

## قائمة المساعدة الطبية للأدوية المغطاة (الوصفات)

- (يعرف البرنامج المخصص للأسر والأطفال أيضًا ببرنامج المساعدة الطبية المدفوعة مسبقًا (PMAP))
- MinnesotaCare
- برنامج مينيسوتا كير بلس لكبار السن (MSC +)
- UCare Connect (SNBC)

وهيوستن، وإيسانت، وجاكسون، وكانديوهي، وكيتسون، وكوتشيتشينغ، ولاك كوي بارل، وليك، وليك أوف ذا وودز، ولو سويور، ولينكولن، وليون، وما هومين، ومارشال، ومارتن، وميل لاكس، وموريسون، ومور، وموراي، ونيكوليت، ونوبلز، ونورمان، وأولمستيد، وأوتر تيل، وبنينجتون، وباين، وبولك، ورامزي، وريد ليك، وريوود، ورايس، وروك، وروسو، وسكوت، وشيربورن، وسانت لويس، وستيرنز، وسويفت، وتود، وواباشا، ووادينا، وواشنطن، وواتونان، ووينونا، ورايت، وويلو ميديسين.

**برنامج UCare Connect:** أيتكين، وأنوكا، وبيكر، وبنتون، وبلو إيرث، وكارلتون، وكارفر، وكاس، وتشيبوا، وتشيساجو، وكلاي، وكوك، وكوتونوود، وكرو وينج، وداكوتا، وفاريبولت، وفيلمور، وفريبورن، وهينيبين، وهيوستن، وإيسانت، وإتاسكا، وجاكسون، وكانديوهي، وكيتسون، وكوتشيتشينغ، ولاك كوي بارل، وليك، وليك أوف ذا وودز، ولو سويور، ولينكولن، وليون، وماهونمين، ومارشال، ومارتن، وميل لاكس، وموريسون، ومور، وموراي، ونيكوليت، ونوبلز، ونورمان، وأولمستيد، وأوتر تيل، وبنينجتون، وباين، وبولك، ورامزي، وريد ليك، وريوود، ورايس، وروك، وروسو، وسكوت، وشيربورن، وسانت لويس، وستيرنز، وسويفت، وتود، ووادينا، وواشنطن

**مقاطعات العائلات والأطفال:** أيتكين، وأنوكا، وبنتون، وبلو إيرث، وكارلتون، وكارفر، وكاس، وتشيساجو، وكوك، وكرو وينج، وداكوتا، وفاريبولت، وفيلمور، وفريبورن، وهينيبين، وهيوستن، وإيسانت، وكوتشيتشينغ، وليك، وليك أوف ذا وودز، ولو سويور، ومارتن، وميل لاكس، وموريسون، ومور، وموراي، ونيكوليت، وأولمستيد، وبنينجتون، وباين، ورامزي، ورايس، وروك، وروسو، وسكوت، وشيربورن، سانت لويس، وستيرنز، وتود، ووادينا، وواشنطن، وواتونان، ووينونا، ورايت

**مقاطعات مينيسوتا كير (MinnesotaCare):** أيتكين، وأنوكا، وبنتون، وبلو إيرث، وكارلتون، وكارفر، وكاس، وتشيساجو، وكوك، وكرو وينج، وداكوتا، وفاريبولت، وفيلمور، وفريبورن، وهينيبين، وهيوستن، وإيسانت، وكوتشيتشينغ، وليك، وليك أوف ذا وودز، ولو سويور، ومارتن، وميل لاكس، وموريسون، ومور، وموراي، ونيكوليت، وأولمستيد، وبنينجتون، وباين، ورامزي، ورايس، وروك، وروسو، وسكوت، وشيربورن، سانت لويس، وستيرنز، وتود، ووادينا، وواشنطن، وواتونان، ووينونا، ورايت

**برنامج مينيسوتا كير بلس لكبار السن (MSC Plus):** أيتكين، وأنوكا، وبيكر، وبنتون، وبلو إيرث، وكارلتون، وكارفر، وكاس، وتشيبوا، وتشيساجو، وكلاي، وكوك، وكوتونوود، وكرو وينج، وداكوتا، وودج، وفاريبولت، وفيلمور، وفريبورن، وهينيبين،

كانت المعلومات الواردة في هذه القائمة من العقاقير المشمولة صحيحة اعتبارًا من 03/01/2025. للحصول على أحدث المعلومات، يُرجى زيارة [ucare.org](http://ucare.org). إذا كانت لديك أسئلة، فاتصل بخدمة عملاء UCare على الرقم المذكور في هذه الصفحة. يمكنك طلب نسخة مطبوعة من قائمة Medical Assistance للأدوية المشمولة بالتغطية في أي وقت.

**خدمة عملاء UCare:** العائلات والأطفال (PMAP)، وبرنامج MinnesotaCare، وبرنامج مينيسوتا كير بلس لكبار السن (+MSC):

1-800-203-7225 أو 612-676-3200 (هذه المكالمات مجانية). UCare Connect: 612-676-3395 أو 1-877-903-0061 (هذه

المكالمات مجانية). رقم الهاتف النصي: 612-676-6810 أو 1-800-688-2534 (هذه المكالمات مجانية). ساعات العمل: من الساعة 8 صباحًا

حتى الساعة 5 مساءً، من الاثنين إلى الجمعة. هذه المكالمات مجانية. لمزيد من المعلومات، تفضل بزيارة الموقع الإلكتروني [ucare.org](http://ucare.org).

UCare, 500 Stinson Blvd. NE, Minneapolis, MN 55413-2615

**يُرجى القراءة: تحتوي هذه الوثيقة على معلومات حول الأدوية التي نغطيها في هذه الخطة. يجب على الأعضاء استخدام صيدليات شبكة UCare للحصول على إعانات الأدوية المصروفة بموجب وصفات.**

هذه القائمة عرضة للتغيير وليست شاملة لجميع الأدوية. تخضع الوثيقة للوائح والقواعد الخاصة بالدولة، بما في ذلك، على سبيل المثال لا الحصر، تلك المتعلقة بالاستعاضة عن الأدوية التي تحمل أسماء تجارية بأدوية جنيسة وجداول المواد الخاضعة للرقابة وتفضيل العلامات التجارية والأدوية الجنيسة الإلزامية كلما كان ذلك ممكناً.

ملاحظة إلى الأعضاء الحاليين: قد تغيرت قائمة الأدوية المشمولة بالتغطية هذه منذ العام الماضي وقد تتغير على مدار العام. يُرجى مراجعة هذه الوثيقة للتأكد من أنها لا تزال تحتوي على قائمة بالأدوية التي نتناولها. يُرجى الاتصال بخدمات عملاء UCare لطرح الأسئلة: العائلات والأطفال (PMAP)، وبرنامج MinnesotaCare، وبرنامج مينيسوتا كير بلس لكبار السن 612-676-3200 (MSC+) أو 1-800-203-7225 (هذه المكالمات مجانية). UCare Connect: 612-676-3395 أو 1-877-903-0061 (هذه المكالمات مجانية). لمستخدمي الهواتف النصية: 612-676-6810 أو 1-800-688-2534 (هذه المكالمات مجانية). ساعات العمل: من الساعة 8 صباحاً حتى الساعة 5 مساءً، من الاثنين إلى الجمعة. هذه المكالمات مجانية.

يمكنك أيضاً العثور على تحديثات لهذه القائمة في [ucare.org](http://ucare.org)

إذا كان لديك برنامج الرعاية الطبية، فستحتاج إلى الحصول على معظم أدويةك الموصوفة من خلال برنامج الأدوية الموصوفة من Medicare (الجزء دال). يجب أن تكون مسجلاً في خطة الأدوية الطبية الموصوفة من Medicare للحصول على إعانات الأدوية الطبية الموصوفة.



## Civil Rights Notice

**Discrimination is against the law. UCare** does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

UCare

Attn: Appeals and Grievances

PO Box 52

Minneapolis, MN 55440-0052

Toll Free: 1-800-203-7225

TTY: 1-800-688-2534

Fax: 612-884-2021

Email: [cag@ucare.org](mailto:cag@ucare.org)

**Auxiliary Aids and Services: UCare** provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

**Language Assistance Services: UCare** provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

## Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You may also contact any of the following agencies directly to file a discrimination complaint.

### U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the OCR directly to file a complaint:

Office for Civil Rights  
U.S. Department of Health and Human Services  
Midwest Region  
233 N. Michigan Avenue, Suite 240  
Chicago, IL 60601  
Customer Response Center: Toll-free: 800-368-1019  
TDD Toll-free: 800-537-7697  
Email: [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov)

### **Minnesota Department of Human Rights (MDHR)**

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights  
540 Fairview Avenue North, Suite 201  
St. Paul, MN 55104  
651-539-1100 (voice)  
800-657-3704 (toll-free)  
711 or 800-627-3529 (MN Relay)  
651-296-9042 (fax)  
[Info.MDHR@state.mn.us](mailto:Info.MDHR@state.mn.us) (email)

### **Minnesota Department of Human Services (DHS)**

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator  
Minnesota Department of Human Services  
Equal Opportunity and Access Division  
P.O. Box 64997  
St. Paul, MN 55164-0997  
651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to go to your primary care provider prior to the referral.

## جدول المحتويات

8	ما هي قائمة الأدوية المشمولة بالتغطية؟
8	هل تتغير قائمة الأدوية المشمولة بالتغطية؟
8	كيف يتم إدراج الأدوية في قائمة الأدوية المشمولة؟
9	ما قائمة الأدوية المفضلة؟
9	ما هي الأدوية الجنسية أو المماثلة الحيوية؟
9	ما الأدوية التي تصرف دون وصفة طبية؟
10	ماذا لو لم يكن الدواء مدرجًا على قائمة الأدوية المشمولة بالتغطية؟
11	هل هناك أي قيود على تغطيتي؟
11	هل يمكنني طلب استثناء من قيود التغطية؟
12	ماذا ستكلف الوصفة الطبية؟
12	مفتاح قائمة الأدوية (الوصفات).
15	قائمة الأدوية (الوصفات).
187	فهرس الأدوية.

