOUCH INSULIN SYRINGE.....	152	lorazepam tab 0.5 mg, 1 mg, 2 mg.....	62
LITE TOUCH LANCETS.....	152	LORBRENA.....	20
LITETOUCH LANCETS MICRO T.....	152	losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg.....	44
LITE TOUCH LANCING PEN.....	152	losartan potassium tab 100 mg.....	44
LITETOUCH PEN NEEDLES/31.....	152	losartan potassium tab 25 mg, 50 mg.....	44
LITETOUCH PEN NEEDLES/31G.....	152	LOTEMAX.....	101
LITETOUCH PEN NEEDLES 29G.....	152	LOTEMAX SM.....	101
LITETOUCH PEN NEEDLES 31G.....	152	LOTENSIN.....	44
LITFULO.....	108	LOTENSIN HCT.....	44
LITHIUM CARBONATE.....	66	loteprednol etabonate ophth gel 0.5%.....	101
lithium carbonate cap 150 mg, 300 mg, 600 mg.....	66	loteprednol etabonate ophth susp 0.2%.....	101
lithium carbonate tab er 300 mg.....	66	loteprednol etabonate ophth susp 0.5%.....	101
lithium carbonate tab er 450 mg.....	66	lovastatin tab 10 mg, 20 mg, 40 mg.....	47
lithium carbonate tab 300 mg.....	66	loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg.....	66
lithium oral solution 8 meq/5ml.....	66	lubiprostone cap 8 mcg.....	58
LITHOBID.....	66	lubiprostone cap 24 mcg.....	58
LITHOSTAT.....	61	LUCEMYRA.....	73
LIVE BETTER ADVANCED LANC.....	152	LUMAKRAS.....	20
LIVE BETTER LANCET SUPER.....	152	LUMIGAN.....	101
LIVE BETTER LANCET ULTRA.....	152	LUMRYZ.....	73
LIVE BETTER PEN NEEDLES 2.....	152	LUMRYZ STARTER PACK.....	73
LIVE BETTER PEN NEEDLES 3.....	153	LUPKYNIS.....	181
LIVMARLI.....	58	lurasidone hcl tab 80 mg.....	67
		lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg.....	67
		LYBALVI.....	73
		LYNPARZA.....	20

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LYRICA.....	85	<b>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg.....</b>	<b>30</b>
LYSODREN.....	20	<b>mefloquine hcl tab 250 mg.....</b>	<b>10</b>
LYTGOBI.....	20	<b>megestrol acetate susp 40 mg/ml.....</b>	<b>21</b>
LYUMJEV.....	33	<b>megestrol acetate tab 20 mg, 40 mg.....</b>	<b>21</b>
LYUMJEV KWIKPEN.....	33	MEIJER BLOOD GLUCOSE MONI.....	154
LYUMJEV TEMPO PEN.....	33	MEIJER BLOOD GLUCOSE TEST.....	117
<b>M</b>		MEIJER COLOR LANCETS UNIV.....	154
MACROBID.....	11	MEIJER ESSENTIAL BLOOD GL.....	117
MACRODANTIN.....	11	MEIJER LANCETS.....	154
MAFENIDE ACETATE.....	108	MEIJER LANCETS THIN.....	154
MAGELLAN INSULIN SAFETY S.....	153	MEIJER LANCETS UNIVERSAL.....	154
MAGELLAN TUBERCULIN SAFET.....	153	MEIJER PEN NEEDLES 29G X.....	154
<b>malathion lotion 0.5%.....</b>	<b>108</b>	MEIJER PEN NEEDLES 31G X.....	154
MARATHON MEDICAL PENTIPS.....	153	MEIJER PREMIUM BLOOD GLUC.....	154
<b>maraviroc tab 150 mg.....</b>	<b>7</b>	MEIJER SUPER THIN LANCETS.....	154
<b>maraviroc tab 300 mg.....</b>	<b>7</b>	MEIJER TRUE2GO BLOOD GLUC.....	154
MARPLAN.....	64	MEIJER TRUERESULT BLOOD G.....	154
MATULANE.....	21	MEIJER TRUETEST BLOOD GLU.....	117
MAVENCLAD.....	73	MEIJER TRUETRACK BLOOD GL.....	117
MAVYRET.....	7	MEKINIST.....	21
MAXICOMFORT II PEN NEEDLE.....	153	MEKTOVI.....	21
MAXI-COMFORT INSULIN SYRI.....	153	MELOXICAM.....	80
MAXICOMFORT INSULIN SYRIN.....	153	<b>meloxicam tab 7.5 mg, 15 mg.....</b>	<b>80</b>
MAXI-COMFORT SAFETY PEN N.....	153	<b>memantine hcl oral solution 2 mg/ml.....</b>	<b>73</b>
MAXIDEX.....	101	<b>memantine hcl tab 5 mg, 10 mg.....</b>	<b>73</b>
MAXITROL.....	101	<b>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack.....</b>	<b>73</b>
MAXX LUBRICATED.....	153	MENEST.....	27
MAXX PLUS SPERMICIDE LUBR.....	153	MENOSTAR.....	27
MAYZENT.....	73	MENQUADFI.....	13
MAYZENT STARTER PACK.....	73	MENVEO.....	13
<b>meclizine hcl tab 12.5 mg, 25 mg.....</b>	<b>57</b>	MEPERIDINE HCL.....	77
MECLOFENAMATE SODIUM.....	80	<b>meprobamate tab 200 mg, 400 mg.....</b>	<b>62</b>
MEDICHOICE PRE-SET SAFETY.....	153	MEPRON.....	11
MEDICHOICE SAFETY LANCET.....	153	<b>mercaptopurine tab 50 mg.....</b>	<b>21</b>
MEDICINE SHOPPE LANCETS.....	153	<b>mesalamine cap dr 400 mg.....</b>	<b>58</b>
MEDICINE SHOPPE LANCETS T.....	153	<b>mesalamine cap er 24hr 0.375 gm.....</b>	<b>58</b>
MEDICINE SHOPPE PEN NEEDL.....	153	<b>mesalamine enema 4 gm.....</b>	<b>58</b>
MEDIC INSULIN SYRINGE/0.3.....	153	<b>mesalamine suppos 1000 mg.....</b>	<b>58</b>
MEDIC INSULIN SYRINGE/0.5.....	153	<b>mesalamine tab delayed release 1.2 gm.....</b>	<b>58</b>
MEDLANCE PLUS/LITE 25G.....	154	<b>mesalamine tab delayed release 800 mg.....</b>	<b>58</b>
MEDLANCE PLUS EXTRA LANCE.....	153	MESNEX.....	21
MEDLANCE PLUS LANCETS LIT.....	154	METADATE CD.....	70
MEDLANCE PLUS LITE LANCET.....	154	<b>metaxalone tab 400 mg, 800 mg.....</b>	<b>89</b>
MEDLANCE PLUS SPECIAL LAN.....	154	<b>metformin hcl tab er 24hr 500 mg, 750 mg.....</b>	<b>31</b>
MEDLANCE PLUS SUPERLITE 3.....	154	<b>metformin hcl tab 500 mg, 850 mg, 1000 mg.....</b>	<b>31</b>
MEDLANCE PLUS UNIVERSAL L.....	154	METHADONE HCL.....	77
MEDROL.....	25	<b>methadone hcl conc 10 mg/ml.....</b>	<b>77</b>
MEDROL DOSEPAK.....	25	<b>methadone hcl soln 5 mg/5ml.....</b>	<b>77</b>
<b>medroxyprogesterone acetate im susp 150 mg/ml.....</b>	<b>29</b>	<b>methadone hcl soln 10 mg/5ml.....</b>	<b>77</b>
<b>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml.....</b>	<b>29</b>	<b>methadone hcl tab for oral susp 40 mg.....</b>	<b>77</b>
		<b>methadone hcl tab 5 mg, 10 mg.....</b>	<b>77</b>

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METHADOSE.....	77	metronidazole gel 0.75%.....	109
METHADOSE SUGAR-FREE.....	77	metronidazole gel 1%.....	109
methamphetamine hcl tab 5 mg.....	70	metronidazole lotion 0.75%.....	109
methazolamide tab 25 mg, 50 mg.....	46	metronidazole tab 250 mg, 500 mg.....	11
methenamine hippurate tab 1 gm.....	11	metronidazole vaginal gel 0.75%.....	61
methimazole tab 5 mg, 10 mg.....	35	mexiletine hcl cap 150 mg, 200 mg, 250 mg.....	42
METHITEST.....	26	MIACALCIN.....	37
methocarbamol tab 500 mg, 750 mg.....	89	MICONAZOLE 3.....	61
METHOTREXATE SODIUM.....	21	MICRODOT BLOOD GLUCOSE MO.....	154
methotrexate sodium for inj 1 gm.....	21	MICRODOT PEN NEEDLE/31G X.....	154
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml).....	21	MICRODOT PEN NEEDLE/32G X.....	154
methotrexate sodium tab 2.5 mg (base equiv).....	21	MICRODOT PEN NEEDLE/33G X.....	154
METHOXSALEN.....	108	MICRODOT TEST STRIPS.....	117
methscopolamine bromide tab 2.5 mg, 5 mg.....	56	MICRODOT XTRA TEST STRIPS.....	117
methsuximide cap 300 mg.....	85	MICROLET LANCETS.....	154
METHYLDOPA.....	44	MICROLET NEXT.....	154
methylergonovine maleate tab 0.2 mg.....	36	midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	46
METHYLIN.....	70	MIEBO.....	101
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la).....	70	MIFEPREX.....	37
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd).....	70	mifepristone tab 200 mg.....	37
methylphenidate hcl chew tab 10 mg.....	70	mifepristone tab 300 mg.....	31
methylphenidate hcl chew tab 2.5 mg, 5 mg.....	70	MIGERGOT.....	82
methylphenidate hcl soln 5 mg/5ml.....	70	MIGLITOL.....	31
methylphenidate hcl soln 10 mg/5ml.....	70	miglustat cap 100 mg.....	93
methylphenidate hcl tab er 10 mg, 20 mg.....	71	MINI LANCING DEVICE.....	154
methylphenidate hcl tab er osmotic release (osm) 36 mg.....	71	minocycline hcl cap 50 mg, 75 mg, 100 mg.....	3
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg.....	70	minoxidil tab 2.5 mg, 10 mg.....	44
methylphenidate hcl tab 5 mg, 10 mg, 20 mg.....	71	MIRCERA.....	93
METHYLPHENIDATE HYDROCHLO.....	71	mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg.....	64
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg.....	25	mirtazapine tab 7.5 mg, 45 mg.....	64
methylprednisolone tab therapy pack 4 mg (21).....	25	mirtazapine tab 15 mg, 30 mg.....	64
methyltestosterone cap 10 mg.....	26	misoprostol tab 100 mcg, 200 mcg.....	56
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv).....	58	10ML SYRINGE LUER-LOK TIP.....	180
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent).....	58	1ML VANISHPOINT TUBERCULI.....	180
metolazone tab 2.5 mg, 5 mg, 10 mg.....	46	MM BLOOD GLUCOSE MONITORI.....	154
METOPIRONE.....	117	MM BLULINK GLUCOSE MONITO.....	155
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg.....	44	MM BLULINK GLUCOSE TEST S.....	117
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv).....	40	MM EASY TOUCH BLOOD GLUCO.....	155
metoprolol tartrate tab 50 mg, 100 mg.....	40	MM EASY TOUCH GLUCOSE TES.....	117
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg.....	40	MM INSULIN SYRINGE/U-100/.....	155
METROGEL.....	108	MM LANCING DEVICE.....	155
METROLOTION.....	109	MM PEN NEEDLES 31G X 3/16.....	155
metronidazole cream 0.75%.....	109	MM PEN NEEDLES 31G X 5/16.....	155
		MM PEN NEEDLES 32G X 5/32.....	155
		MM PEN NEEDLES 31G X 1/4".....	155
		M-M-R II.....	13
		MM TWIST LANCETS.....	155
		M-NATAL PLUS.....	91
		modafinil tab 100 mg, 200 mg.....	71
		MODERNA COVID-19 VACCINE.....	14
		moexipril hcl tab 7.5 mg, 15 mg.....	44
		MOLINDONE HYDROCHLORIDE.....	67