## ما هي قائمة الأدوية المشمولة بالتغطية؟

تتضمن قائمة الأدوية المشمولة بالتغطية الأدوية الموصوفة طبيًا التي تغطيها UCare. يتم اختيار الأدوية المدرجة على القائمة من قبل UCare بمساعدة فريق من الأطباء والصيدال. ستغطي UCare الأدوية المدرجة في قائمة الأدوية المشمولة عمومًا طالما أن الدواء ضروري طبيًا، وسيتم صرف الوصفة الطبية في صيدلية شبكة UCare كما سيتم اتباع متطلبات أخرى تتعلق بالدواء. تتوفر معظم الأدوية وبعض الإمدادات حتى إمدادات تكفي لمدة 30 يومًا. تتوفر بعض الأدوية التي تتناولها بشكل منتظم للحالات المزمنة أو طويلة الأجل حتى إمدادات تكفي لمدة 90 يومًا ويتم تحديدها في قائمة الأدوية المشمولة بالتغطية هذه على أنها تكفي لمدة 90 يومًا.

## هل تتغير قائمة الأدوية المشمولة بالتغطية؟

يمكن أن تتغير قائمة UCare للأدوية المشمولة بالتغطية خلال السنة التقييمية. إذا كانت التغييرات تؤثر على تغطية الدواء الذي تتناوله، فإن UCare سوف يبذل جهودًا معقولة للاتصال بك وبالوصف لإخباركم بالتغيير. ستعلمك UCare أيضًا بالأدوية البديلة التي يتم تغطيتها.

أمثلة على بعض التغييرات التي قد تحدث هي:

- لم يعد الدواء الذي تتناوله مفضلًا (راجع "ما هي قائمة الأدوية المفضلة؟" في القسم التالي).
- يتم إزالة دواء من قائمة الأدوية المشمولة بالتغطية لأسباب تتعلق بالسلامة.
- لقد تغيرت متطلبات التصريح المسبق. (انتقل إلى "هل هناك أي قيود على تغطيتي؟")

## كيف يتم إدراج الأدوية في قائمة الأدوية المشمولة؟

هناك طريقتان للعثور على الأدوية الموصوفة طبيًا في الوصفات. يمكنك البحث حسب الحالة الطبية المرتبطة بدوائك أو حسب القائمة الأبجدية.

### البحث حسب الحالة الطبية

تبدأ الأدوية المدرجة حسب الحالة الطبية في الصفحة 1. يتم تجميع الأدوية الموجودة في هذه الوصفات في فئات وفقًا لنوع الحالات الطبية التي تستخدم لعلاجها. إذا كنت تعرف سبب استخدام دوائك، فابحث عن الفئة في القائمة التي تبدأ في الصفحة 1. ثم ابحث تحت اسم فئة دوائك.

### البحث حسب القائمة الأبجدية

إذا لم تكن متأكدًا من الفئة التي يجب البحث تحتها، فيمكنك البحث عن دوائك في الفهرس. يقدم الفهرس قائمة أبجدية بجميع الأدوية المدرجة في الوصفات. يرد كل من اسم العلامة التجارية والأدوية الجينية في الفهرس. ابحث في الفهرس واعثر على دوائك. بجانب دوائك، ستري رقم الصفحة حيث يمكنك العثور على معلومات التغطية داخل الوصفات.



## ما قائمة الأدوية المفضلة؟

في ولاية مينيسوتا، يُطلب من جميع الخطط الصحية استخدام قائمة الأدوية المفضلة (PDL) التابعة لوزارة الخدمات الإنسانية بولاية مينيسوتا. تنشئ إدارة الخدمات الإنسانية قائمة الأدوية المفضلة بالتشاور مع لجنة صيغ الأدوية، للسماح للراصفين والأعضاء بمعرفة الأدوية أو فئات الأدوية التي تكون فعالة من حيث التكلفة. وفي العموم، فإن الأدوية "المفضلة" أكثر فعالية من حيث التكلفة والأدوية "غير المفضلة" أقل فعالية من حيث التكلفة. الأدوية المفضلة متاحة للأعضاء مع قيود أقل. تتطلب الأدوية غير المفضلة تصريحاً مسبقاً. للحصول على الدواء غير المفضل، يجب أن يحصل طبيبك أو مقدم الرعاية الصحية على إذن مسبق. يتم تضمين قائمة الأدوية المفضلة كجزء من قائمة UCare للأدوية المغطاة. تتضمن قائمة UCare الكاملة للأدوية المغطاة أدوية أخرى بالإضافة إلى تلك الموجودة في قائمة الأدوية المفضلة. تتوفر قائمة الأدوية المفضلة على موقع إدارة الخدمات الإنسانية على العنوان التالي <http://minnesota.magellanmedicaid.com/pdl.asp>.

## ما هي الأدوية الجنيصة أو المماثلة الحيوية؟

وافقت إدارة الأغذية والعقاقير (FDA) على دواء جنيصي والذي يحتوي على نفس المكونات النشطة مثل الدواء الذي يحمل اسم العلامة التجارية. وينتج نفس التأثير السريري مثل الدواء الذي يحمل اسم العلامة التجارية.

الدواء المماثل الحيوي هو دواء بيولوجي معتمد من إدارة الأغذية والعقاقير (غالبًا ما يكون دواء يُصرف بوصفة طبية ويؤخذ عن طريق الحقن) والذي يشبه إلى حد كبير منتجًا بيولوجيًا معتمدًا بالفعل. لا توجد فروق ذات مغزى سريري من حيث السلامة والفعالية.

يعني استبدال الأدوية الجنيصة أو الأدوية المماثلة الحيوية إصدار نسخة من الأدوية الجنيصة أو نسخة الأدوية المماثلة الحيوية من الأدوية التي يتم تقديمها بدلاً من الأدوية التي تحمل اسم علامة تجارية أو نسخة من الأدوية غير المماثلة الحيوية من الدواء.

ستغطي UCare الأدوية التي تحمل اسم علامة تجارية أو نسخة من الأدوية غير المماثلة الحيوية من الدواء فقط عندما:

1. يبلغ واصف الدواء UCare كتابياً أن الأدوية التي تحمل اسم علامة تجارية أو نسخة من الأدوية غير المماثلة الحيوية من الدواء ضرورية طبيًا؛ أو
2. أو قد تفضل UCare الاستغناء عن بعض النسخ من الأدوية التي تحمل اسم علامة تجارية على نسخة الأدوية الجنيصة أو الأدوية غير المماثلة الحيوية على نسخة الأدوية المماثلة الحيوية من الدواء؛ أو
3. أو يتطلب قانون مينيسوتا الاستغناء عن الأدوية التي تحمل اسم العلامة التجارية أو النسخة غير المماثلة الحيوية من الدواء.

وضمن قائمة الأدوية المغطاة، يتم رسمة الأدوية التي تحمل اسم العلامة التجارية (على سبيل المثال EPIPEN)، كما يتم إدراج الأدوية التي تحمل علامة تجارية بخط مائل أدنى (على سبيل المثال قرص السيرتالين).

## ما الأدوية التي تصرف دون وصفة طبية؟

يُشار إلى الأدوية والمنتجات المتاحة للشراء دون وصفة طبية على أنها دون وصفة طبية (OTC). على الرغم من أن منتج دون وصفة طبية متاح بدون وصفة طبية، إذا كتب الطبيب وصفة طبية لمنتج دون وصفة طبية، فقد تغطيه شركة Ucare. يتم إدراج الأدوية والمنتجات التي تصرف دون وصفة طبية ضمن قائمة الأدوية المشمولة بالتغطية بعد الفهرس في قائمة أدوية منفصلة تصرف دون وصفة طبية (OTC).

## ما هي الأدوية المتخصصة؟

تستخدم الأدوية المتخصصة من قبل الذين يعانون من أمراض معقدة أو مزمنة. غالبًا ما تتطلب هذه الأدوية مناولة أو صرفًا أو مراقبة خاصة من قبل صيدلي مدرب تدريبًا خاصًا.

إذا تم وصف دواء لك موجود على قائمة الأدوية المتخصصة UCare، فسيحتاج الوصف الخاص بك إلى إرسال الوصفة الطبية إلى صيدلية UCare المتخصصة.

اسم صيدلية التخصص: صيدلية Fairview التخصصية

الهاتف ورقم الهاتف النصي: 612-672-5260 أو 1-800-595-7140 (هذه المكالمات مجانية) ولمستخدمي الهواتف النصية الاتصال بمركز التابع الوطني على الرقم 711 وطلب الرقم 1-800-595-7140 (هذه المكالمات مجانية).

فاكس: 1-866-347-4939

ساعات العمل: 24 ساعة في اليوم، سبعة أيام في الأسبوع

ستحتاج أيضًا إلى الاتصال بالصيدلية المتخصصة على الرقم 612-672-5260 أو 1-800-595-7140 (هذه المكالمات مجانية)، اتصل على رقم الهاتف التخصصي بمركز التابع الوطني على 711 واطلب الرقم 1-800-595-7140 (هذا المكالمات مجانية)، لإنشاء حساب. ستحتاج إلى الحصول على بطاقة تعريف عضو UCare عند الاتصال بالصيدلية المتخصصة.