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mometasone furoate cream 0.1%.....	109	mycophenolate mofetil cap 250 mg.....	181
mometasone furoate oint 0.1%.....	109	mycophenolate mofetil for oral susp 200 mg/ml.....	181
mometasone furoate solution 0.1% (lotion).....	109	mycophenolate mofetil tab 500 mg.....	181
MONOJECT BLUNT CANNULA/20.....	155	mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv).....	181
MONOJECT BLUNT CANNULA/21.....	155	MYDRIACYL.....	101
MONOJECT HYPO/ALUM HUB/16.....	155	MYFEMBREE.....	27
MONOJECT HYPO/ALUM HUB/18.....	155	MYFORTIC.....	181
MONOJECT HYPO/ALUM HUB/LU.....	155	MYGLUCOHEALTH BLOOD GLUCO.....	117
MONOJECT HYPO/POLYPROPYLE.....	155	MYGLUCOHEALTH MGH SOFTLAN.....	157
MONOJECT HYPODERMIC NEEDL.....	155	MYHIBBIN.....	181
MONOJECT INSULIN SYRINGE.....	155	MYLERAN.....	21
MONOJECT INSULIN SYRINGE/.....	155	MYRBETRIQ.....	60
MONOJECT MAGELLAN SAFETY.....	156	MYTESI.....	55
MONOJECT MEDICATION TRANS.....	156		
MONOJECT 1ML LUER LOCK TU.....	156	<b>N</b>	
MONOJECT STANDARD HYPODER.....	156	nabumetone tab 500 mg, 750 mg.....	80
MONOJECT SYRINGE PHARMACY.....	156	nadolol tab 20 mg, 40 mg, 80 mg.....	40
MONOJECT TB SYRINGE-NDL 1.....	156	naloxone hcl inj 0.4 mg/ml.....	111
MONOJECT TUBERCULIN SAFET.....	156	naloxone hcl inj 4 mg/10ml.....	111
MONOJECT TUBERCULIN SYRIN.....	156	naloxone hcl nasal spray 4 mg/0.1ml.....	111
MONOJECT ULTRA COMFORT IN.....	156	naloxone hcl soln prefilled syringe 2 mg/2ml.....	111
MONOLET LANCETS.....	156	NALOXONE HYDROCHLORIDE.....	111
MONOLET OPD LANCETS.....	156	naltrexone hcl tab 50 mg.....	111
MONOLETTOR SAFETY LANCETS.....	156	NAPROSYN.....	80
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv).....	53	naproxen sodium tab 275 mg.....	80
montelukast sodium tab 10 mg (base equiv).....	53	naproxen sodium tab 550 mg.....	80
MORPHINE SULFATE.....	77	naproxen tab 500 mg.....	80
MORPHINE SULFATE ER.....	77	naproxen tab 250 mg, 375 mg.....	80
morphine sulfate oral soln 10 mg/5ml.....	77	naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv).....	82
morphine sulfate oral soln 100 mg/5ml (20 mg/ml).....	77	NARCAN.....	111
morphine sulfate tab er 100 mg, 200 mg.....	77	NARDIL.....	64
morphine sulfate tab er 15 mg, 30 mg, 60 mg.....	77	NATACYN.....	101
morphine sulfate tab 15 mg.....	77	NATALVIT.....	91
morphine sulfate tab 30 mg.....	77	NATAZIA.....	29
MOTPOLY XR.....	85	nateglinide tab 60 mg, 120 mg.....	31
MOUNJARO.....	31	NATROBA.....	109
MOVANTIK.....	59	NAYZILAM.....	85
MOVIPREP.....	55	nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent).....	41
moxifloxacin hcl ophth soln 0.5% (base equiv).....	101	NEBUPENT.....	11
moxifloxacin hcl tab 400 mg (base equiv).....	3	NEFAZODONE HYDROCHLORIDE.....	64
MRESVIA.....	14	NEOMYCIN/POLYMYXIN/GRAMIC.....	101
MS INSULIN SYRINGE/0.3ML/.....	157	neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin.....	101
MS INSULIN SYRINGE/0.5ML/.....	157	neomycin-polymyxin-dexamethasone ophth oint 0.1%.....	101
MS INSULIN SYRINGE/1ML/29.....	157	neomycin-polymyxin-dexamethasone ophth susp 0.1%.....	101
MS INSULIN SYRINGE/1ML/30.....	157	neomycin-polymyxin-hc otic soln 1%.....	103
MS INSULIN SYRINGE/1ML/31.....	157		
MULPLETA.....	93		
MULTAQ.....	42		
MULTI-LANCET DEVICE.....	157		
mupirocin oint 2%.....	109		
MYALEPT.....	37		
MYCAPSSA.....	37		

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neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....	103	nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray).....	40
neomycin sulfate tab 500 mg.....	3	NITROLINGUAL.....	40
NEONATAL COMPLETE.....	91	NITROSTAT.....	40
NEONATAL PLUS.....	91	NITRO-TIME.....	40
NEORAL.....	181	NITYR.....	37
NEO-SYNALAR.....	109	NIVA-PLUS.....	91
NERLYNX.....	21	NIVA THYROID.....	35
NESTABS.....	91	NIVESTYM.....	94
NEULASTA.....	94	NIZATIDINE.....	56
NEUPRO.....	88	NORDITROPIN FLEXPRO.....	38
NEURONTIN.....	85	<b>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr.....</b>	<b>29</b>
NEUTEK 2TEK TEST STRIPS.....	117	<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg.....</b>	<b>29</b>
NEVIRAPINE.....	7	<b>norethindrone &amp; ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg.....</b>	<b>29</b>
<b>nevirapine tab er 24hr 400 mg.....</b>	<b>7</b>	<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg.....</b>	<b>29</b>
<b>nevirapine tab 200 mg.....</b>	<b>7</b>	<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg.....</b>	<b>29</b>
NEXAVAR.....	21	<b>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24).....</b>	<b>29</b>
NEXIUM.....	56	<b>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg.....</b>	<b>27</b>
NEXLETOL.....	47	<b>norethindrone acetate tab 5 mg.....</b>	<b>30</b>
NEXLIZET.....	47	<b>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg.....</b>	<b>29</b>
<b>niacin tab er 1000 mg (antihyperlipidemic).....</b>	<b>47</b>	<b>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg.....</b>	<b>29</b>
<b>niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic).....</b>	<b>47</b>	<b>norethindrone tab 0.35 mg.....</b>	<b>29</b>
nicardipine hcl cap 20 mg, 30 mg.....	41	<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg.....</b>	<b>29</b>
nicotine polacrilex gum 2 mg, 4 mg.....	73	<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg.....</b>	<b>29</b>
nicotine polacrilex lozenge 2 mg, 4 mg.....	73	<b>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg.....</b>	<b>29</b>
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr.....	73	NORPACE.....	42
NICOTROL INHALER.....	73	NORPACE CR.....	42
NICOTROL NS.....	73	NORPRAMIN.....	64
nifedipine cap 10 mg, 20 mg.....	41	<b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg.....</b>	<b>64</b>
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg.....	41	<b>nortriptyline hcl soln 10 mg/5ml.....</b>	<b>64</b>
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg.....	41	NORVIR.....	7
NILANDRON.....	21	NOURIANZ.....	88
nilutamide tab 150 mg.....	21	NOVA MAX BLOOD GLUCOSE MO.....	157
nimodipine cap 30 mg.....	41	NOVA MAX GLUCOSE TEST STR.....	117
NINLARO.....	21	NOVA SAFETY LANCETS 23G.....	157
NISOLDIPINE ER.....	42	NOVA SAFETY LANCETS 28G.....	157
nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg.....	42	NOVA SUREFLEX LANCETS.....	157
NITAZOXANIDE.....	11	NOVA SUREFLEX LANCING DEV.....	157
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg.....	37	NOVAVAX COVID-19 VACCINE/.....	14
NITRO-BID.....	40	NOVOEIGHT.....	97
NITRO-DUR.....	40	NOVOFINE PEN NEEDLE 32G X.....	157
<b>nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg.....</b>	<b>11</b>	NOVOFINE PLUS PEN NEEDLE.....	157
<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg.....</b>	<b>11</b>	NOVOLIN 70/30.....	34
<b>nitrofurantoin susp 25 mg/5ml.....</b>	<b>11</b>		
<b>nitroglycerin oint 0.4%.....</b>	<b>104</b>		
<b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg.....</b>	<b>40</b>		
<b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr.....</b>	<b>40</b>		

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NOVOLIN 70/30 FLEXPEN.....	34	OCTREOTIDE ACETATE.....	38
NOVOLIN 70/30 FLEXPEN REL.....	34	<b>octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml).....</b>	<b>38</b>
NOVOLIN 70/30 RELION.....	34	<b>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml).....</b>	<b>38</b>
NOVOLIN N.....	34	OCUFLOX.....	101
NOVOLIN N FLEXPEN.....	34	ODACTRA.....	16
NOVOLIN N FLEXPEN RELION.....	34	ODEFSEY.....	7
NOVOLIN N RELION.....	34	ODOMZO.....	21
NOVOLIN R.....	33	OFEV.....	54
NOVOLIN R FLEXPEN.....	33	OFLOXACIN.....	3
NOVOLIN R FLEXPEN RELION.....	33	<b>ofloxacin ophth soln 0.3%.....</b>	<b>101</b>
NOVOLIN R RELION.....	34	<b>ofloxacin otic soln 0.3%.....</b>	<b>103</b>
NOVOLOG.....	33	<b>ofloxacin tab 400 mg.....</b>	<b>3</b>
NOVOLOG FLEXPEN.....	33	OGSIVEO.....	21
NOVOLOG FLEXPEN RELION.....	33	OJEMDA.....	21
NOVOLOG MIX 70/30.....	34	OJJAARA.....	21
NOVOLOG MIX 70/30 PREFILL.....	34	<b>olanzapine for im inj 10 mg.....</b>	<b>67</b>
NOVOLOG MIX 70/30 RELION.....	34	<b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg.....</b>	<b>67</b>
NOVOLOG PENFILL.....	33	<b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg.....</b>	<b>67</b>
NOVOLOG RELION.....	33	<b>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg.....</b>	<b>44</b>
NOVOPEN ECHO.....	157	<b>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg.....</b>	<b>44</b>
NOVOSEVEN RT.....	97	<b>olmesartan medoxomil tab 5 mg.....</b>	<b>44</b>
NOXAFIL.....	4	<b>olmesartan medoxomil tab 20 mg, 40 mg.....</b>	<b>44</b>
NP THYROID 15.....	35	<b>olopatadine hcl nasal soln 0.6%.....</b>	<b>50</b>
NP THYROID 30.....	35	OLUMIANT.....	80
NP THYROID 60.....	35	<b>omega-3-acid ethyl esters cap 1 gm.....</b>	<b>48</b>
NP THYROID 90.....	35	<b>omeprazole cap delayed release 20 mg.....</b>	<b>56</b>
NP THYROID 120.....	35	<b>omeprazole cap delayed release 10 mg, 40 mg.....</b>	<b>56</b>
NUBEQA.....	21	OMNIFLEX DIAPHRAGM.....	157
NUCALA.....	53	OMNIPOD CLASSIC PODS (GEN.....	157
NUCYNTA ER.....	77	OMNIPOD DASH INTRO KIT (G.....	157
NUDEXTA.....	73	OMNIPOD DASH PODS (GEN 4).....	157
NULIBRY.....	38	OMNIPOD 5 DEXCOM G7G6 INT.....	158
NUPLAZID.....	67	OMNIPOD 5 DEXCOM G7G6 POD.....	158
NURTEC.....	82	OMNIPOD GO 10 UNITS/DAY.....	157
NUVARING.....	29	OMNIPOD GO 15 UNITS/DAY.....	157
NUWIQ.....	97	OMNIPOD GO 20 UNITS/DAY.....	157
NUZYRA.....	3	OMNIPOD GO 25 UNITS/DAY.....	158
NYMALIZE.....	42	OMNIPOD GO 30 UNITS/DAY.....	158
NYSTATIN.....	103	OMNIPOD GO 35 UNITS/DAY.....	158
<b>nystatin cream 100000 unit/gm.....</b>	<b>109</b>	OMNIPOD GO 40 UNITS/DAY.....	158
<b>nystatin oint 100000 unit/gm.....</b>	<b>109</b>	OMNIPOD 5 LIBRE2 PLUS G6.....	158
<b>nystatin susp 100000 unit/ml.....</b>	<b>103</b>	OMNITROPE.....	38
<b>nystatin tab 500000 unit.....</b>	<b>4</b>	OMVOH.....	59
<b>nystatin topical powder 100000 unit/gm.....</b>	<b>109</b>	ON CALL EXPRESS BLOOD GLU.....	117
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%.....</b>	<b>109</b>	ONDANSETRON HCL.....	57
<b>nystatin-triamcinolone oint 100000-0.1 unit/gm-%.....</b>	<b>109</b>	<b>ondansetron hcl oral soln 4 mg/5ml.....</b>	<b>57</b>
NYVEPRIA.....	94		
<b>O</b>			
OBIZUR.....	98		
OBSTETRIX EC.....	91		
OALIVA.....	59		