## ماذا لو لم يكن الدواء مدرجًا على قائمة الأدوية المشمولة بالتغطية؟

لا تتم تغطية جميع الأدوية. إذا لم يكن الدواء الذي تريد تناوله غير مدرج في قائمة الأدوية المشمولة بالتغطية، فيرجى الاتصال بخدمات عملاء UCare للعائلات والأطفال (PMAP)، وبرنامج MinnesotaCare، وبرنامج مينيسوتا كير بلس لكبار السن (+MSC): 612-676-3200 أو 1-800-203-7225 (هذه المكالمات مجانية). UCare Connect: 612-676-3395 أو 1-877-903-0061 (هذه المكالمات مجانية). لمستخدمي الهواتف النصية: 612-676-6810 أو 1-800-688-2534 (هذه المكالمات مجانية)، واسأل عما إذا كان الدواء مشمولًا بالتغطية. إذا لم يكن كذلك، فهو يعتبر دواء غير مدرج في الوصفات.

إذا كنت بحاجة إلى دواء غير مدرج في قائمة الأدوية المشمولة بالتغطية،

- يمكنك أن تسأل مقدم الرعاية الصحية الخاص بك إذا كان هناك دواء آخر مشمول بالتغطية مناسب لك.
- يمكنك أنت و/أو مقدم الرعاية الصحية الخاص بك أن تطلب من UCare إجراء "استثناء" وتغطية الدواء لك أو إزالة القيود أو الحدود. إذا تمت الموافقة على طلب الاستثناء الخاص بك، فسيتم تغطية الدواء على مستوى الأدوية المماثلة الحيوية أو الأدوية التي تحمل اسم العلامة التجارية المنخفضة.

بشكل عام، ستوافق UCare فقط على طلب مقدم الرعاية الصحية الخاص بك للحصول على استثناء الوصفات إذا كان الدواء البديل المدرج في قائمة UCare للأدوية المشمولة بالتغطية غير فعال في علاج حالتك و/أو قد يسبب لك آثارًا طبية ضارة.

إذا وصف مقدم الرعاية الصحية الخاص بك دواءً غير موجود في قائمتنا للأدوية المشمولة بالتغطية أو دواء يتطلب ترخيصًا مسبقًا، فيجب على مقدم الرعاية الصحية الخاص بك الاتصال بـ Navitus Health Solutions أو زيارة الموقع الإلكتروني لمزود الخدمة الخاص بنا لإكمال نموذج الطلب. قد يجد الأعضاء أيضًا المزيد من المعلومات على [ucare.org](http://ucare.org). يرجى الاتصال بخدمات عملاء UCare على الرقم المذكور على الغطاء الأمامي للحصول على المساعدة.

## هل هناك أي قيود على تغطيتي؟

قد يكون لبعض الأدوية المشمولة متطلبات إضافية أو حدود للتغطية. قد تتضمن هذه المتطلبات والحدود ما يلي:

- **التصريح المسبق:** تطلب UCare منك أو من طبيبك أو مقدم الرعاية الصحية الحصول على تصريح مسبق لبعض الأدوية. وهذا يعني أنك ستحتاج إلى الحصول على موافقة UCare قبل ملء الوصفة الطبية الخاصة بك. قد لا تغطي UCare الدواء، إذا لم تحصل على الموافقة.
- **حدود الكمية:** بالنسبة لبعض الأدوية، تحد UCare من كمية الدواء التي سنغطيها.
- **شروط السن:** بعض الأدوية لها شروط السن. قد تكون هناك حاجة إلى تصريح مسبق حسب سنك والأدوية المحددة الموصوفة.

من خلال البحث في هذه القائمة من الأدوية المشمولة بالتغطية، يمكنك معرفة ما إذا كان الدواء الخاص بك يتطلب تصريحاً مسبقاً أو لديه حدود للكمية أو العمر المطلوب. يمكن إجراء استثناء من تقييد أو حد الدواء إذا قدم طبيبك بياناً أو وثائق تدعم الطلب. انتقل إلى الأدوية الموصوفة طبياً في القسم 7: الخدمات المشمولة بالتغطية في دليل الأعضاء لمزيد من المعلومات. يمكنك أيضاً الحصول على مزيد من المعلومات حول القيود المطبقة على الأدوية المشمولة بالتغطية المحددة عن طريق الاتصال بخدمة العملاء UCare أو العائلات والأطفال (PMAP)، وبرنامج MinnesotaCare، وبرنامج مينيسوتا كير بلس لكبار السن (+MSC): 612-676-3200 أو 1-800-203-7225 (هذه المكالمات مجانية). UCare Connect: 612-676-612-3395 أو 1-877-903-0061 (هذه المكالمات مجانية). لمستخدمي الهواتف النصية: 612-676-6810 أو 1-800-688-2534 (هذه المكالمات مجانية) أو عن طريق زيارة موقعنا على الإنترنت على [ucare.org](http://ucare.org). انتقل أيضاً إلى "هل يمكنني طلب استثناء من قيود التغطية؟"

- **الأدوية المستبعدة:** وتستبعد بعض الأدوية من قائمة العقاقير المشمولة بالتغطية. وهذا يعني أنها غير مشمولة بالتغطية. وتشمل الأدوية المستبعدة ما يلي:
  - الأدوية المستخدمة لعلاج الضعف الجنسي أو ضعف الانتصاب
  - الأدوية المستخدمة لتعزيز الخصوبة
  - الأدوية المستخدمة لأغراض تجميلية، بما في ذلك الأدوية لعلاج تساقط الشعر
  - الأدوية المستبعدة من التغطية بموجب القانون الاتحادي أو قانون الولاية
  - الأدوية التجريبية أو الأدوية الاختبارية أو الأدوية غير المعتمدة أو المصرح بها من قبل إدارة الأغذية والعقاقير (FDA)
  - القنب الطبي

## هل يمكنني طلب استثناء من قيود التغطية؟

نعم. يمكنك أنت أو مقدم الرعاية الصحية الحصول على نموذج مينيسوتا الموحد لطلبات التصريح المسبق للأدوية الموصوفة طبياً (PA) واستثناءات الوصفات من [ucare.org](http://ucare.org) أو عن طريق الاتصال بخدمة عملاء UCare للعائلات والأطفال (PMAP)، وبرنامج MinnesotaCare، وبرنامج مينيسوتا كير بلس لكبار السن (+MSC): 612-676-3200 أو 1-800-676-3200 (هذه المكالمات مجانية). UCare Connect: 612-676-3395 أو 1-877-903-0061 (هذه المكالمات مجانية). لمستخدمي الهواتف النصية: 612-676-6810 أو 1-800-688-2534 (هذه المكالمات مجانية). يجب على موفر الخدمة إرجاع هذا النموذج إلى رقم الفاكس أو العنوان المدرج في الوثيقة. للسماح بإجراء مراجعة شاملة وضمان حصولك أنت أو مقدم الرعاية الصحية على رد في غضون 24 ساعة، يجب تقديم جميع المعلومات المطلوبة في النموذج، بما في ذلك توثيق الأدوية التي تم تجربتها وفشلت، بما في ذلك الجرعات المستخدمة وسبب الفشل (على سبيل المثال الآثار الجانبية).

## ماذا ستكلف الوصفة الطبية؟

اعتبارًا من 1 يناير 2025، لم تعد الأدوية المغطاة من برنامج المساعدة الطبية خاضعة للدفع المشترك. ليس لديك مشاركة في تكاليف الأدوية التي يغطيها برنامج المساعدة الطبية. أعضاء برنامج MinnesotaCare لديهم مدفوعات مشتركة. جميع معلومات تكاليف العلاج للوصفات الطبية مدرجة في دليل الأعضاء في القسم 6: تقاسم التكاليف. إذا كان لديك مزيد من الأسئلة، فيرجى الاتصال بخدمات عملاء UCare للعائلات والأطفال (PMAP)، وبرنامج MinnesotaCare، وبرنامج مينيسوتا كير بلس لكبار السن (+MSC): 612-676-3200 أو 1-800-203-7225 (هذه المكالمات مجانية). UCare Connect: 612-676-3395 أو 1-877-903-0061 (هذه المكالمات مجانية). لمستخدمي الهواتف النصية: 612-676-6810 أو 1-800-688-2534 (هذه المكالمات مجانية) أو عن طريق زيارة موقعنا على الإنترنت على [ucare.org](http://ucare.org).

## مفتاح قائمة الأدوية (الوصفات)

شرح حالة التغطية ومتطلباتها		
P	الأدوية المفضلة	الأدوية المفضلة
NP	تتطلب الأدوية غير المفضلة تصريحًا مسبقًا من UCare.	الأدوية غير المفضلة
SF	تقتصر أدوية الأورام على إمداد لمدة 14 أو 15 يومًا لكل عبوة لأول 90 يومًا من العلاج	تقسيم التعبئة
EDS	الأدوية التي يمكن ملؤها بإمدادات تصل إلى 90 يومًا	إمداد اليوم الممتد
MFG	<ul style="list-style-type: none"> <li>الشركة المُصنَّعة Mylan هي المفضلة.</li> <li>الشركة المُصنَّعة غير Mylan غير مفضلة</li> </ul>	قيود الشركة المُصنَّعة
OTC	الأدوية المغطاة دون وصفة طبية (دون وصفة طبية)	دون وصفة طبية
PA	الأدوية التي تتطلب موافقة UCare قبل صرف الوصفة الطبية الخاصة بك	تصريح مسبق
SP	الأدوية التي تتطلب منك صرف الوصفة الطبية الخاصة بك من خلال صيدلية Fairview المتخصصة	الأدوية المتخصصة

QL	حد الكمية	هناك حدود لكمية الدواء المشمولة لكل تعبئة
LA	وصول محدود	الأدوية المتوفرة فقط في صيدليات معينة
PV	الوقائية	الأدوية المغطاة بمبلغ 0 دولار للاستخدام الوقائي
CDS	مستلزمات الأمراض المزمنة	يدفع أعضاء MinnesotaCare حد أقصى شهري من جيبهم الخاص بقيمة \$50 للحصول على المستلزمات الطبية المستخدمة لعلاج الأمراض المزمنة.