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ondansetron hcl tab 4 mg, 8 mg.....	57	OVIDE.....	109
ondansetron orally disintegrating tab 4 mg, 8 mg.....	57	OVIDREL.....	38
ONE DROP BLOOD GLUCOSE MO.....	158	oxaprozin tab 600 mg.....	80
ONE DROP BLOOD GLUCOSE TE.....	117	oxazepam cap 10 mg, 15 mg, 30 mg.....	63
ONETOUCH DELICA LANCETS E.....	158	oxcarbazepine susp 300 mg/5ml (60 mg/ml).....	85
ONETOUCH DELICA LANCETS F.....	158	oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg.....	86
ONETOUCH DELICA LANCING D.....	158	oxcarbazepine tab 150 mg, 300 mg, 600 mg.....	86
ONETOUCH DELICA PLUS LANC.....	158	OXERVATE.....	101
ONETOUCH DELICA SAFETY LA.....	158	oxiconazole nitrate cream 1%.....	109
ONETOUCH LANCETS.....	158	OXTELLAR XR.....	86
ONETOUCH ULTRA.....	117	oxybutynin chloride solution 5 mg/5ml.....	60
ONETOUCH ULTRA 2.....	158	oxybutynin chloride tab er 24hr 5 mg.....	60
ONETOUCH ULTRA BLUE TEST.....	117	oxybutynin chloride tab er 24hr 10 mg.....	60
ONETOUCH ULTRASOFT 2 LANC.....	158	oxybutynin chloride tab er 24hr 15 mg.....	60
ONETOUCH ULTRA TEST STRIP.....	117	oxybutynin chloride tab 5 mg.....	60
ONETOUCH VERIO.....	158	OXYCODONE/ACETAMINOPHEN.....	78
ONETOUCH VERIO FLEX BLOOD.....	158	oxycodone hcl cap 5 mg.....	77
ONETOUCH VERIO IQ BLOOD G.....	158	oxycodone hcl conc 100 mg/5ml (20 mg/ml).....	77
ONETOUCH VERIO REFLECT.....	158	oxycodone hcl soln 5 mg/5ml.....	77
ONETOUCH VERIO TEST STRIP.....	117	oxycodone hcl tab 5 mg.....	77
ONE VITE WOMENS PRENATAL.....	91	oxycodone hcl tab 10 mg.....	77
ONFI.....	85	oxycodone hcl tab 20 mg.....	78
ONUREG.....	22	oxycodone hcl tab 15 mg, 30 mg.....	77
OPFOLDA.....	38	OXYCODONE HYDROCHLORIDE/A.....	78
OPILL.....	29	oxycodone w/ acetaminophen tab 7.5-325 mg.....	78
OPSUMIT.....	49	oxycodone w/ acetaminophen tab 10-325 mg.....	78
OPTIONS GYNOL II VAGINAL.....	61	oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg.....	78
OPTIUMEZ TEST STRIPS.....	117	OZEMPIC.....	31
OPVEE.....	111		
OPZELURA.....	109	<b>P</b>	
ORAVIG.....	103	PALFORZIA INITIAL DOSE ES.....	16
ORENCIA.....	80	PALFORZIA LEVEL 1.....	16
ORENCIA CLICKJECT.....	80	PALFORZIA LEVEL 2.....	16
ORENITRAM.....	49	PALFORZIA LEVEL 3.....	16
ORENITRAM TITRATION KIT M.....	49	PALFORZIA LEVEL 4.....	16
ORFADIN.....	38	PALFORZIA LEVEL 5.....	16
ORGOVYX.....	22	PALFORZIA LEVEL 6.....	16
ORIAHNN.....	28	PALFORZIA LEVEL 7.....	16
ORLISSA.....	38	PALFORZIA LEVEL 8.....	17
ORKAMBI.....	54	PALFORZIA LEVEL 9.....	17
ORLADEYO.....	98	PALFORZIA LEVEL 10.....	16
orphenadrine citrate tab er 12hr 100 mg.....	89	PALFORZIA LEVEL 11 (MAINT.....	16
orphenadrine w/ aspirin & caffeine tab 25-385-30 mg.....	89	PALFORZIA LEVEL 11 (TITRA.....	16
ORSERDU.....	22	paliperidone tab er 24hr 6 mg.....	67
oseltamivir phosphate cap 30 mg (base equiv).....	7	paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg.....	67
oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv).....	7	PALYNZIQ.....	38
oseltamivir phosphate for susp 6 mg/ml (base equiv).....	7	PAMELOR.....	64
OSPHENA.....	38	PANRETIN.....	109
OTEZLA.....	80	pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv).....	56
OTREXUP.....	80	pantoprazole sodium for delayed release susp packet 40 mg.....	56

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paricalcitol cap 4 mcg.....	38	pentamidine isethionate for nebulization soln 300 mg.....	11
paricalcitol cap 1 mcg, 2 mcg.....	38	pentazocine w/ naloxone hcl tab 50-0.5 mg.....	78
PARLODEL.....	88	PENTIPS GENERIC PEN NEEDL.....	160
PARNATE.....	64	PENTIPS 31GX5MM.....	160
paroxetine hcl oral susp 10 mg/5ml (base equiv).....	64	PENTIPS 31GX6MM.....	160
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg.....	64	PENTIPS 31GX8MM.....	160
paroxetine mesylate cap 7.5 mg (base equiv).....	73	PENTIPS 32GX4MM.....	160
PAXLOVID.....	7	PENTIPS 29GX12MM.....	160
pazopanib hcl tab 200 mg (base equiv).....	22	PENTIPS 29G X 12MM.....	160
PC UNIFINE PENTIPS 29G X.....	158	PENTIPS 31G X 5MM.....	160
PC UNIFINE PENTIPS 31G X.....	158	PENTIPS 31G X 8MM.....	160
PEDIAPRED.....	26	PENTIPS 32G X 4MM.....	160
PEDIARIX.....	15	<b>pentoxifylline tab er 400 mg.....</b>	<b>98</b>
PEDVAX HIB.....	14	PERFECT LANCETS 30G.....	160
PEGASYS.....	8	PERFECT POINT SAFETY LANC.....	160
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....</b>	<b>55</b>	PERFECT POINT SAFETY NEED.....	160
<b>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm.....</b>	<b>55</b>	PERFECT PRESSURE ACTIVATE.....	160
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....</b>	<b>55</b>	PERIDEX.....	103
PEG-PREP.....	55	PERINDOPRIL ERBUMINE.....	44
PEMAZYRE.....	22	<b>perindopril erbumine tab 4 mg.....</b>	<b>44</b>
PENBRAYA.....	14	<b>permethrin cream 5%.....</b>	<b>109</b>
<b>penciclovir cream 1%.....</b>	<b>109</b>	PERPHENAZINE/AMITRIPTYLIN.....	74
<b>penicillamine tab 250 mg.....</b>	<b>181</b>	<b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg.....</b>	<b>67</b>
PENICILLIN V POTASSIUM.....	1	PERSERIS.....	67
<b>penicillin v potassium tab 250 mg, 500 mg.....</b>	<b>1</b>	PFIZER-BIONTECH COVID-19.....	14
PEN NEEDLE/5-BEVEL TIP/32.....	159	PHARMACIST CHOICE AUTOCOD.....	117
PEN NEEDLES.....	159	PHARMACIST CHOICE MINI BL.....	160
PEN NEEDLES/29G X 1/2".....	159	PHARMACIST CHOICE NO CODI.....	117
PEN NEEDLES/31G X 1/4".....	159	PHARMACIST CHOICE SELECT.....	160
PEN NEEDLES/31G X 3/16".....	159	PHARMACIST CHOICE ULTRA T.....	160
PEN NEEDLES/31G X 5/16".....	160	PHARMACY COUNTER LANCETS.....	160
PEN NEEDLES/32G X 5/32".....	160	PHEBURANE.....	38
PEN NEEDLES/31G X 6MM.....	160	PHENELZINE SULFATE.....	64
PEN NEEDLES 31GX5/16".....	159	<b>phenobarbital elixir 20 mg/5ml.....</b>	<b>68</b>
PEN NEEDLES 31G X 3/16".....	159	<b>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg.....</b>	<b>68</b>
PEN NEEDLES 33G X 5/32".....	159	<b>phenoxybenzamine hcl cap 10 mg.....</b>	<b>44</b>
PEN NEEDLES 30GX5MM.....	159	<b>phenylephrine hcl ophth soln 2.5%, 10%.....</b>	<b>101</b>
PEN NEEDLES 30GX8MM.....	159	<b>phenytoin chew tab 50 mg.....</b>	<b>86</b>
PEN NEEDLES 31GX5MM.....	159	<b>phenytoin sodium extended cap 100 mg.....</b>	<b>86</b>
PEN NEEDLES 31GX8MM.....	159	<b>phenytoin sodium extended cap 200 mg, 300 mg.....</b>	<b>86</b>
PEN NEEDLES 32GX4MM.....	159	<b>phenytoin susp 125 mg/5ml.....</b>	<b>86</b>
PEN NEEDLES 29GX12MM.....	159	PHEXXI.....	61
PEN NEEDLES 31G X 5MM.....	159	PHOSPHOLINE IODIDE.....	101
PEN NEEDLES 31G X 6MM.....	159	<b>phytonadione tab 5 mg.....</b>	<b>90</b>
PEN NEEDLES 31G X 8MM.....	159	PIFELTRO.....	8
PEN NEEDLES 32G X 4MM.....	159	<b>pilocarpine hcl ophth soln 1%, 2%, 4%.....</b>	<b>102</b>
PEN NEEDLES 32G X 5MM.....	159	<b>pilocarpine hcl tab 5 mg, 7.5 mg.....</b>	<b>103</b>
PEN NEEDLES 32G X 6MM.....	159	<b>pimecrolimus cream 1%.....</b>	<b>109</b>
PEN NEEDLES 31GX8MM (5/16).....	159	PIMOZIDE.....	74
PEN NEEDLES 31GX6MM (1/4).....	159	<b>pindolol tab 5 mg, 10 mg.....</b>	<b>41</b>
PENTACEL.....	15		