This page intentionally left blank.

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>		
<b>AMPHETAMINES</b>		
ADDERALL XR 20 MG CAP 24H	2	PA, QL (3 EA PER DAY), NP
ADDERALL XR 25 MG CAP ER 24H, 30 MG CAP ER 24H	2	PA, QL (2 EA PER DAY), NP
ADDERALL XR 5 MG CAP ER 24H, 10 MG CAP ER 24H, 15 MG CAP ER 24H	2	PA, QL (4 EA PER DAY), NP
ADZENYS ER	2	PA, QL (48 ML PER DAY), NP
ADZENYS XR-ODT -ODT 12.5 MG TAB ER DISP, -ODT 15.7 MG TAB ER DISP, -ODT 18.8 MG TAB ER DISP	2	PA, QL (1 EA PER DAY), NP
ADZENYS XR-ODT -ODT 3.1 MG TAB ER DISP, -ODT 6.3 MG TAB ER DISP, -ODT 9.4 MG TAB ER DISP	2	PA, QL (2 EA PER DAY), NP
<i>amphet-dextroamphet 3-bead er</i>	1	PA, QL (1 EA PER 1 DAY), NP
AMPHETAMINE ER	1	PA, QL (48 ML PER DAY), NP
<i>amphetamine sulfate 10 mg tab</i>	1	PA, QL (6 EA PER DAY), NP
<i>amphetamine sulfate 5 mg tab</i>	1	PA, QL (4 EA PER DAY), NP
<i>amphetamine-dextroamphet er -20 mg cap 24h</i>	1	QL (3 EA PER DAY), P
<i>amphetamine-dextroamphet er -er 25 mg cap er, -er 30 mg cap er</i>	1	QL (2 EA PER DAY), P
<i>amphetamine-dextroamphet er -er 5 mg cap er, -er 10 mg cap er, -er 15 mg cap er</i>	1	QL (4 EA PER DAY), P
<i>amphetamine-dextroamphetamine -dextro20 mg tab</i>	1	QL (3 EA PER DAY), P
<i>amphetamine-dextroamphetamine -dextro30 mg tab</i>	1	QL (2 EA PER DAY), P
<i>amphetamine-dextroamphetamine -dextro5 mg tab, -dextro7.5 mg tab, -dextro10 mg tab, - dextro12.5 mg tab, -dextro15 mg tab</i>	1	QL (4 EA PER DAY), P
<i>dextroamphetamine sulfate 2.5 mg tab, 7.5 mg tab, 15 mg tab, 20 mg tab</i>	1	PA, QL (3 EA PER DAY), NP
<i>dextroamphetamine sulfate 30 mg tab</i>	1	PA, QL (2 EA PER DAY), NP
<i>dextroamphetamine sulfate 5 mg tab, 10 mg tab</i>	1	QL (3 EA PER DAY), P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>dextroamphetamine sulfate 5 mg/5ml solution</i>	1	PA, QL (60 ML PER DAY), NP
<i>dextroamphetamine sulfate er</i>	1	QL (4 EA PER DAY), P
DYANAVEL XR 2.5 MG/ML SUSP	2	PA, QL (48 ML PER DAY), NP
EVEKEO 10 MG TAB	2	PA, QL (6 EA PER DAY), NP
EVEKEO 5 MG TAB	2	PA, QL (4 EA PER DAY), NP
EVEKEO ODT 10 MG TAB DISP	2	PA, QL (6 EA PER DAY), NP
EVEKEO ODT 20 MG TAB DISP	2	PA, QL (3 EA PER DAY), NP
EVEKEO ODT ODT 5 MG TAB DISP, ODT 15 MG TAB DISP	2	PA, QL (4 EA PER DAY), NP
<i>lisdexamfetamine dimesylate 10 mg cap, 20 mg cap, 30 mg cap</i>	1	QL (2 EA PER DAY), P
<i>lisdexamfetamine dimesylate 10 mg chew tab, 20 mg chew tab, 30 mg chew tab</i>	1	QL (2 EA PER DAY)
<i>lisdexamfetamine dimesylate 40 mg cap, 50 mg cap, 60 mg cap, 70 mg cap</i>	1	QL (1 EA PER DAY), P
<i>lisdexamfetamine dimesylate 40 mg chew tab, 50 mg chew tab, 60 mg chew tab</i>	1	QL (1 EA PER DAY)
MYDAYIS	2	PA, QL (1 EA PER DAY), NP
<i>procentra</i>	1	PA, QL (60 ML PER DAY), NP
VYVANSE 10 MG CAP, 20 MG CAP, 30 MG CAP	1	QL (2 EA PER DAY), P
VYVANSE 10 MG CHEW TAB, 20 MG CHEW TAB, 30 MG CHEW TAB	2	PA, QL (2 EA PER DAY), NP
VYVANSE 40 MG CAP, 50 MG CAP, 60 MG CAP, 70 MG CAP	1	QL (1 EA PER DAY), P
VYVANSE 40 MG CHEW TAB, 50 MG CHEW TAB, 60 MG CHEW TAB	2	PA, QL (1 EA PER DAY), NP
XELSTRYM	2	PA, QL (1 EA PER DAY), NP
<i>zenzedi 2.5 mg tab, 5 mg tab, 7.5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab</i>	1	PA, QL (3 EA PER DAY), NP
<i>zenzedi 30 mg tab</i>	1	PA, QL (2 EA PER DAY), NP
<b>ANALEPTICS</b>		
CAFFEINE-SODIUM BENZOATE	2	



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANOREXIANTS NON-AMPHETAMINE</b>		
<i>phentermine hcl 15 mg cap, 30 mg cap, 37.5 mg cap, 37.5 mg tab</i>	1	QL (1 EA PER DAY)
<b>ANTI-OBESITY AGENTS</b>		
ORLISTAT 120 MG CAP	1	PA, QL (3 EA PER DAY), NP
SAXENDA	2	PA, QL (15 ML PER 30 DAYS), P
WEGOVY 0.25 MG/0.5ML SOLN A-INJ	2	PA, QL (2 MLPER28 DAYS; 2 FILLSPER365 DAYS), P
WEGOVY 0.5 MG/0.5ML SOLN A-INJ	2	PA, QL (2 MLPER28 DAYS; 2 FILLSPER365 DAYS), P
WEGOVY 1 MG/0.5ML SOLN A-INJ	2	PA, QL (2 MLPER28 DAYS; 2 FILLSPER365 DAYS), P
WEGOVY 1.7 MG/0.75ML SOLN -INJ, 2.4 MG/0.75ML SOLN -INJ	2	PA, QL (3 ML PER 28 DAYS), P
XENICAL	2	PA, QL (3 EA PER DAY), NP
ZEPBOUND 2.5 MG/0.5ML SOLN A-INJ, 2.5 MG/0.5ML SOLUTION	2	PA, QL (2 ML PER 28 DAYS; 2 FILLS PER 365 DAYS), NP
ZEPBOUND 5 MG/0.5ML SOLN A-INJ, 5 MG/0.5ML SOLUTION, 7.5 MG/0.5ML SOLN A-INJ, 10 MG/0.5ML SOLN A-INJ, 12.5 MG/0.5ML SOLN A-INJ, 15 MG/0.5ML SOLN A-INJ	2	PA, QL (2 ML PER 28 DAYS), NP
<b>ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS</b>		
<i>atomoxetine hcl</i>	1	EDS, P
<i>clonidine hcl er</i>	1	EDS
<i>guanfacine hcl er</i>	1	EDS, P
INTUNIV	2	PA, NP
QELBREE	2	PA, NP
STRATTERA	2	PA, NP
<b>DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)</b>		
SUNOSI	2	PA, QL (1 EA PER DAY)
<b>STIMULANTS - MISC.</b>		
APTENSIO XR	2	PA, QL (2 EA PER DAY), NP
<i>armodafinil</i>	1	QL (1 EA PER DAY)