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pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg.....	31	PONVORY 14-DAY STARTER PA.....	74
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv).....	31	posaconazole susp 40 mg/ml.....	4
PIP BLOOD GLUCOSE MONITOR.....	161	posaconazole tab delayed release 100 mg.....	4
PIP BLOOD GLUCOSE TEST ST.....	118	potassium chloride cap er 8 meq, 10 meq.....	92
PIP LANCETS/28G.....	161	POTASSIUM CHLORIDE ER.....	92
PIP LANCETS/30G.....	161	potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq.....	92
PIP PEN NEEDLES 31G X 5MM.....	161	potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml).....	92
PIP PEN NEEDLES 32G X 4MM.....	161	potassium chloride tab er 10 meq, 20 meq (1500 mg).....	92
PIQRAY 200MG DAILY DOSE.....	22	potassium chloride tab er 8 meq (600 mg).....	92
PIQRAY 250MG DAILY DOSE.....	22	potassium citrate tab er 5 meq (540 mg).....	61
PIQRAY 300MG DAILY DOSE.....	22	potassium citrate tab er 10 meq (1080 mg).....	61
PIRFENIDONE.....	54	potassium citrate tab er 15 meq (1620 mg).....	61
pirfenidone cap 267 mg.....	54	potassium phosphate monobasic tab 500 mg.....	92
pirfenidone tab 267 mg.....	54	pot phos monobasic w/sod phos di & monobas tab 155-852-130mg.....	92
pirfenidone tab 801 mg.....	54	PRADAXA.....	95
piroxicam cap 10 mg, 20 mg.....	80	pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg.....	88
pitavastatin calcium tab 4 mg.....	48	pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg.....	88
pitavastatin calcium tab 1 mg, 2 mg.....	48	prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv).....	98
PLAN B ONE-STEP.....	29	pravastatin sodium tab 80 mg.....	48
PLAQUENIL.....	10	pravastatin sodium tab 10 mg, 20 mg, 40 mg.....	48
PLEGRIDY.....	74	praziquantel tab 600 mg.....	10
PLEGRIDY STARTER PACK.....	74	prazosin hcl cap 1 mg, 2 mg, 5 mg.....	44
PLENVU.....	55	PRECISION SOF-TACT TEST S.....	118
PNEUMOVAX 23.....	14	PRECISION SURE-DOSE INSUL.....	161
PNV-DHA+DOCUSATE.....	91	PRECISION XTRA.....	161
PNV-OMEGA.....	91	PRECISION XTRA BLOOD GLUC.....	118
PNV PRENATAL PLUS MULTIVI.....	91	PRED MILD.....	102
POCKETCHEM EZ BLOOD GLUCO.....	118	prednisolone acetate ophth susp 1%.....	102
PODOFILOX.....	109	PREDNISOLONE SODIUM PHOSP.....	26
podofilox gel 0.5%.....	109	prednisolone sodium phosphate oral soln 25 mg/5ml (base eq).....	26
POGO AUTOMATIC BLOOD GLUC.....	161	prednisolone sod phosphate oral soln 15 mg/5ml (base equiv).....	26
POGO AUTOMATIC TEST CARTR.....	118	prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base).....	26
POKONZA.....	92	prednisolone soln 15 mg/5ml.....	26
POLY HUB NEEDLE/18G X 1-1.....	161	prednisolone tab 5 mg.....	26
POLY HUB NEEDLE/21G X 1-1.....	161	PREDNISON.....	26
POLY HUB NEEDLE/22G X 1-1.....	161	PREDNISON INTENSOL.....	26
POLY HUB NEEDLE/23G X 1-1.....	161	prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg.....	26
POLY HUB NEEDLE/25G X 1-1.....	161	prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48).....	26
POLY HUB NEEDLE/27G X 1-1.....	161	PREFERRED PLUS INSULIN SY.....	161
POLY HUB NEEDLE/25G X 5/8.....	161	PREFERRED PLUS LANCETS CO.....	161
POLY HUB NEEDLE/27G X 1/2.....	161	PREFERRED PLUS LANCETS SU.....	162
POLY HUB NEEDLE/30G X 1/2.....	161		
POLY HUB NEEDLE/18G X 1".....	161		
POLY HUB NEEDLE/21G X 1".....	161		
POLY HUB NEEDLE/22G X 1".....	161		
POLY HUB NEEDLE/23G X 1".....	161		
POLY HUB NEEDLE/25G X 1".....	161		
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%.....	102		
POMALYST.....	22		
PONVORY.....	74		

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PREFERRED PLUS LANCETS TH.....	162	progesterone cap 100 mg, 200 mg.....	30
PREFERRED PLUS UNIFINE PE.....	162	PROGLYCEM.....	31
<b>pregabalin cap 225 mg, 300 mg.....</b>	<b>86</b>	PROGRAF.....	181
<b>pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg,</b>		PROMACTA.....	94
<b>200 mg.....</b>	<b>86</b>	<b>promethazine &amp; phenylephrine syrup 6.25-5</b>	
<b>pregabalin soln 20 mg/ml.....</b>	<b>86</b>	<b>mg/5ml.....</b>	<b>51</b>
PREHEVBRIO.....	14	<b>promethazine-dm syrup 6.25-15 mg/5ml.....</b>	<b>51</b>
PREMARIN.....	28	<b>promethazine hcl oral soln 6.25 mg/5ml.....</b>	<b>50</b>
PREMIUM BLOOD GLUCOSE TES.....	118	<b>promethazine hcl suppos 12.5 mg, 25 mg.....</b>	<b>50</b>
PREMPHASE.....	28	<b>promethazine hcl tab 12.5 mg, 25 mg, 50 mg.....</b>	<b>50</b>
PREMPRO.....	28	<b>promethazine w/ codeine syrup 6.25-10 mg/5ml.....</b>	<b>51</b>
PRENAISSANCE.....	91	PROMETHEGAN.....	50
PRENATAL.....	91	<b>propafenone hcl cap er 12hr 225 mg, 325 mg, 425</b>	
PRENATAL 19.....	91	<b>mg.....</b>	<b>42</b>
PRENATAL PLUS.....	91	<b>propafenone hcl tab 150 mg, 225 mg, 300 mg.....</b>	<b>42</b>
PRENATAL PLUS VITAMIN AND.....	91	<b>proparacaine hcl ophth soln 0.5%.....</b>	<b>102</b>
PRENATAL-U.....	91	PROPRANOLOL HCL.....	41
PRETOMANID.....	4	<b>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160</b>	
PREVENT DROPSAFE SAFETY P.....	162	<b>mg.....</b>	<b>41</b>
PREVENT SAFETY PEN NEEDLE.....	162	<b>propranolol hcl oral soln 20 mg/5ml.....</b>	<b>41</b>
PREVIDENT 5000 ENAMEL PRO.....	104	<b>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80</b>	
PREVIDENT RINSE.....	104	<b>mg.....</b>	<b>41</b>
PREVIDENT 5000 SENSITIVE.....	104	<b>propylthiouracil tab 50 mg.....</b>	<b>35</b>
PREVNAR 20.....	14	PROQUAD.....	14
PREVYMIS.....	8	PROSCAR.....	61
PREZCOBIX.....	8	<b>protriptyline hcl tab 5 mg, 10 mg.....</b>	<b>64</b>
PREZISTA.....	8	PROVERA.....	30
PRIFTIN.....	4	PROVIDA OB.....	91
PRIMAQUINE PHOSPHATE.....	10	PRO VOICE V8/V9 BLOOD GLU.....	118
<b>primaquine phosphate tab 26.3 mg (15 mg base).....</b>	<b>10</b>	PRO VOICE V8 BLOOD GLUCOS.....	162
<b>primidone tab 50 mg, 250 mg.....</b>	<b>86</b>	PRO VOICE V9 BLOOD GLUCOS.....	162
PRIORIX.....	14	<b>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml.....</b>	<b>51</b>
<b>probenecid tab 500 mg.....</b>	<b>82</b>	PTS PANELS EGLU.....	118
<b>prochlorperazine maleate tab 5 mg (base equivalent),</b>		PULMOZYME.....	54
<b>10 mg (base equivalent).....</b>	<b>67</b>	PURE COMFORT PEN NEEDLE 3.....	163
<b>prochlorperazine suppos 25 mg.....</b>	<b>67</b>	PURE COMFORT PEN NEEDLE/3.....	163
PRO COMFORT INSULIN SYRIN.....	162	PURE COMFORT SAFETY PEN N.....	163
PRO COMFORT PEN NEEDLES/.....	162	PURIXAN.....	22
PRO COMFORT SAFETY LANCET.....	162	PX ADVANCED LANCING DEVIC.....	163
PROCRIT.....	94	PX EXTRA SHORT PEN NEEDLE.....	163
PROCTOFOAM HC.....	104	PX INSULIN SYRINGE/U-100/.....	163
PROCYSBI.....	61	PX LANCETS MICROTHIN 33G.....	163
PRODIGY AUTOCODE BLOOD GL.....	162	PX LANCETS ULTRA THIN.....	163
PRODIGY INSULIN SYRINGE/U.....	162	PX LANCETS ULTRA THIN 28G.....	163
PRODIGY INSULIN SYRINGE/1.....	162	PX MINI PEN NEEDLES 31GX5.....	163
PRODIGY LANCING DEVICE.....	162	PX PEN NEEDLE 31GX8MM.....	163
PRODIGY NO CODING BLOOD G.....	118	PX PEN NEEDLE 29GX12MM.....	163
PRODIGY POCKET BLOOD GLUC.....	162	<b>pyrazinamide tab 500 mg.....</b>	<b>4</b>
PRODIGY PRESSURE ACTIVATE.....	162	<b>pyridostigmine bromide oral soln 60 mg/5ml.....</b>	<b>90</b>
PRODIGY SAFETY LANCETS.....	162	<b>pyridostigmine bromide tab er 180 mg.....</b>	<b>90</b>
PRODIGY TWIST TOP LANCETS.....	162	<b>pyridostigmine bromide tab 60 mg.....</b>	<b>90</b>
PRODIGY VOICE BLOOD GLUCO.....	162	<b>pyrimethamine tab 25 mg.....</b>	<b>10</b>
PROFILNINE.....	98	PYRUKYND.....	98

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PYRUKYND TAPER PACK.....	98	RA E-ZJECT LANCETS 28G.....	164
<b>Q</b>		RA E-ZJECT LANCETS THIN 2.....	164
QC ADVANCED LANCING DEVIC.....	163	RA E-ZJECT LANCETS ULTRA.....	164
QC INSULIN SYRINGE/0.3ML/.....	163	RAGWITEK.....	17
QC INSULIN SYRINGE/0.5ML/.....	163	RA INSULIN SYRINGE/0.5ML/.....	164
QC INSULIN SYRINGE/1ML/29.....	163	RA INSULIN SYRINGE/1ML/29.....	164
QC INSULIN SYRINGE/1ML/31.....	163	RA INSULIN SYRINGE/U-100/.....	164
QC LANCETS SUPER THIN.....	163	<b>raloxifene hcl tab 60 mg.....</b>	<b>38</b>
QC LANCETS ULTRA THIN.....	163	<b>ramelteon tab 8 mg.....</b>	<b>69</b>
QC PEN NEEDLES 29G X 12MM.....	163	<b>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg.....</b>	<b>45</b>
QC PEN NEEDLES 31G X 6MM.....	163	<b>ranolazine tab er 12hr 500 mg, 1000 mg.....</b>	<b>40</b>
QC PEN NEEDLES 31G X 8MM.....	163	RAPAFLO.....	61
QC UNIFINE PENTIPS 32GX4M.....	163	RAPAMUNE.....	181
QC UNILET LANCETS 33G/MIC.....	163	RA PEN NEEDLES 31G X 5MM.....	164
QC UNILET LANCETS 28G/ULT.....	163	RA PEN NEEDLES 31G X 8MM.....	164
QELBREE.....	71	<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg</b>	
QINLOCK.....	22	<b>(base equiv).....</b>	<b>89</b>
QUADRACEL.....	15	RAVICTI.....	38
QUALAQUIN.....	10	RAYA SURE PEN NEEDLE 29G.....	164
QUDEXY XR.....	86	RAYA SURE PEN NEEDLE 31G.....	164
QUESTRAN.....	48	READYLANCE SAFETY LANCETS.....	164
QUESTRAN LIGHT.....	48	REALITY INSULIN SYRINGE/U.....	164
QUETIAPINE FUMARATE.....	67	REALITY LANCETS.....	164
<b>quetiapine fumarate tab er 24hr 150 mg, 200 mg.....</b>	<b>67</b>	REALITY LATEX/ULTRA TEXTU.....	164
<b>quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400</b>		REALITY LATEX/ULTRA THIN.....	164
<b>mg.....</b>	<b>67</b>	REALITY LATEX CONDOMS/LUB.....	164
<b>quetiapine fumarate tab 300 mg, 400 mg.....</b>	<b>67</b>	REALITY TRIGGER LANCETS.....	164
<b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200</b>		REBIF.....	74
<b>mg.....</b>	<b>67</b>	REBIF REBIDOSE.....	74
QUICKTEK.....	164	REBIF REBIDOSE TITRATION.....	74
QUICKTEK TEST STRIPS.....	118	REBIF TITRATION PACK.....	74
QUILLICHEW ER.....	71	REBINYN.....	98
QUILLIVANT XR.....	71	RECOMBINATE.....	98
QUINAPRIL/HYDROCHLOROTHIA.....	45	RECOMBIVAX HB.....	14
<b>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg.....</b>	<b>45</b>	RECTIV.....	104
<b>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5</b>		REFUAH PLUS BLOOD GLUCOSE.....	118
<b>mg.....</b>	<b>45</b>	REGLAN.....	59
<b>quinidine gluconate tab er 324 mg.....</b>	<b>42</b>	REGRANEX.....	109
QUINIDINE SULFATE.....	42	RELENZA DISKHALER.....	8
<b>quinine sulfate cap 324 mg.....</b>	<b>10</b>	RELION CONFIRM/MICRO TEST.....	118
QUINTET AC BLOOD GLUCOSE.....	118	RELION CONFIRM BLOOD GLUC.....	164
QUINTET BLOOD GLUCOSE MON.....	164	RELION 2-IN-1 LANCET DEV.....	166
QUINTET BLOOD GLUCOSE TES.....	118	RELION 2-IN-1 LANCING DEV.....	166
QULIPTA.....	82	RELION INSULIN SYRINGE 0.....	164
QUVIVIQ.....	68	RELION INSULIN SYRINGE/U.....	165
QVAR REDHALER.....	53	RELION INSULIN SYRINGE 1M.....	165
<b>R</b>		RELION KETONE TEST STRIPS.....	118
<b>rabeprazole sodium ec tab 20 mg.....</b>	<b>56</b>	RELION LANCETS.....	165
RADICAVA ORS.....	89	RELION LANCETS MICRO-THIN.....	165
RADICAVA ORS STARTER KIT.....	89	RELION LANCETS THIN 26G.....	165
RADIOGARDASE.....	111	RELION LANCETS ULTRA-THIN.....	165
		RELION LANCING DEVICE.....	165
		RELION MICRO BLOOD GLUCOS.....	165

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RELION MINI PEN NEEDLES 3.....	165	RIGHTEST GL300 LANCETS.....	166
RELION PEN NEEDLES/31G X.....	165	RIGHTEST GM100 BLOOD GLUC.....	166
RELION PEN NEEDLES 29GX12.....	165	RIGHTEST GM300 BLOOD GLUC.....	166
RELION PEN NEEDLES 31G X.....	165	RIGHTEST GM550 BLOOD GLUC.....	166
RELION PEN NEEDLES 32G X.....	165	RIGHTEST GS100 BLOOD GLUC.....	118
RELION PEN NEEDLES 31GX5/.....	165	RIGHTEST GS300 BLOOD GLUC.....	119
RELION PEN NEEDLES 31GX6M.....	165	RIGHTEST GS333 BLOOD GLUC.....	119
RELION PEN NEEDLES 31GX8M.....	165	RIGHTEST GS550 BLOOD GLUC.....	119
RELION PEN NEEDLES 32GX4M.....	165	RIGHTEST GT333 BLOOD GLUC.....	119
RELION PLATINUM BLOOD GLU.....	118	<b>riluzole tab 50 mg.....</b>	<b>89</b>
RELION PREMIER BLOOD GLUC.....	118	RIMANTADINE HYDROCHLORIDE.....	8
RELION PREMIER BLU BLOOD.....	165	<b>ringer's solution for irrigation.....</b>	<b>181</b>
RELION PREMIER CLASSIC BL.....	165	RINVOQ.....	80
RELION PREMIER COMPACT BL.....	165	RINVOQ LQ.....	80
RELION PREMIER VOICE BLOO.....	165	<b>risedronate sodium tab delayed release 35 mg.....</b>	<b>38</b>
RELION PRIME BLOOD GLUCOS.....	118	<b>risedronate sodium tab 5 mg, 30 mg.....</b>	<b>38</b>
RELION R.....	34	<b>risedronate sodium tab 35 mg, 150 mg.....</b>	<b>38</b>
RELION SHORT PEN NEEDLES.....	166	RISPERDAL CONSTA.....	67
RELION THIN LANCETS.....	166	<b>risperidone microspheres for im extended rel susp</b>	
RELION TRUE METRIX AIR BL.....	166	<b>12.5 mg, 25 mg, 37.5 mg, 50 mg.....</b>	<b>67</b>
RELION TRUE METRIX BLOOD.....	118	RISPERIDONE ODT.....	67
RELION ULTIMA BLOOD GLUCO.....	118	<b>risperidone orally disintegrating tab 4 mg.....</b>	<b>67</b>
RELION ULTRA THIN LANCETS.....	166	<b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2</b>	
RELION ULTRA THIN PLUS LA.....	166	<b>mg, 3 mg.....</b>	<b>67</b>
REMODULIN.....	49	<b>risperidone soln 1 mg/ml.....</b>	<b>67</b>
<b>repaglinide tab 0.5 mg, 1 mg, 2 mg.....</b>	<b>31</b>	<b>risperidone tab 0.25 mg.....</b>	<b>68</b>
REPATHA.....	48	<b>risperidone tab 4 mg.....</b>	<b>68</b>
REPATHA PUSHTRONEX SYSTEM.....	48	<b>risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg.....</b>	<b>68</b>
REPATHA SURECLICK.....	48	RITALIN.....	71
RESTASIS.....	102	<b>ritonavir tab 100 mg.....</b>	<b>8</b>
RETACRIT.....	94	<b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3</b>	
RETEVMO.....	22	<b>mg (base equivalent), 4.5 mg (base equivalent), 6 mg</b>	
RETIN-A.....	109	<b>(base equivalent).....</b>	<b>74</b>
RETROVIR.....	8	<b>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr,</b>	
REVLIMID.....	181	<b>13.3 mg/24hr.....</b>	<b>74</b>
REVUFORJ.....	22	RIVFLOZA.....	62
REXALL BLOOD GLUCOSE MONI.....	166	RIXUBIS.....	98
REXALL BLOOD GLUCOSE TEST.....	118	<b>rizatriptan benzoate oral disintegrating tab 5 mg (base</b>	
REXALL LANCETS ULTRA THIN.....	166	<b>eq).....</b>	<b>82</b>
REXTOVY.....	111	<b>rizatriptan benzoate oral disintegrating tab 10 mg</b>	
REXULTI.....	67	<b>(base eq).....</b>	<b>82</b>
REYATAZ.....	8	<b>rizatriptan benzoate tab 5 mg (base equivalent).....</b>	<b>82</b>
REYVOW.....	82	<b>rizatriptan benzoate tab 10 mg (base equivalent).....</b>	<b>82</b>
REZDIFFRA.....	59	ROCALTROL.....	38
REZLIDHIA.....	22	ROCKLATAN.....	102
REZUROCK.....	181	<b>roflumilast tab 250 mcg, 500 mcg.....</b>	<b>53</b>
RHOPRESSA.....	102	<b>ropinirole hydrochloride tab er 24hr 2 mg (base</b>	
RIASTAP.....	98	<b>equivalent), 4 mg (base equivalent), 6 mg (base</b>	
RIBAVIRIN.....	8	<b>equivalent), 8 mg (base equivalent), 12 mg (base</b>	
RIDAURA.....	80	<b>equivalent).....</b>	<b>89</b>
<b>rifabutin cap 150 mg.....</b>	<b>4</b>	<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2</b>	
<b>rifampin cap 150 mg, 300 mg.....</b>	<b>4</b>	<b>mg, 3 mg, 4 mg, 5 mg.....</b>	<b>89</b>
RIGHTEST GD500 LANCING DE.....	166	<b>rosuvastatin calcium tab 40 mg.....</b>	<b>48</b>

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rosuvastatin calcium tab 5 mg, 10 mg, 20 mg.....	48	SECURESAFE SAFETY INSULIN.....	167
ROTARIX.....	14	SECURESAFE SAFETY PEN NEE.....	167
ROTATEQ.....	14	SELECT-LITE LANCING DEVIC.....	167
ROZEREM.....	69	SELECT-OB.....	91
ROZLYTREK.....	22	<b>selegiline hcl cap 5 mg.....</b>	<b>89</b>
RUBRACA.....	22	<b>selegiline hcl tab 5 mg.....</b>	<b>89</b>
RUCONEST.....	98	<b>selenium sulfide lotion 2.5%.....</b>	<b>109</b>
<b>rufinamide susp 40 mg/ml.....</b>	<b>86</b>	SELZENTRY.....	8
<b>rufinamide tab 200 mg, 400 mg.....</b>	<b>86</b>	SE-NATAL 19.....	91
RUKOBIA.....	8	SENSIPAR.....	39
RYBELSUS.....	31	SEREVENT DISKUS.....	53
RYDAPT.....	22	SEROSTIM.....	39
RYKINDO.....	68	<b>sertraline hcl oral concentrate for solution 20 mg/ ml.....</b>	<b>64</b>
RYPLAZIM.....	98	<b>sertraline hcl tab 25 mg, 50 mg, 100 mg.....</b>	<b>64</b>
<b>S</b>		<b>sevelamer carbonate packet 0.8 gm, 2.4 gm.....</b>	<b>59</b>
SABRIL.....	86	<b>sevelamer carbonate tab 800 mg.....</b>	<b>59</b>
SAFETY LANCETS.....	166	<b>sevelamer hcl tab 400 mg.....</b>	<b>59</b>
SAFETY LANCETS/PRESSURE A.....	166	<b>sevelamer hcl tab 800 mg.....</b>	<b>59</b>
SAFETY LANCETS 21G.....	166	SEVENFACT.....	98
SAFETY LANCETS 23G.....	166	SFROWASA.....	59
SAFETY LANCETS 28G.....	166	SHINGRIX.....	14
SAFETY PEN NEEDLES/30G X.....	166	SIGNIFOR.....	39
SAFYRAL.....	29	SIGNIFOR LAR.....	39
SALAGEN.....	104	<b>sildenafil citrate for suspension 10 mg/ml.....</b>	<b>49</b>
SAMSCA.....	38	<b>sildenafil citrate tab 20 mg.....</b>	<b>49</b>
SANCUSO.....	57	SILENOR.....	69
SANDIMMUNE.....	181	SILIQ.....	109
SANDOSTATIN.....	39	<b>silodosin cap 4 mg, 8 mg.....</b>	<b>62</b>
SANTYL.....	109	SILVADENE.....	109
SAPHRIS.....	68	<b>silver sulfadiazine cream 1%.....</b>	<b>109</b>
<b>sapropterin dihydrochloride powder packet 100 mg, 500 mg.....</b>	<b>39</b>	SIMBRINZA.....	102
<b>sapropterin dihydrochloride tab 100 mg.....</b>	<b>39</b>	SIMLANDI 1-PEN KIT.....	80
SAPSCARE TWIST TOP LANCET.....	166	SIMLANDI 2-PEN KIT.....	80
SAPS HEALTH CARE TWIST TO.....	166	SIMPLE DIAGNOSTICS LANCIN.....	167
SAPS HEALTH PLUS TWIST TO.....	166	SIMPONI.....	80
SAPS HEALTH TWIST TOP LAN.....	166	<b>simvastatin tab 5 mg.....</b>	<b>48</b>
SAVELLA.....	74	<b>simvastatin tab 20 mg.....</b>	<b>48</b>
SAVELLA TITRATION PACK.....	74	<b>simvastatin tab 80 mg.....</b>	<b>48</b>
<b>saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv).....</b>	<b>31</b>	<b>simvastatin tab 10 mg, 40 mg.....</b>	<b>48</b>
<b>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg.....</b>	<b>31</b>	SINEMET.....	89
<b>saxagliptin-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg.....</b>	<b>32</b>	SINGLE-LET.....	167
SB INSULIN SYRINGE/U-100/.....	166	<b>sirolimus oral soln 1 mg/ml.....</b>	<b>181</b>
SB LANCETS THIN.....	166	<b>sirolimus tab 0.5 mg, 1 mg, 2 mg.....</b>	<b>181</b>
SB LANCETS ULTRA THIN.....	166	SIRTURO.....	4
SCEMBLIX.....	22	SIVEXTRO.....	12
SCHNUCKS INSULIN SYRINGE.....	167	SKYCLARYS.....	89
<b>scopolamine td patch 72hr 1 mg/3days.....</b>	<b>57</b>	SKYRIZI.....	59
SECUADO.....	68	SKYRIZI PEN.....	109
SECURESAFE SAFETY HYPODER.....	167	SLYND.....	29
		SMART DIABETES VANTAGE LA.....	167
		SMARTEST BLOOD GLUCOSE TE.....	119
		SMARTEST EJECT BLOOD GLUC.....	167