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
AZSTARYS 26.1-5.2 MG CAP	2	PA, QL (1 EA PER DAY), NP
AZSTARYS 39.2-7.8 MG CAP	2	PA, QL (2 EA PER DAY), NP
AZSTARYS 52.3-10.4 MG CAP	2	PA, QL (3 EA PER DAY), NP
CONCERTA 18 MG TAB ER, 27 MG TAB ER, 36 MG TAB ER	2	PA, QL (2 EA PER DAY), NP
CONCERTA CONCTA 54 MG TAB	2	PA, QL (1 EA PER DAY), NP
COTEMPLA XR-ODT	2	PA, QL (2 EA PER DAY), NP
DAYTRANA	2	PA, QL (1 EA PER DAY), NP
<i>dexmethylphenidate hcl</i>	1	QL (2 EA PER DAY), P
<i>dexmethylphenidate hcl er er 25 mg cap er, er 30 mg cap er, er 35 mg cap er, er 40 mg cap er</i>	1	QL (1 EA PER DAY), P
<i>dexmethylphenidate hcl er er 5 mg cap er, er 10 mg cap er, er 15 mg cap er, er 20 mg cap er</i>	1	QL (2 EA PER DAY), P
FOCALIN	2	PA, QL (2 EA PER DAY), NP
FOCALIN XR 25 MG CAP ER 24H, 30 MG CAP ER 24H, 35 MG CAP ER 24H, 40 MG CAP ER 24H	2	PA, QL (1 EA PER DAY), NP
FOCALIN XR 5 MG CAP ER 24H, 10 MG CAP ER 24H, 15 MG CAP ER 24H, 20 MG CAP ER 24H	2	PA, QL (2 EA PER DAY), NP
JORNAY PM	2	PA, QL (1 EA PER DAY), NP
METHYLIN 10 MG/5ML SOLUTION	1	QL (30 ML PER DAY), P
METHYLIN 5 MG/5ML SOLUTION	1	QL (60 ML PER DAY), P
<i>methylphenidate</i>	1	PA, QL (1 EA PER DAY), NP
<i>methylphenidate hcl 10 mg chew tab</i>	1	PA, QL (6 EA PER DAY), NP
<i>methylphenidate hcl 10 mg/5ml solution</i>	1	QL (30 ML PER DAY), P
<i>methylphenidate hcl 2.5 mg chew tab, 5 mg chew tab</i>	1	PA, QL (4 EA PER DAY), NP
<i>methylphenidate hcl 5 mg tab, 10 mg tab, 20 mg tab</i>	1	QL (3 EA PER DAY), P
<i>methylphenidate hcl 5 mg/5ml solution</i>	1	QL (60 ML PER DAY), P
<i>methylphenidate hcl er (cd) er 10 mg cap er, er 20 mg cap er, er 30 mg cap er</i>	1	PA, QL (2 EA PER DAY), NP
<i>methylphenidate hcl er (cd) er 40 mg cap er, er 50 mg cap er, er 60 mg cap er</i>	1	PA, QL (1 EA PER DAY), NP
<i>methylphenidate hcl er (la) er 10 mg cap er, er 20 mg cap er, er 30 mg cap er</i>	1	PA, QL (2 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>methylphenidate hcl er (la) er 40 mg cap er, er 60 mg cap er</i>	1	PA, QL (1 EA PER DAY), NP
<i>methylphenidate hcl er (osm) 54 mg tab</i>	1	QL (1 EA PER DAY), P
<i>methylphenidate hcl er (osm) er 18 mg tab er, er 27 mg tab er, er 36 mg tab er</i>	1	QL (2 EA PER DAY), P
<i>methylphenidate hcl er (osm) methylphenidate hcl er (osm) 45 mg tab er, methylphenidate hcl er (osm) 63 mg tab er, methylphenidate hcl er (osm) 72 mg tab er</i>	1	PA, QL (1 EA PER 1 DAY), NP
<i>methylphenidate hcl er (xr)</i>	1	PA, QL (2 EA PER DAY), NP
<i>methylphenidate hcl er 10 mg tab</i>	1	QL (4 EA PER DAY), P
<i>methylphenidate hcl er 20 mg tab</i>	1	QL (3 EA PER DAY), P
METHYLPHENIDATE HCL ER METHYLPHENIDATE HCL ER 18 MG TAB ER 24H, METHYLPHENIDATE HCL ER 18 MG TAB ER, METHYLPHENIDATE HCL ER 27 MG TAB ER, METHYLPHENIDATE HCL ER 27 MG TAB ER 24H, METHYLPHENIDATE HCL ER 36 MG TAB ER 24H, METHYLPHENIDATE HCL ER 36 MG TAB ER	1	QL (2 EA PER DAY), P
METHYLPHENIDATE HCL ER METHYLPHENIDATE HCL ER 54 MG TAB ER, METHYLPHENIDATE HCL ER 54 MG TAB ER 24H	1	QL (1 EA PER DAY), P
<i>modafinil 100 mg tab, 200 mg tab</i>	1	QL (2 EA PER DAY)
QUILLICHEW ER 40 MG CH	2	PA, QL (1 EA PER DAY), NP
QUILLICHEW ER ER 20 MG, ER 30 MG	2	PA, QL (2 EA PER DAY), NP
QUILLIVANT XR	2	PA, QL (12 ML PER DAY), NP
RELEXXII	2	PA, QL (1 EA PER 1 DAY), NP
RITALIN	2	PA, QL (3 EA PER DAY), NP
RITALIN LA 10 MG CAP ER 24H, 20 MG CAP ER 24H, 30 MG CAP ER 24H	1	QL (2 EA PER DAY), P
RITALIN LA 40 MG CAP ER 24H	1	QL (1 EA PER DAY), P

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
-----------	-----------	---------------------

## ALTERNATIVE MEDICINES

### ALTERNATIVE MEDICINE - C'S

ACTIVATED CHARCOAL	2	OTC
CRANBERRY SUPPLEMENT	2	OTC
<i>cranberry supplement</i>	1	OTC, EDS

### ALTERNATIVE MEDICINE - G'S

<i>cvs glucosamine</i>	1	OTC
<i>glucosamine hcl 1500 mg tab</i>	1	OTC
<i>glucosamine sulfate</i>	1	OTC
<i>sm glucosamine hcl</i>	1	OTC

### ALTERNATIVE MEDICINE - M'S

MELATONIN	2	OTC
<i>melatonin</i>	1	OTC, EDS
<i>melatonin / pyridoxine</i>	1	OTC

### ALTERNATIVE MEDICINE COMBINATIONS

<i>glucosamine / chondroitin</i>	1	OTC
MELATONIN / PYRIDOXINE	2	OTC

## AMINOGLYCOSIDES

### AMINOGLYCOSIDES

<i>amikacin sulfate 1 gm/4ml, 500 mg/2ml</i>	1	
ARIKAYCE	2	PA, LA
BETHKIS	1	QL (8 ML PER DAY), SP, P
<i>gentamicin sulfate 10 mg/ml, 40 mg/ml</i>	1	
KITABIS PAK	1	QL (10 ML PER DAY), SP, P
<i>neomycin sulfate 500 mg tab</i>	1	
<i>paromomycin sulfate 250 mg cap</i>	1	
TOBI	2	PA, QL (10 ML PER DAY), SP, NP
TOBI PODHALER	2	PA, QL (8 EA PER DAY), SP, NP
<i>tobramycin 300 mg/4ml nebu soln</i>	1	PA, QL (8 ML PER DAY), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>tobramycin 300 mg/5ml nebu soln</i>	1	QL (10 ML PER DAY), SP, P
<i>tobramycin sulfate 1.2 gm/30ml, 80 mg/2ml</i>	1	