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SMARTEST EJECT STARTER KI.....	167	SOTYKTU.....	109
SMARTEST LANCETS 28G.....	167	SOVALDI.....	8
SMARTEST PERSONA STARTER.....	167	SPEVIGO.....	110
SMARTEST PRONTO STARTER.....	167	SPIKEVAX COVID-19 VACCINE.....	14
SMARTEST PROTEGE BLOOD GL.....	167	SPINOSAD.....	110
SMARTEST PROTEGE STARTER.....	167	SPIRIVA HANDIHALER.....	53
SMART SENSE COLOR LANCETS.....	167	SPIRIVA RESPIMAT.....	53
SMART SENSE PREMIUM BLOOD.....	119	<b>spironolactone &amp; hydrochlorothiazide tab 25-25</b>	
SMART SENSE STANDARD LANC.....	167	<b>mg.....</b>	<b>46</b>
SMART SENSE SUPER THIN LA.....	167	<b>spironolactone tab 25 mg, 50 mg, 100 mg.....</b>	<b>46</b>
SMART SENSE THIN LANCETS.....	167	SPORANOX.....	4
SMART SENSE VALUE BLOOD.....	167	SPRAVATO 56MG DOSE.....	64
SMART SENSE VALUE BLOOD G.....	119	SPRAVATO 84MG DOSE.....	64
SM MICRO THIN LANCETS 33G.....	167	SPRYCEL.....	22
SM TRUEDRAW LANCING DEVIC.....	167	SPS.....	182
<b>sodium chloride irrigation soln 0.9%.....</b>	<b>62</b>	<b>stannous fluoride gel 0.4%.....</b>	<b>104</b>
<b>sodium chloride soln nebu 7%.....</b>	<b>51</b>	1ST CHOICE LANCETS SUPER.....	180
<b>sodium chloride soln nebu 3%, 10%.....</b>	<b>51</b>	1ST CHOICE LANCETS THIN.....	180
<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml.....</b>	<b>62</b>	1ST CHOICE LANCETS ULTRA.....	180
SODIUM FLUORIDE.....	92	STELARA.....	110
SODIUM FLUORIDE/POTASSIUM.....	104	STERILANCE TL.....	168
<b>sodium fluoride chew tab 0.25 mg f (from 0.55 mg</b>		STIMUFEND.....	94
<b>  naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg</b>		STIOLTO RESPIMAT.....	53
<b>  naf).....</b>	<b>93</b>	STIVARGA.....	22
<b>sodium fluoride cream 1.1%.....</b>	<b>104</b>	STRENSIQ.....	39
<b>sodium fluoride gel 1.1% (0.5% f).....</b>	<b>104</b>	STRIBILD.....	8
<b>sodium fluoride paste 1.1%.....</b>	<b>104</b>	STRIVERDI RESPIMAT.....	53
SODIUM FLUORIDE 5000 PPM.....	104	STROMECTOL.....	10
<b>sodium fluoride rinse 0.2%.....</b>	<b>104</b>	1ST TIER UNIFINE PENTIPS.....	180
SODIUM OXYBATE.....	74	SUBLOCADE.....	78
<b>sodium phenylbutyrate oral powder 3 gm/</b>		SUCRAID.....	57
<b>  teaspoonful.....</b>	<b>39</b>	<b>sucalfate tab 1 gm.....</b>	<b>56</b>
<b>sodium phenylbutyrate tab 500 mg.....</b>	<b>39</b>	SUFLAVE.....	55
<b>sodium polystyrene sulfonate powder.....</b>	<b>181</b>	SULAR.....	42
<b>sodium polystyrene sulfonate susp 15 gm/60ml.....</b>	<b>182</b>	SULCONAZOLE NITRATE.....	110
<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6</b>		SULFACETAMIDE SODIUM.....	102
<b>  gm/177ml.....</b>	<b>55</b>	SULFACETAMIDE SODIUM/PRED.....	102
SOFOSBUVIR/VELPATASVIR.....	8	<b>sulfacetamide sodium lotion 10% (acne).....</b>	<b>110</b>
SOHONOS.....	89	<b>sulfacetamide sodium ophth soln 10%.....</b>	<b>102</b>
<b>solifenacin succinate tab 5 mg, 10 mg.....</b>	<b>60</b>	<b>sulfadiazine tab 500 mg.....</b>	<b>3</b>
SOLIQUA 100/33.....	32	<b>sulfamethoxazole-trimethoprim susp 200-40</b>	
SOLTAMOX.....	22	<b>mg/5ml.....</b>	<b>12</b>
SOLUS V2 AUDIBLE BLOOD GL.....	167	<b>sulfamethoxazole-trimethoprim tab 400-80 mg.....</b>	<b>12</b>
SOLUS V2 AUDIBLE TEST.....	119	<b>sulfamethoxazole-trimethoprim tab 800-160 mg.....</b>	<b>12</b>
SOLUS V2 LANCING DEVICE.....	167	SULFAMYLON.....	110
SOLUS V2 PRESSURE ACTIVAT.....	167	<b>sulfasalazine tab delayed release 500 mg.....</b>	<b>59</b>
SOLUS V2 TWIST LANCETS 30.....	168	<b>sulfasalazine tab 500 mg.....</b>	<b>59</b>
SOMAVERT.....	39	<b>sulindac tab 150 mg, 200 mg.....</b>	<b>81</b>
SOOLANTRA.....	109	<b>sumatriptan nasal spray 5 mg/act.....</b>	<b>82</b>
<b>sorafenib tosylate tab 200 mg (base equivalent).....</b>	<b>22</b>	<b>sumatriptan nasal spray 20 mg/act.....</b>	<b>82</b>
<b>sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg.....</b>	<b>41</b>	<b>sumatriptan succinate inj 6 mg/0.5ml.....</b>	<b>82</b>
<b>sotalol hcl tab 240 mg.....</b>	<b>41</b>	SUMATRIPTAN SUCCINATE REF.....	82
<b>sotalol hcl tab 80 mg, 120 mg, 160 mg.....</b>	<b>41</b>		

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sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml.....	82	TALZENNA.....	23
sumatriptan succinate tab 25 mg.....	82	TAMIFLU.....	9
sumatriptan succinate tab 50 mg, 100 mg.....	82	tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent).....	23
sunitinib malate cap 12.5 mg (base equivalent).....	22	tamsulosin hcl cap 0.4 mg.....	62
sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent).....	23	TARCEVA.....	23
SUNLENCA.....	8	TARGRETIN.....	23
SUNOSI.....	71	TARON-C DHA.....	92
SUPER THIN LANCETS.....	168	TARPEYO.....	26
SUPREME II CONFIDENCE PAD.....	168	TASCENSO ODT.....	74
SUPREME TEST STRIPS.....	119	TASIGNA.....	23
SUPREP BOWEL PREP KIT.....	55	tasimelteon capsule 20 mg.....	69
SURE COMFORT AUTOKEEPER S.....	168	TASMAR.....	89
SURE COMFORT INSULIN SYRI.....	168	TAVALISSE.....	98
SURE COMFORT LANCETS 18G.....	168	TAVNEOS.....	98
SURE COMFORT LANCETS 21G.....	168	tazarotene cream 0.05%, 0.1%.....	110
SURE COMFORT LANCETS 23G.....	168	tazarotene gel 0.05%, 0.1%.....	110
SURE COMFORT LANCETS 28G.....	168	TAZORAC.....	110
SURE COMFORT LANCETS 30G.....	168	TAZVERIK.....	23
SURE COMFORT LANCING PEN.....	168	TDVAX.....	15
SURE COMFORT PEN NEEDLES.....	168	TECHLITE AST LANCETS.....	168
SURELITE LANCETS.....	168	TECHLITE INSULIN SYRINGE.....	168
SUTAB.....	55	TECHLITE LANCETS.....	168
SUTENT.....	23	TECHLITE LANCETS 26G.....	168
SYMBICORT.....	53	TECHLITE PEN NEEDLES/31G.....	169
SYMDEKO.....	54	TECHLITE PEN NEEDLES/32G.....	169
SYMFI.....	8	TECHLITE PEN NEEDLES 29G.....	168
SYMFI LO.....	9	TECHLITE PEN NEEDLES 31G.....	169
SYMLINPEN 60.....	32	TECHLITE PLUS PEN NEEDLES.....	169
SYMLINPEN 120.....	32	TEGLUTIK.....	89
SYMPAZAN.....	86	TEGRETOL.....	86
SYMPROIC.....	59	TEGRETOL-XR.....	86
SYMTUZA.....	9	TEKTRNA.....	45
SYNAREL.....	39	TELMISARTAN/AMLODIPINE.....	45
SYNJARDY.....	32	telmisartan-hydrochlorothiazide tab 80-12.5 mg.....	45
SYNJARDY XR.....	32	telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-25 mg.....	45
SYNTHROID.....	36	telmisartan tab 20 mg, 40 mg, 80 mg.....	45
SYPRINE.....	182	temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg.....	69
<b>T</b>		temozolomide cap 250 mg.....	23
TABLOID.....	23	temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg.....	23
TABRECTA.....	23	TEMPO REFILL.....	169
tacrolimus cap 0.5 mg, 1 mg, 5 mg.....	182	TEMPO SMART BUTTON.....	169
tacrolimus oint 0.03%, 0.1%.....	110	TEMPO WELCOME.....	169
tadalafil tab 2.5 mg, 5 mg.....	50	TENCON.....	75
tadalafil tab 20 mg (pah).....	49	TENIVAC.....	15
TAFINLAR.....	23	tenofovir disoproxil fumarate tab 300 mg.....	9
tafluprost preservative free (pf) ophth soln 0.0015%.....	102	TENORETIC 50.....	45
TAGRISSE.....	23	TENORETIC 100.....	45
TAKHZYRO.....	98	TEPMETKO.....	23
TALTZ.....	110		