## **ANALGESICS - ANTI-INFLAMMATORY**

### **ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES**

ABRILADA (1 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ABRILADA (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ABRILADA (2 SYRINGE)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-AATY (1 PEN) -40 MG/0.4ML AUT-IJ KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-AATY (1 PEN) -80 MG/0.8ML AUT-IJ KIT	2	PA, QL (2 EA PER 180 DAYS), SP, NP
ADALIMUMAB-AATY (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-AATY (2 SYRINGE) - RINGE) 40 MG/0.4ML PREF KT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-ADAZ -20 MG/0.2ML SOLN PRSYR, -40 MG/0.4ML SOLN A-INJ, -40 MG/0.4ML SOLN PRSYR	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-ADAZ DLIMUMB-DZ 80 MG/0.8ML SOLN -INJ	2	PA, QL (3 EA PER 180 DAYS), SP, NP
ADALIMUMAB-ADBM (2 PEN) -40 MG/0.4ML AUT-IJ KIT	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
ADALIMUMAB-ADBM (2 PEN) -40 MG/0.8ML AUT-IJ KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-ADBM (2 SYRINGE) - 10 MG/0.2ML PREF SY KT, -20 MG/0.4ML PREF SY KT, -40 MG/0.8ML PREF SY KT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-ADBM (2 SYRINGE) - RINGE) 40 MG/0.4ML PREF KT	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
ADALIMUMAB-ADBM(CD/UC/HS STRT) -40 MG/0.4ML AUT-IJ KIT	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
ADALIMUMAB-ADBM(CD/UC/HS STRT) -40 MG/0.8ML AUT-IJ KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-ADBM(PS/UV STARTER) -40 MG/0.4ML AUT-IJ KIT	2	PA, QL (1 EA PER 6 MONTHS), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
ADALIMUMAB-ADBM(PS/UV STARTER) -40 MG/0.8ML AUT-IJ KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-FKJP (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-FKJP (2 SYRINGE)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-RYVK (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ADALIMUMAB-RYVK (2 SYRINGE)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
AMJEVITA 10 MG/0.2ML SOLN PRSYR, 20 MG/0.2ML SOLN PRSYR, 20 MG/0.4ML SOLN PRSYR, 40 MG/0.4ML SOLN A-INJ, 40 MG/0.4ML SOLN PRSYR, 40 MG/0.8ML SOLN PRSYR, 80 MG/0.8ML SOLN A-INJ	2	PA, QL (2 EA PER 28 DAYS), SP, NP
AMJEVITA 40 MG/0.8ML SOLN -INJ	2	PA, QL (1.6 ML PER 28 DAYS), SP, NP
AMJEVITA-PED 15KG TO <30KG	2	PA, QL (2 EA PER 28 DAYS), SP, NP
CYLTEZO	2	PA, QL (2 EA PER 28 DAYS), SP, NP
CYLTEZO (2 PEN)	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
CYLTEZO (2 SYRINGE)	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
CYLTEZO-CD/UC/HS STARTER -40 MG/0.4ML AUT-IJ KIT	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
CYLTEZO-CD/UC/HS STARTER -40 MG/0.8ML AUT-IJ KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
CYLTEZO-PSORIASIS STARTER	2	PA, QL (2 EA PER 28 DAYS), SP, NP
CYLTEZO-PSORIASIS/UV STARTER	2	PA, QL (1 EA PER 6 MONTHS), SP, NP
HADLIMA	2	PA, QL (2 EA PER 28 DAYS), SP, NP
HADLIMA PUSH TOUCH	2	PA, QL (2 EA PER 28 DAYS), SP, NP
HULIO	2	PA, QL (2 EA PER 28 DAYS), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
HULIO (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
HULIO (2 SYRINGE)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
HUMIRA	2	PA, QL (2 EA PER 28 DAYS), SP, P
HUMIRA (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, P
HUMIRA (2 SYRINGE) RINGE) 40 MG/0.8ML PREF KT	2	PA, QL (2 UNITS PER 28 DAYS), SP, P
HUMIRA-CD/UC/HS STARTER -40 MG/0.8ML AUT-IJ KIT	2	PA, QL (6 EA PER 180 DAYS), SP, P
HUMIRA-CD/UC/HS STARTER -80 MG/0.8ML AUT-IJ KIT	2	PA, QL (3 EA PER 180 DAYS), SP, P
HUMIRA-PED<40KG CROHNS STARTER	2	PA, QL (2 EA PER 180 DAYS), SP, P
HUMIRA-PED>/=40KG CROHNS START	2	PA, QL (3 EA PER 180 DAYS), SP, P
HUMIRA-PED>/=40KG UC STARTER	2	PA, QL (4 EA PER 180 DAYS), SP, P
HUMIRA-PS/UV/ADOL HS STARTER	2	PA, QL (4 EA PER 180 DAYS), SP, P
HUMIRA-PSORIASIS/UVEIT STARTER	2	PA, QL (3 EA PER 180 DAYS), SP, P
HYRIMOZ 10 MG/0.1 ML SOLN PRSYR, 20 MG/0.2ML SOLN PRSYR, 40 MG/0.4ML SOLN A-INJ, 40 MG/0.4ML SOLN PRSYR, 40 MG/0.8ML SOLN A-INJ, 40 MG/0.8ML SOLN PRSYR	2	PA, QL (2 EA PER 28 DAYS), SP, NP
HYRIMOZ 80 MG/0.8ML SOLN A-INJ	2	PA, QL (3 EA PER 180 DAYS), SP, NP
HYRIMOZ-CROHNS/UC STARTER	2	PA, QL (3 EA PER 180 DAYS), SP, NP
HYRIMOZ-CROHNS/UC STARTER PACK	2	PA, QL (3 EA PER 180 DAYS), SP, NP
HYRIMOZ-PED CROHNS STARTER - 80 MG/0.8ML & 40MG/0.4ML SOLN PRSYR	2	PA, QL (2 EA PER 180 DAYS), SP, NP
HYRIMOZ-PED CROHNS STARTER - 80 MG/0.8ML SOLN PRSYR	2	PA, QL (3 EA PER 180 DAYS), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
HYRIMOZ-PLAQ PSOR/UVEIT START	2	PA, QL (3 EA PER 180 DAYS), SP, NP
HYRIMOZ-PLAQUE PSORIASIS START	2	PA, QL (3 EA PER 180 DAYS), SP, NP
IDACIO 40 MG/0.8ML PEF SY KT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
IDACIO FOR CROHNS DISEASE/UC	2	PA, QL (6 EA PER 180 DAYS), SP, NP
IDACIO FOR PLAQUE PSORIASIS	2	PA, QL (4 EA PER 180 DAYS), SP, NP
SIMLANDI (1 PEN)	2	PA, QL (4 EA PER 28 DAYS), SP, NP
SIMLANDI (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
SIMLANDI (2 SYRINGE)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
SIMPONI 100 MG/ML SOLN A-INJ, 100 MG/ML SOLN PRSYR	2	PA, QL (1 ML PER 28 DAYS), SP, NP
SIMPONI 50 MG/0.5ML SOLN A-INJ, 50 MG/0.5ML SOLN PRSYR	2	PA, QL (0.5 ML PER 28 DAYS), SP, NP
SIMPONI ARIA	2	PA, SP, NP
YUFLYMA (1 PEN) 40 MG/0.4ML AUT-IJ KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
YUFLYMA (1 PEN) 80 MG/0.8ML AUT-IJ KIT	2	PA, QL (2 EA PER 180 DAYS), SP, NP
YUFLYMA (2 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
YUFLYMA 2-SYRINGE KIT	2	PA, QL (2 EA PER 28 DAYS), SP, NP
YUFLYMA-CD/UC/HS STARTER	2	PA, QL (3 EA PER 180 DAYS), SP, NP
YUSIMRY	2	PA, QL (2 EA PER 28 DAYS), SP, NP
<b>ANTIRHEUMATIC - ENZYME INHIBITORS</b>		
OLUMIANT	2	PA, QL (30 EA PER 30 DAYS), SP, NP
RINVOQ	2	PA, QL (1 EA PER DAY), SP, NP
RINVOQ LQ	2	PA, QL (30 ML PER 1 DAY), SP, NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
XELJANZ 1 MG/ML SOLUTION	2	PA, QL (10 ML PER DAY), SP, NP
XELJANZ 5 MG TAB, 10 MG TAB	2	PA, QL (2 EA PER DAY), SP, P
XELJANZ XR	2	PA, QL (1 EA PER DAY), SP, NP
<b>INTERLEUKIN-1 BLOCKERS</b>		
ARCALYST	2	PA, LA, QL (4 EA PER 28 DAYS), NP
<b>INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)</b>		
KINERET	2	PA, QL (18.76 ML PER 28 DAYS), SP, NP
<b>INTERLEUKIN-1BETA BLOCKERS</b>		
ILARIS	2	PA, LA, NP
<b>INTERLEUKIN-6 RECEPTOR INHIBITORS</b>		
ACTEMRA 162 MG/0.9ML SOLN PRSYR	2	PA, QL (1.8 ML PER 28 DAYS), SP, NP
ACTEMRA 80 MG/4ML SOLUTION, 200 MG/10ML SOLUTION, 400 MG/20ML SOLUTION	2	PA, SP, NP
ACTEMRA ACTPEN	2	PA, QL (1.8 ML PER 28 DAYS), SP, NP
KEVZARA	2	PA, QL (2.28 ML PER 28 DAYS), SP, NP
TOFIDENCE	2	PA, QL (40 ML PER 28 DAYS), NP
TYENNE 162 MG/0.9ML SOLN A-INJ, 162 MG/0.9ML SOLN PRSYR	2	PA, QL (1.8 ML PER 28 DAYS), SP, NP
TYENNE 80 MG/4ML SOLUTION, 200 MG/10ML SOLUTION, 400 MG/20ML SOLUTION	2	PA, QL (40 ML PER 28 DAYS), NP
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</b>		
ARTHROTEC	2	PA, NP
<i>cataflam</i>	1	EDS
CELEBREX	2	PA, NP
<i>celecoxib 50 mg cap, 100 mg cap, 200 mg cap, 400 mg cap</i>	1	EDS, P
DAYPRO	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>diclofenac potassium 50 mg tab</i>	1	EDS
<i>diclofenac sodium 25 mg tab dr, 50 mg tab dr, 75 mg tab dr</i>	1	EDS, P
<i>diclofenac sodium er</i>	1	EDS, P
<i>diclofenac-misoprostol</i>	1	PA, EDS, NP
<i>ec-naproxen</i>	1	P
<i>etodolac</i>	1	EDS
<i>etodolac er</i>	1	EDS
<i>fenoprofen calcium 400 mg cap, 600 mg tab</i>	1	PA, NP
<i>flurbiprofen 100 mg tab</i>	1	EDS, P
<i>ibuprofen (motrin)</i>	1	OTC, EDS, P
<i>ibuprofen-famotidine</i>	1	PA, EDS, NP
<i>indomethacin 25 mg cap, 50 mg cap</i>	1	EDS, P
KETOPROFEN 25 MG CAP	1	P
KETOPROFEN 50 MG CAP, 75 MG CAP	2	P
KETOPROFEN ER	2	PA, NP
<i>ketorolac tromethamine 10 mg tab</i>	1	P
KETOROLAC TROMETHAMINE 15.75 MG/SPRAY SOLUTION	1	PA, NP
KIPROFEN	1	P
MECLOFENAMATE SODIUM 50 MG CAP, 100 MG CAP	2	PA, NP
<i>mefenamic acid 250 mg cap</i>	1	PA, NP
<i>meloxicam 5 mg cap, 10 mg cap</i>	1	PA, NP
<i>meloxicam 7.5 mg tab, 15 mg tab</i>	1	EDS, P
MOBIC	2	PA, NP
<i>nabumetone 500 mg tab, 750 mg tab</i>	1	EDS, P
NALFON	2	PA, NP
NAPRELAN	2	PA, NP
<i>naproxen (aleve)</i>	1	PA, OTC, EDS, NP
<i>naproxen 125 mg/5ml suspension</i>	1	EDS
<i>naproxen 250 mg tab, 375 mg tab, 500 mg tab</i>	1	EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>naproxen 375 mg tab dr, 500 mg tab dr</i>	1	P
<i>naproxen dr</i>	1	P
NAPROXEN SODIUM	1	OTC, EDS, P
NAPROXEN SODIUM ER	2	PA, NP
<i>naproxen-esomeprazole mg</i>	1	PA, QL (68 UNITS PER 30 DAYS), NP
<i>oxaprozin</i>	1	PA, EDS, NP
<i>piroxicam 10 mg cap, 20 mg cap</i>	1	EDS
<i>relafen</i>	1	EDS, P
RELAFEN DS	2	PA, NP
<i>sulindac 150 mg tab, 200 mg tab</i>	1	EDS, P
ZIPSOR	2	PA, NP
ZORVOLEX	2	PA, NP

### **PHOSPHODIESTERASE 4 (PDE4) INHIBITORS**

OTEZLA 10 & 20 & 30 MG TAB THPK	2	PA, QL (55 EA PER 180 DAYS), SP, P
OTEZLA 30 MG TAB	2	PA, QL (2 EA PER DAY), SP, P
OTEZLA 4 X 10 & 51 X20 MG TAB THPK, 20 MG TAB	2	PA, QL (2 EA PER 1 DAY), SP, P

### **PYRIMIDINE SYNTHESIS INHIBITORS**

<i>leflunomide 10 mg tab, 20 mg tab</i>	1	EDS
---	---	-----

### **SELECTIVE COSTIMULATION MODULATORS**

ORENCIA 125 MG/ML SOLN PRSYR	2	PA, QL (4 ML PER 28 DAYS), SP, NP
ORENCIA 250 MG RECON SOLN	2	PA, SP, NP
ORENCIA 50 MG/0.4ML SOLN PRSYR	2	PA, QL (1.6 ML PER 28 DAY), SP, NP
ORENCIA 87.5 MG/0.7ML SOLN PRSYR	2	PA, QL (2.8 ML PER 28 DAY), SP, NP
ORENCIA CLICKJECT	2	PA, QL (4 ML PER 28 DAYS), SP, NP

### **SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS**

ENBREL 25 MG RECON SOLN, 25 MG/0.5ML SOLN PRSYR, 50 MG/ML SOLN PRSYR	2	PA, QL (4 ML PER 28 DAYS), SP, P
--	---	----------------------------------

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
ENBREL 25 MG/0.5ML SOLUTION	2	PA, QL (2 ML PER 28 DAYS), SP, P
ENBREL MINI	2	PA, QL (4 ML PER 28 DAYS), SP, P
ENBREL SURECLICK	2	PA, QL (4 ML PER 28 DAYS), SP, P

## **ANALGESICS - NONNARCOTIC**

### **ANALGESIC COMBINATIONS**

<i>acetaminophen / caffeine / pyrilamine (midol)</i>	1	OTC
<i>aspirin / acetaminophen / caffeine (excedrin)</i>	1	OTC
<i>bac</i>	1	
<i>butalbital-acetaminophen -50-325 mg tab</i>	1	
<i>butalbital-apap-caffeine --50-325-40 mg cap, -- 50-325-40 mg tab</i>	1	
<i>butalbital-aspirin-caffeine --50-325-40 mg cap</i>	1	
BUTALBITAL-ASPIRIN-CAFFEINE -- 50-325-40 MG TAB	2	
<i>esgic 50-325-40 mg cap</i>	1	
<i>zebutal</i>	1	

### **ANALGESICS OTHER**

<i>acetaminophen (tylenol)</i>	1	OTC, EDS
--------------------------------	---	----------

### **SALICYLATES**

<i>aspirin</i>	\$0	OTC, EDS
<i>aspirin (81 mg chew tab)</i>	\$0	OTC, EDS
<i>aspirin (81 mg tab dr)</i>	\$0	OTC, EDS
<i>aspirin / buffers (bufferin)</i>	1	OTC, EDS
<i>aspirin / sodium bicarb / citric acid (alka-seltzer)</i>	1	OTC, EDS
<i>aspirin 325 mg delayed release</i>	1	OTC, EDS
<i>aspirin 500 mg</i>	1	OTC, EDS
<i>aspirin suppository</i>	2	OTC
<i>diflunisal 500 mg tab</i>	1	EDS
<i>salsalate 500 mg tab, 750 mg tab</i>	1	EDS

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>ANALGESICS - OPIOID</b>		
<b>OPIOID AGONISTS</b>		
CONZIP	2	PA, NP
DURAGESIC-100	2	PA, QL (0.34 EA PER DAY), NP
DURAGESIC-12	2	PA, QL (0.34 EA PER DAY), NP
DURAGESIC-25	2	PA, QL (0.34 EA PER DAY), NP
DURAGESIC-50	2	PA, QL (0.34 EA PER DAY), NP
DURAGESIC-75	2	PA, QL (0.34 EA PER DAY), NP
<i>fentanyl 12 mcg/hr patch, 37.5 mcg/hr patch, 62.5 mcg/hr patch, 75 mcg/hr patch, 87.5 mcg/hr patch, 100 mcg/hr patch</i>	1	PA, QL (0.34 EA PER DAY), NP
<i>fentanyl 25 mcg/hr patch, 50 mcg/hr patch</i>	1	PA, QL (0.34 EA PER DAY), P
FENTANYL CITRATE 200 MCG LOZ HANDLE, 400 MCG LOZ HANDLE, 600 MCG LOZ HANDLE, 800 MCG LOZ HANDLE, 1200 MCG LOZ HANDLE, 1600 MCG LOZ HANDLE	2	PA, QL (4 EA PER 1 DAY)
<i>fentanyl citrate 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg</i>	1	PA, QL (4 EA PER DAY)
HYDROCODONE BITARTRATE ER 50 MG CAP 12H	2	PA, QL (2 EA PER DAY), NP
HYDROCODONE BITARTRATE ER ER 10 MG CAP ER 12H, ER 15 MG CAP ER 12H, ER 20 MG CAP ER 12H	2	PA, QL (4 EA PER DAY), NP
<i>hydrocodone bitartrate er er 10 mg cap er 12h, er 15 mg cap er 12h, er 20 mg tb24 deter</i>	1	PA, QL (4 EA PER DAY), NP
<i>hydrocodone bitartrate er er 30 mg cap er 12h, er 30 mg tb24 deter, er 40 mg cap er 12h, er 40 mg tb24 deter</i>	1	PA, QL (3 EA PER DAY), NP
HYDROCODONE BITARTRATE ER ER 30 MG CAP ER 12H, ER 40 MG CAP ER 12H	2	PA, QL (3 EA PER DAY), NP
<i>hydrocodone bitartrate er er 50 mg cap er 12h, er 60 mg tb24 deter</i>	1	PA, QL (2 EA PER DAY), NP
<i>hydrocodone bitartrate er er 80 mg, er 100 mg, er 120 mg</i>	1	PA, QL (1 EA PER DAY), NP
<i>hydromorphone hcl 1 mg/ml liquid</i>	1	QL (8 ML PER DAY)

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>hydromorphone hcl 2 mg tab</i>	1	QL (6 EA PER DAY)
<i>hydromorphone hcl 4 mg tab</i>	1	QL (5 EA PER DAY)
<i>hydromorphone hcl 8 mg tab</i>	1	QL (2 EA PER DAY)
<i>hydromorphone hcl er</i>	1	PA, QL (1 EA PER DAY), NP
HYDROMORPHONE HCL POWDER	2	
HYSINGLA ER 20 MG TB24 DET	2	PA, QL (4 EA PER DAY), NP
HYSINGLA ER 60 MG TB24 DET	2	PA, QL (2 EA PER DAY), NP
HYSINGLA ER ER 30 MG TB24 DETER, ER 40 MG TB24 DETER	2	PA, QL (3 EA PER DAY), NP
HYSINGLA ER ER 80 MG TB24 DETER, ER 100 MG TB24 DETER, ER 120 MG TB24 DETER	2	PA, QL (1 EA PER DAY), NP
<i>methadone hcl 10 mg tab</i>	1	PA, QL (2 EA PER DAY), NP
<i>methadone hcl 10 mg/5ml solution, 10 mg/ml conc</i>	1	QL (10 ML PER DAY)
<i>methadone hcl 5 mg tab</i>	1	PA, QL (4 EA PER DAY), NP
<i>methadone hcl 5 mg/5ml solution</i>	1	QL (20 ML PER DAY)
<i>methadone hcl intensol</i>	1	QL (10 ML PER DAY)
<i>morphine sulfate (concentrate)</i>	1	QL (4.5 ML PER 1 DAY)
MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION	1	QL (4.5 ML PER DAY)
MORPHINE SULFATE 10 MG/5ML SOLUTION	1	QL (30 ML PER DAY)
<i>morphine sulfate 10 mg/5ml solution</i>	1	QL (30 ML PER DAY)
MORPHINE SULFATE 15 MG TAB	1	QL (6 EA PER DAY)
<i>morphine sulfate 15 mg tab</i>	1	QL (6 EA PER DAY)
<i>morphine sulfate 20 mg/5ml solution</i>	1	QL (22.5 ML PER DAY)
MORPHINE SULFATE 20 MG/5ML SOLUTION	2	QL (22.5 ML PER DAY)
MORPHINE SULFATE 30 MG TAB	1	QL (3 EA PER DAY)
<i>morphine sulfate 30 mg tab</i>	1	QL (3 EA PER DAY)
<i>morphine sulfate er 15 mg tab</i>	1	PA, QL (4 EA PER DAY), P
MORPHINE SULFATE ER 30 MG CAP 24H	2	PA, QL (3 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>morphine sulfate er 30 mg cap 24h</i>	1	PA, QL (3 EA PER DAY), NP
<i>morphine sulfate er 30 mg tab</i>	1	PA, QL (3 EA PER DAY), P
MORPHINE SULFATE ER 40 MG CAP 24H	2	PA, QL (2 EA PER DAY), NP
MORPHINE SULFATE ER BEADS 30 MG CAP 24H	2	PA, QL (3 EA PER DAY), NP
MORPHINE SULFATE ER BEADS 45 MG CAP 24H	2	PA, QL (2 EA PER DAY), NP
MORPHINE SULFATE ER BEADS ER BEADS 60 MG CAP ER 24H, ER BEADS 75 MG CAP ER 24H, ER BEADS 90 MG CAP ER 24H, ER BEADS 120 MG CAP ER 24H	2	PA, QL (1 EA PER DAY), NP
MORPHINE SULFATE ER ER 10 MG CAP ER 24H, ER 20 MG CAP ER 24H	2	PA, QL (4 EA PER DAY), NP
<i>morphine sulfate er er 10 mg cap er, er 20 mg cap er</i>	1	PA, QL (4 EA PER DAY), NP
MORPHINE SULFATE ER ER 50 MG CAP ER 24H, ER 60 MG CAP ER 24H, ER 80 MG CAP ER 24H, ER 100 MG CAP ER 24H	2	PA, QL (1 EA PER DAY), NP
<i>morphine sulfate er er 50 mg cap er, er 60 mg cap er, er 80 mg cap er, er 100 mg cap er</i>	1	PA, QL (1 EA PER DAY), NP
<i>morphine sulfate er er 60 mg tab er, er 100 mg tab er, er 200 mg tab er</i>	1	PA, QL (1 EA PER DAY), P
MS CONTIN 15 MG TAB ER	2	PA, QL (4 EA PER DAY), NP
MS CONTIN 30 MG TAB ER	2	PA, QL (3 EA PER DAY), NP
MS CONTIN 60 MG TAB ER, 100 MG TAB ER, 200 MG TAB ER	2	PA, QL (1 EA PER DAY), NP
NUCYNTA ER ER 150 MG TAB ER 12H, ER 200 MG TAB ER 12H, ER 250 MG TAB ER 12H	2	PA, QL (1 EA PER DAY), NP
NUCYNTA ER ER 50 MG TAB ER 12H, ER 100 MG TAB ER 12H	2	PA, QL (2 EA PER DAY), NP
<i>oxycodone hcl 10 mg tab</i>	1	QL (6 EA PER DAY)
<i>oxycodone hcl 100 mg/5ml conc</i>	1	QL (3 ML PER DAY)
<i>oxycodone hcl 15 mg tab</i>	1	QL (4 EA PER DAY)
<i>oxycodone hcl 20 mg tab</i>	1	QL (3 EA PER DAY)
<i>oxycodone hcl 30 mg tab</i>	1	QL (2 EA PER DAY)