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terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	45	timolol maleate ophth soln 0.25%, 0.5%.....	102
terbinafine hcl tab 250 mg.....	4	timolol maleate ophth soln 0.5% (once-daily).....	102
terbutaline sulfate tab 2.5 mg, 5 mg.....	53	timolol maleate preservative free ophth soln 0.25%, 0.5%.....	102
terconazole vaginal cream 0.4%, 0.8%.....	61	timolol maleate tab 5 mg, 10 mg, 20 mg.....	41
terconazole vaginal suppos 80 mg.....	61	timolol ophth soln 0.5%.....	102
teriflunomide tab 7 mg, 14 mg.....	74	tinidazole tab 250 mg, 500 mg.....	12
TERIPARATIDE.....	39	tiopronin tab delayed release 100 mg.....	62
teriparatide soln pen-inj 600 mcg/2.4ml.....	39	tiopronin tab delayed release 300 mg.....	62
TESTOSTERONE.....	26	tiopronin tab 100 mg.....	62
testosterone cypionate im inj in oil 100 mg/ml.....	26	tiotropium bromide monohydrate inhal cap 18 mcg (base equiv).....	53
testosterone cypionate im inj in oil 200 mg/ml.....	26	TIVICAY.....	9
TESTOSTERONE ENANTHATE.....	26	TIVICAY PD.....	9
testosterone td gel 12.5 mg/act (1%).....	26	tizanidine hcl tab 2 mg (base equivalent).....	90
testosterone td gel 20.25 mg/act (1.62%).....	26	tizanidine hcl tab 4 mg (base equivalent).....	90
testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%).....	26	TOBI PODHALER.....	3
testosterone td soln 30 mg/act.....	26	TOBRADEX.....	102
tetrabenazine tab 12.5 mg.....	74	TOBRADEX ST.....	102
tetrabenazine tab 25 mg.....	74	TOBRAMYCIN.....	3
tetracaine hcl ophth soln 0.5%.....	102	tobramycin-dexamethasone ophth susp 0.3-0.1%.....	102
tetracycline hcl cap 250 mg, 500 mg.....	3	tobramycin nebu soln 300 mg/5ml.....	3
TEZSPIRE.....	53	tobramycin nebu soln 300 mg/4ml.....	3
TGT ADVANCED LANCING DEVI.....	169	tobramycin ophth soln 0.3%.....	102
TGT BLOOD GLUCOSE MONITOR.....	169	TOBREX.....	102
TGT BLOOD GLUCOSE TEST ST.....	119	TODAYS HEALTH ADVANCED LA.....	169
TGT LANCET ALTERNATE SITE.....	169	TODAYS HEALTH ORIGINAL PE.....	169
TGT LANCET MICRO THIN 33G.....	169	TODAYS HEALTH SHORT PEN N.....	169
TGT LANCET SUPER THIN 30G.....	169	TODAYS HEALTH SUPER THIN.....	169
TGT LANCET THIN 23G.....	169	TODAYS HEALTH ULTRA THIN.....	169
TGT LANCET THIN 26G.....	169	TODAY SPONGE.....	61
TGT LANCET ULTRA THIN 28G.....	169	TOLAK.....	110
TGT LANCET ULTRA THIN 30G.....	169	tolcapone tab 100 mg.....	89
TGT LANCING DEVICE.....	169	TOLECTIN 600.....	81
THALOMID.....	182	TOLMETIN SODIUM.....	81
THEO-24.....	53	tolterodine tartrate cap er 24hr 2 mg, 4 mg.....	60
theophylline elixir 80 mg/15ml.....	53	tolterodine tartrate tab 1 mg, 2 mg.....	60
THEOPHYLLINE ER.....	53	tolvaptan tab 15 mg.....	39
theophylline soln 80 mg/15ml.....	53	tolvaptan tab 30 mg.....	39
theophylline tab er 12hr 300 mg, 450 mg.....	53	TOPAMAX.....	86
theophylline tab er 24hr 400 mg, 600 mg.....	53	TOPAMAX SPRINKLE.....	86
THIOLA.....	62	TOPCARE CLICKFINE UNIVERS.....	169
THIOLA EC.....	62	TOPCARE LANCETS MICRO-THI.....	169
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	68	TOPCARE ULTRA COMFORT INS.....	169
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg.....	68	TOPICORT.....	110
THRIVITE RX.....	92	topiramate cap er 24hr 200 mg.....	86
THYQUIDITY.....	36	topiramate cap er 24hr 25 mg, 50 mg, 100 mg.....	86
THYROID.....	36	topiramate cap er 24hr sprinkle 200 mg.....	86
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg.....	86	topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg.....	86
TIBSOVO.....	23	topiramate sprinkle cap 15 mg, 25 mg.....	86
timolol maleate ophth gel forming soln 0.25%, 0.5%.....	102	topiramate tab 25 mg, 50 mg, 100 mg, 200 mg.....	86
		TOPROL XL.....	41

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toremifene citrate tab 60 mg (base equivalent).....	23	TRIJARDY XR.....	32
toremifene citrate tab 60 mg (base equivalent).....	23	TRIKAFTA.....	54
toremifene citrate tab 60 mg (base equivalent).....	23	TRILEPTAL.....	87
toremifene citrate tab 60 mg (base equivalent).....	23	trimethobenzamide hcl cap 300 mg.....	57
toremifene citrate tab 60 mg (base equivalent).....	23	TRIMETHOPRIM.....	12
toremifene citrate tab 60 mg (base equivalent).....	23	trimethoprim tab 100 mg.....	12
toremifene citrate tab 60 mg (base equivalent).....	23	trimipramine maleate cap 25 mg, 50 mg, 100 mg.....	64
toremifene citrate tab 60 mg (base equivalent).....	23	TRINATAL RX 1.....	92
toremifene citrate tab 60 mg (base equivalent).....	23	TRINATE.....	92
toremifene citrate tab 60 mg (base equivalent).....	23	TRINTELLIX.....	64
toremifene citrate tab 60 mg (base equivalent).....	23	TRIUMEQ.....	9
toremifene citrate tab 60 mg (base equivalent).....	23	TRIUMEQ PD.....	9
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN ENZ.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN-ENZ LUBRICATED.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN-ENZ W/SPERMICIDAL.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN MAGNUM.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN ULTRA RIBBED/LUBRI.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN ULTRA THIN/SPERMIC.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROJAN ULTRA THIN LUBRICA.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TROKENDI XR.....	87
toremifene citrate tab 60 mg (base equivalent).....	23	tropicamide ophth soln 0.5%.....	103
toremifene citrate tab 60 mg (base equivalent).....	23	tropicamide ophth soln 1%.....	103
toremifene citrate tab 60 mg (base equivalent).....	23	tropium chloride cap er 24hr 60 mg.....	60
toremifene citrate tab 60 mg (base equivalent).....	23	tropium chloride tab 20 mg.....	60
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT INSULIN SYRI.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT PEN NEEDLES.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT PRO INSULIN.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT PRO PEN NEED.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT SAFETY INSUL.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT SAFETY LANCE.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT SAFETY PEN N.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COMFORT TWIST TOP LA.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE COVER.....	170
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEDRAW LANCING DEVICE.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE FOCUS BLOOD GLUCOSE.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE FOCUS SELF MONITORIN.....	119
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE METRIX.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE METRIX AIR BLOOD GLU.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE METRIX AIR W/BLUETOO.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE METRIX BLOOD GLUCOSE.....	119
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE METRIX GO BLOOD GLUC.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUE METRIX SELF MONITORI.....	119
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS 5-BEVEL PEN NEED.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS INSULIN SYRINGE.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS INSULIN SYRINGE/.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 26G.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 28G.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 30G.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 33G.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 33G MICR.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 28G SUPE.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS LANCETS 30G ULTR.....	171
toremifene citrate tab 60 mg (base equivalent).....	23	TRUEPLUS PEN NEEDLES 29GX.....	171
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TRECATOR.....	4		
TRELEGY ELLIPTA.....	54		
TREMFYA.....	110		
treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml).....	49		
TRESIBA.....	35		
TRESIBA FLEXTOUCH.....	35		
tretinoin cap 10 mg.....	23		
tretinoin cream 0.025%, 0.05%, 0.1%.....	110		
tretinoin gel 0.01%, 0.025%.....	110		
TRETEN.....	98		
triamcinolone acetonide aerosol soln 0.147 mg/ gm.....	110		
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%.....	110		
triamcinolone acetonide dental paste 0.1%.....	104		
triamcinolone acetonide lotion 0.025%, 0.1%.....	110		
triamcinolone acetonide oint 0.5%.....	110		
triamcinolone acetonide oint 0.025%, 0.1%.....	110		
triamterene & hydrochlorothiazide cap 37.5-25 mg.....	46		
triamterene & hydrochlorothiazide tab 37.5-25 mg.....	46		
triamterene & hydrochlorothiazide tab 75-50 mg.....	46		
triamterene cap 50 mg, 100 mg.....	46		
TRICARE.....	92		
TRICOR.....	48		
trientine hcl cap 250 mg.....	182		
TRIENTINE HYDROCHLORIDE.....	182		
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	68		
TRIFLURIDINE.....	102		
TRIHENYDROPHENIDYL HCL.....	89		
trihexyphenidyl hcl tab 2 mg, 5 mg.....	89		

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TRUEPLUS SAFETY LANCETS 2.....	171	ULTICARE SHORT SAFETY PEN.....	173
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TRUETEST STRIPS.....	119	ULTICARE U-100 INSULIN SY.....	173
TRUETRACK BLOOD GLUCOSE M.....	172	ULTIGUARD INSULIN SYRINGE.....	173
TRUETRACK BLOOD GLUCOSE T.....	119	ULTIGUARD SAFEPACK/MICRO.....	173
TRUETRACK SMART SYSTEM.....	172	ULTIGUARD SAFEPACK/MINI P.....	174
TRUETRACK TEST.....	119	ULTIGUARD SAFEPACK/SHORT.....	174
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TRULICITY.....	32	ULTIGUARD SAFEPACK/TINY P.....	174
TRUMENBA.....	14	ULTIGUARD SAFEPACK INSULI.....	173
TRUQAP.....	23	ULTIGUARD SAFEPACK MINI P.....	173
TRUSTEX/RIA LUBRICATED.....	172	ULTIGUARD SAFEPACK PEN NE.....	173
TRUSTEX/RIA LUBRICATED/SP.....	172	ULTI-LANCE AUTOMATIC/ CLE.....	172
TRUSTEX/RIA LUBRICATED SP.....	172	ULTILET CLASSIC LANCETS.....	174
TRUSTEX/RIA NON-LUBRICATE.....	172	ULTILET LANCETS.....	174
TRUSTEX COLOR CONDOMS + L.....	172	ULTILET LANCETS 33G.....	174
TRUSTEX LUBRICATED.....	172	ULTILET PEN NEEDLE 29GX12.....	174
TRUSTEX LUBRICATED/RIBBED.....	172	ULTILET PEN NEEDLE 31GX5M.....	174
TRUSTEX LUBRICATED/SPERMI.....	172	ULTILET PEN NEEDLE 31GX8M.....	174
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TRUSTEX NON-LUBRICATED.....	172	ULTILET SAFETY LANCETS 23.....	174
TRUSTEX WITH NONOXYNOL-9/.....	172	ULTILET SHORT PEN NEEDLES.....	174
TRUVADA.....	9	ULTRACARE INSULIN SYRINGE.....	175
TUKYSA.....	23	ULTRACARE PEN NEEDLES/31G.....	175
TURALIO.....	23	ULTRACARE PEN NEEDLES/32G.....	175
TWINRIX.....	14	ULTRACARE PEN NEEDLES/33G.....	175
TWIST TOP LANCETS 30G.....	172	ULTRA COMFORT INSULIN SYR.....	174
TYBLUME.....	29	ULTRA FLO INSULIN PEN NEE.....	174
TYBOST.....	9	ULTRA FLO INSULIN SYRINGE.....	174
TYENNE.....	81	ULTRA INSULIN SYRINGE/U-1.....	175
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TYMLOS.....	39	ULTRA-THIN II INSULIN SYR.....	175
TYRVAYA.....	103	ULTRA-THIN II LANCETS 28G.....	175
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TYVASO DPI TITRATION KIT.....	49	ULTRA-THIN II PEN NEEDLES.....	175
TYVASO REFILL KIT.....	49	ULTRA THIN LANCETS 28G.....	175
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ULTICARE INSULIN SYRINGE/.....	172	UNIFINE PENTIPS 31GX5MM.....	176
ULTICARE MICRO PEN NEEDLE.....	173	UNIFINE PENTIPS 31GX6MM.....	176
ULTICARE MINI PEN NEEDLES.....	173	UNIFINE PENTIPS 31GX8MM.....	176
ULTICARE MINI SAFETY PEN.....	173	UNIFINE PENTIPS 32GX4MM.....	176
ULTICARE ORIGINAL PEN NEE.....	173	UNIFINE PENTIPS 32GX6MM.....	176
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		UNIFINE PENTIPS 29GX12MM.....	176
		UNIFINE PENTIPS 31G X 6MM.....	176

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UNIFINE PENTIPS 31G X 8MM.....	176	<b>v</b>	
UNIFINE PENTIPS PLUS/30G.....	176		
UNIFINE PENTIPS PLUS 33G.....	175		<b>valacyclovir hcl tab 500 mg, 1 gm..... 9</b>
UNIFINE PENTIPS PLUS 29GX.....	175		VALCHLOR..... 110
UNIFINE PENTIPS PLUS 31GX.....	175		<b>valganciclovir hcl for soln 50 mg/ml (base equiv)..... 9</b>
UNIFINE PENTIPS PLUS 32GX.....	175		<b>valganciclovir hcl tab 450 mg (base equivalent)..... 9</b>
UNIFINE PENTIPS PLUS 33GX.....	176		<b>valproate sodium oral soln 250 mg/5ml (base</b>
UNIFINE PROTECT SAFETY PE.....	176		<b>equiv)..... 87</b>
UNIFINE SAFECONTROL PEN N.....	176		<b>valproic acid cap 250 mg..... 87</b>
UNIFINE ULTRA PEN NEEDLE/.....	176		<b>valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5</b>
UNILET COMFORTOUCH LANCET.....	176		<b>mg, 160-25 mg, 320-12.5 mg, 320-25 mg..... 45</b>
UNILET EXCELITE.....	177		<b>valsartan tab 320 mg..... 45</b>
UNILET EXCELITE II.....	177		<b>valsartan tab 40 mg, 80 mg, 160 mg..... 45</b>
UNILET G.P. LANCET.....	177		VALTOCO 5 MG DOSE..... 87
UNILET G.P. SUPERLITE LAN.....	177		VALTOCO 10 MG DOSE..... 87
UNILET GP 28 ULTRA THIN.....	177		VALTOCO 15 MG DOSE..... 87
UNILET LANCET.....	177		VALTOCO 20 MG DOSE..... 87
UNILET LANCETS MICRO-THIN.....	177		VALUE HEALTH INSULIN SYRI..... 178
UNILET LANCETS SUPER-THIN.....	177		VALUE PLUS LANCETS STANDA..... 178
UNILET LANCETS ULTRA-THIN.....	177		VALUE PLUS LANCETS SUPER..... 178
UNILET SUPERLITE LANCET.....	177		VALUE PLUS LANCETS THIN 2..... 178
UNISTIK 1.....	177		VALUE PLUS LANCING DEVICE..... 178
UNISTIK 2.....	177		VALUMARK LANCET SUPER THI..... 178
UNISTIK 3.....	177		VALUMARK LANCET ULTRA THI..... 178
UNISTIK 2 COMFORT.....	177		VALUMARK PEN NEEDLES 31G..... 178
UNISTIK 3 COMFORT.....	177		VALUMARK PEN NEEDLES 29GX..... 178
UNISTIK CZT COMFORT.....	177		VANOCOCIN..... 12
UNISTIK CZT NORMAL.....	177		<b>vancomycin hcl cap 125 mg (base equivalent)..... 12</b>
UNISTIK 2 EXTRA.....	177		<b>vancomycin hcl cap 250 mg (base equivalent)..... 12</b>
UNISTIK 3 EXTRA.....	177		<b>vancomycin hcl for oral soln 25 mg/ml (base</b>
UNISTIK 3 GENTLE.....	177		<b>equivalent)..... 12</b>
UNISTIK 2 NEONATAL.....	177		<b>vancomycin hcl for oral soln 50 mg/ml (base</b>
UNISTIK 3 NEONATAL.....	177		<b>equivalent)..... 12</b>
UNISTIK NORMAL.....	177		VANDAZOLE..... 61
UNISTIK 2 NORMAL.....	177		VANFLYTA..... 24
UNISTIK 3 NORMAL.....	177		VANISHPOINT INSULIN SYRIN..... 178
UNISTIK PRO SAFETY LANCET.....	177		VANISHPOINT SAFETY SYRING..... 178
UNISTIK SAFETY LANCETS 28.....	177		VANISHPOINT TUBERCULIN SY..... 178
UNISTIK SAFETY LANCETS 30.....	177		VAQTA..... 14
UNISTIK 2 SUPER.....	177		<b>varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base</b>
UNISTIK TOUCH SAFETY LANC.....	177		<b>equiv)..... 74</b>
UNISTRIP1 GENERIC.....	119		<b>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start</b>
UNIVERSAL 1 LANCETS/33G/M.....	177		<b>pack..... 75</b>
UNIVERSAL 1 LANCETS THIN.....	177		VARIVAX..... 14
UNIVERSAL 1 LANCETS ULTRA.....	177		VARUBI..... 57
UPTRAVI.....	49		VASCEPA..... 48
UPTRAVI TITRATION PACK.....	49		VAXCHORA..... 15
UROCIT-K 10.....	62		VAXELIS..... 15
UROCIT-K 15.....	62		VAXNEUVANCE..... 15
<b>ursodiol cap 300 mg..... 59</b>			VCF VAGINAL CONTRACEPTIVE..... 61
<b>ursodiol tab 250 mg..... 59</b>			VECAMYL..... 45
<b>ursodiol tab 500 mg..... 59</b>			VELIVET..... 29
UZEDY.....	68		VELPHORO..... 59

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VELTASSA.....	182	VIVAGUARD SAFETY LANCETS/.....	179
VEMLIDY.....	9	VIVITROL.....	111
VENCLEXTA.....	24	VIVJOA.....	5
VENCLEXTA STARTING PACK.....	24	VIVOTIF.....	15
<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent).....</b>	<b>64</b>	VIZIMPRO.....	24
<b>venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent).....</b>	<b>65</b>	VONJO.....	24
VENTAVIS.....	49	VONVENDI.....	98
VENTOLIN HFA.....	54	VORANIGO.....	24
<b>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg.....</b>	<b>42</b>	<b>voriconazole for susp 40 mg/ml.....</b>	<b>5</b>
VERAPAMIL HCL ER.....	42	<b>voriconazole tab 50 mg, 200 mg.....</b>	<b>5</b>
VERAPAMIL HCL SR.....	42	VOSEVI.....	9
<b>verapamil hcl tab er 120 mg, 180 mg, 240 mg.....</b>	<b>42</b>	VOTRIENT.....	24
<b>verapamil hcl tab 40 mg, 80 mg, 120 mg.....</b>	<b>42</b>	VOWST.....	59
VERAPAMIL HYDROCHLORIDE E.....	42	VOXZOGO.....	39
VERASENS BLOOD GLUCOSE MO.....	178	VOYDEYA.....	98
VERASENS BLOOD GLUCOSE TE.....	119	VP INSULIN SYRINGE/U-100/.....	179
VERELAN.....	42	VRAYLAR.....	68
VERIFINE INSULIN PEN NEED.....	178	VYNDAMAX.....	49
VERIFINE INSULIN SYRINGE.....	178	VYNDAQEL.....	49
VERIFINE INSULIN SYRINGE/.....	178	VYVANSE.....	71
VERIFINE PLUS INSULIN PEN.....	179		
VERIFINE PLUS PEN NEEDLE/.....	179	<b>W</b>	
VERIFINE SAFETY LANCET MI.....	179	WAINUA.....	75
VERIFINE UNIVERSAL LANCET.....	179	WAKIX.....	71
VERQUVO.....	49	WALGREENS COMFORT ASSURED.....	179
VERSACLOZ.....	68	WALGREENS LANCETS.....	179
VERZENIO.....	24	WALGREENS THIN LANCETS.....	179
VESICARE.....	60	WALGREENS ULTRA THIN LANC.....	179
VFEND.....	5	<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg.....</b>	<b>95</b>
V-GO 20.....	177	<b>water for irrigation, sterile irrigation soln.....</b>	<b>182</b>
V-GO 30.....	177	WAVESENSE AMP.....	179
V-GO 40.....	177	WEGMANS UNIFINE PENTIPS P.....	179
VIBERZI.....	59	WELIREG.....	24
<b>vigabatrin powd pack 500 mg.....</b>	<b>87</b>	WESCAP-C DHA.....	92
<b>vigabatrin tab 500 mg.....</b>	<b>87</b>	WESNATAL DHA COMPLETE.....	92
VIJOICE.....	182	WESTAB PLUS.....	92
<b>vilazodone hcl tab 10 mg, 20 mg, 40 mg.....</b>	<b>65</b>	WIDE-SEAL SILICONE DIAPHR.....	179
VIMPAT.....	87	WILATE.....	99
VIRACEPT.....	9	WINREVAIR.....	50
VIREAD.....	9		
VISTOGARD.....	111	<b>X</b>	
VITATHELY/GINGER.....	92	XALKORI.....	24
VITRAKVI.....	24	XARELTO.....	95
VIVAGUARD INO BLOOD GLUCO.....	119	XARELTO STARTER PACK.....	95
VIVAGUARD INO SMART BLOOD.....	179	XCOPRI.....	87
VIVAGUARD LANCETS.....	179	XELJANZ.....	81
VIVAGUARD LANCETS 30G.....	179	XELJANZ XR.....	81
VIVAGUARD LANCING DEVICE.....	179	XERMELO.....	59
VIVAGUARD SAFETY LANCETS.....	179	XHANCE.....	50
		XIFAXAN.....	12
		XIGDUO XR.....	32
		XIIDRA.....	103

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XOFLUZA.....	9	<b>ziprasidone mesylate for inj 20 mg (base equivalent).....</b>	<b>68</b>
XOLAIR.....	54	ZIRGAN.....	103
XOLREMDI.....	94	ZITHROMAX.....	2
XOSPATA.....	24	ZOKINVY.....	182
XPOVIO.....	24	ZOLINZA.....	25
XPOVIO 60 MG TWICE WEEKLY.....	24	ZOLMITRIPTAN.....	82
XPOVIO 80 MG TWICE WEEKLY.....	24	<b>zolmitriptan nasal spray 5 mg/spray unit.....</b>	<b>82</b>
XTAMPZA ER.....	78	<b>zolmitriptan orally disintegrating tab 2.5 mg, 5 mg.....</b>	<b>82</b>
XTANDI.....	24	<b>zolmitriptan tab 2.5 mg, 5 mg.....</b>	<b>82</b>
XULTOPHY 100/3.6.....	32	ZOLOFT.....	65
XURIDEN.....	39	<b>zolpidem tartrate tab er 6.25 mg, 12.5 mg.....</b>	<b>69</b>
XYNTHA.....	99	<b>zolpidem tartrate tab 5 mg, 10 mg.....</b>	<b>69</b>
XYNTHA SOLOFUSE.....	99	ZOMIG.....	82
XYWAV.....	75	ZONEGRAN.....	87
<b>Y</b>		<b>zonisamide cap 50 mg.....</b>	<b>87</b>
YALE NEEDLES 21G X 1-1/4".....	179	<b>zonisamide cap 25 mg, 100 mg.....</b>	<b>87</b>
YASMIN 28.....	30	ZONTIVITY.....	99
YAZ.....	30	ZORTRESS.....	182
YONSA.....	24	ZTALMY.....	87
<b>Z</b>		ZUBSOLV.....	78
<b>zafirlukast tab 10 mg, 20 mg.....</b>	<b>54</b>	ZURZUVAE.....	65
<b>zaleplon cap 5 mg, 10 mg.....</b>	<b>69</b>	ZYDELIG.....	25
ZANAFLEX.....	90	ZYKADIA.....	25
ZARONTIN.....	87	ZYMFENTRA 1-PEN.....	59
ZARXIO.....	94	ZYMFENTRA 2-PEN.....	59
ZAVESCA.....	94	ZYMFENTRA 2-SYRINGE.....	59
ZEGALOGUE.....	32	ZYPREXA.....	68
ZEJULA.....	25	ZYPREXA RELPREV.....	68
ZELBORAF.....	25		
ZEMPLAR.....	39		
ZENPEP.....	57		
ZEPOSIA.....	75		
ZEPOSIA 7-DAY STARTER PAC.....	75		
ZEPOSIA STARTER KIT.....	75		
ZERVIAE.....	103		
ZEV RX INSULIN SYRINGE/0.5.....	179		
ZEV RX INSULIN SYRINGE/1ML.....	179		
ZEV RX PEN NEEDLES 31G X 5.....	179		
ZEV RX PEN NEEDLES 31G X 6.....	180		
ZEV RX PEN NEEDLES 31G X 8.....	180		
ZEV RX PEN NEEDLES 32G X 4.....	180		
ZEV RX TWIST TOP LANCETS 3.....	180		
ZIAGEN.....	9		
<b>zidovudine cap 100 mg.....</b>	<b>9</b>		
<b>zidovudine syrup 10 mg/ml.....</b>	<b>9</b>		
<b>zidovudine tab 300 mg.....</b>	<b>10</b>		
ZIEXTENZO.....	94		
ZILBRYSQ.....	99		
<b>zileuton tab er 12hr 600 mg.....</b>	<b>54</b>		
ZIMHI.....	111		
<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg.....</b>	<b>68</b>		

KEY	<b>PA</b> = Prior Authorization	<b>ST</b> = Responsible Steps
	<b>LD</b> = Limited Distribution	<b>QL</b> = Quantity Limit (Max Quantity/Time)
	<b>SP</b> = Specialty; different Specialty Tier & cost-share may apply - see endorsement	