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>oxycodone hcl 5 mg cap, 5 mg tab</i>	1	QL (12 EA PER DAY)
<i>oxycodone hcl 5 mg/5ml solution</i>	1	QL (40 ML PER DAY)
OXYCODONE HCL ER 30 MG TB12 DET	1	PA, QL (2 EA PER DAY), NP
OXYCODONE HCL ER ER 10 MG TB12 DETER, ER 15 MG TB12 DETER, ER 20 MG TB12 DETER	1	PA, QL (3 EA PER DAY), NP
OXYCODONE HCL ER ER 40 MG TB12 DETER, ER 60 MG TB12 DETER, ER 80 MG TB12 DETER	1	PA, QL (2 EA PER DAY), NP
OXYCODONE HCL POWDER	2	
OXYCONTIN 10 MG TB12 DETER, 20 MG TB12 DETER	2	PA, QL (3 EA PER 1 DAY), NP
OXYCONTIN 15 MG TB12 DETER	2	PA, QL (3 EA PER DAY), NP
OXYCONTIN 30 MG TB12 DETER	2	PA, QL (2 EA PER DAY), NP
OXYCONTIN 40 MG TB12 DETER	2	PA, QL (2 EA PER 1 DAY), NP
OXYCONTIN 60 MG TB12 DETER, 80 MG TB12 DETER	2	PA, QL (2 EA PER DAY), NP
<i>tramadol hcl (er biphasic) tramadol hcl (er biphasic), tramadol hcl (er biphasic)</i>	1	PA, NP
<i>tramadol hcl 50 mg tab</i>	1	QL (8 EA PER DAY)
TRAMADOL HCL ER TRAMADOL HCL ER 100 MG TAB ER 24H, TRAMADOL HCL ER 200 MG TAB ER 24H, TRAMADOL HCL ER 100 MG CAP ER 24H, TRAMADOL HCL ER 200 MG CAP ER 24H, TRAMADOL HCL ER 300 MG CAP ER 24H, TRAMADOL HCL ER 300 MG TAB ER 24H	1	PA, NP
XTAMPZA ER ER 27 MG CP12 DETER, ER 36 MG CP12 DETER	2	PA, QL (2 EA PER DAY), NP
XTAMPZA ER ER 9 MG CP12 DETER, ER 13.5 MG CP12 DETER, ER 18 MG CP12 DETER	2	PA, QL (3 EA PER DAY), NP
ZOHYDRO ER 50 MG CAP 12H	2	PA, QL (2 EA PER DAY), NP
ZOHYDRO ER ER 10 MG CAP ER 12H, ER 15 MG CAP ER 12H, ER 20 MG CAP ER 12H	2	PA, QL (4 EA PER DAY), NP
ZOHYDRO ER ER 30 MG CAP ER 12H, ER 40 MG CAP ER 12H	2	PA, QL (3 EA PER DAY), NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>OPIOID COMBINATIONS</b>		
ACETAMINOPHEN-CODEINE -120-12 MG/5ML SOLUTION	1	QL (150 ML PER 1 DAY)
<i>acetaminophen-codeine -300-15 mg tab, -300-30 mg tab</i>	1	QL (12 EA PER DAY)
<i>acetaminophen-codeine -300-60 mg tab</i>	1	QL (6 EA PER DAY)
<i>acetaminophen-codeine acetaminophen-codeine 120-12 mg/5ml solution, acetaminophen-codeine 300-30 mg/12.5ml solution, acetaminophen-codeine 300-30 mg/12.5ml solution</i>	1	QL (150 ML PER DAY)
<i>ascomp-codeine</i>	1	QL (6 EA PER DAY)
<i>butalbital-apap-caff-cod ---50-325-40-30 mg cap</i>	1	QL (6 EA PER DAY)
<i>butalbital-asa-caff-codeine</i>	1	QL (6 EA PER DAY)
<i>endocet 10-325 mg tab</i>	1	QL (6 EA PER DAY)
<i>endocet 2.5-325 mg tab, 5-325 mg tab</i>	1	QL (12 EA PER DAY)
<i>endocet 7.5-325 mg tab</i>	1	QL (8 EA PER DAY)
<i>hydrocodone-acetaminophen -10-300 mg tab, -10-325 mg tab</i>	1	QL (9 EA PER DAY)
<i>hydrocodone-acetaminophen -10-325 mg/15ml solution</i>	1	QL (9 ML PER DAY)
<i>hydrocodone-acetaminophen -2.5-108 mg/5ml, -5-217 mg/10ml, -7.5-325 mg/15ml</i>	1	QL (120 ML PER DAY)
<i>hydrocodone-acetaminophen -5-300 mg tab, -5-325 mg tab, -7.5-300 mg tab, -7.5-325 mg tab</i>	1	QL (12 EA PER DAY)
<i>oxycodone-acetaminophen -10-325 mg tab</i>	1	QL (6 EA PER DAY)
<i>oxycodone-acetaminophen -2.5-325 mg tab, -5-325 mg tab</i>	1	QL (12 EA PER DAY)
<i>oxycodone-acetaminophen -7.5-325 mg tab</i>	1	QL (8 EA PER DAY)
<i>tramadol-acetaminophen</i>	1	QL (8 EA PER DAY)
<b>OPIOID PARTIAL AGONISTS</b>		
BELBUCA	1	PA, QL (2 EA PER DAY), P
BRIXADI (WEEKLY) 16 MG/0.32ML SOLN PRSYR	2	PA, LA, QL (1.28 ML PER 28 DAYS), NP
BRIXADI (WEEKLY) 24 MG/0.48ML SOLN PRSYR	2	PA, LA, QL (1.92 ML PER 28 DAYS), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
BRIXADI (WEEKLY) 32 MG/0.64ML SOLN PRSYR	2	PA, LA, QL (2.56 ML PER 28 DAYS), NP
BRIXADI (WEEKLY) 8 MG/0.16ML SOLN PRSYR	2	PA, LA, QL (0.64 ML PER 28 DAYS), NP
BRIXADI 128 MG/0.36ML SOLN PRSYR	2	PA, LA, QL (0.36 ML PER 28 DAYS), NP
BRIXADI 64 MG/0.18ML SOLN PRSYR	2	PA, LA, QL (0.18 ML PER 28 DAYS), NP
BRIXADI 96 MG/0.27ML SOLN PRSYR	2	PA, LA, QL (0.27 ML PER 28 DAYS), NP
<i>buprenorphine 5 mcg/hr patch wk, 7.5 mcg/hr patch wk, 10 mcg/hr patch wk, 15 mcg/hr patch wk, 20 mcg/hr patch wk</i>	1	PA, QL (0.15 EA PER DAY), NP
<i>buprenorphine hcl 2 mg tab, 8 mg tab</i>	1	PA, QL (3 EA PER DAY), NP
<i>buprenorphine hcl-naloxone hcl -12-3 mg film</i>	1	PA, QL (2 EA PER DAY), NP
<i>buprenorphine hcl-naloxone hcl -2-0.5 mg film</i>	1	PA, QL (12 EA PER DAY), NP
<i>buprenorphine hcl-naloxone hcl -2-0.5 mg sl tab</i>	1	QL (12 EA PER DAY), P
<i>buprenorphine hcl-naloxone hcl -4-1 mg film</i>	1	PA, QL (6 EA PER DAY), NP
<i>buprenorphine hcl-naloxone hcl -8-2 mg film</i>	1	PA, QL (3 EA PER DAY), NP
<i>buprenorphine hcl-naloxone hcl -8-2 mg sl tab</i>	1	QL (3 EA PER DAY), P
<i>nalbuphine hcl 10 mg/ml, 20 mg/ml</i>	1	QL (2 EA PER DAY)
SUBLOCADE 100 MG/0.5ML SOLN PRSYR	2	PA, LA, QL (1 EA PER FILL), NP
SUBLOCADE 300 MG/1.5ML SOLN PRSYR	2	PA, LA, QL (1.5 ML PER FILL), NP
SUBOXONE 12-3 MG FILM	1	QL (2 EA PER DAY), P
SUBOXONE 2-0.5 MG FILM	1	QL (12 EA PER DAY), P
SUBOXONE 4-1 MG FILM	1	QL (6 EA PER DAY), P
SUBOXONE 8-2 MG FILM	1	QL (3 EA PER DAY), P
ZUBSOLV 0.7-0.18 MG SL TAB, 1.4-0.36 MG SL TAB	2	PA, QL (12 EA PER DAY), NP
ZUBSOLV 2.9-0.71 MG SL TAB	2	PA, QL (4 EA PER DAY), NP
ZUBSOLV 5.7-1.4 MG SL TAB	2	PA, QL (3 EA PER DAY), NP
ZUBSOLV 8.6-2.1 MG SL TAB, 11.4-2.9 MG SL TAB	2	PA, QL (2 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANDROGENS-ANABOLIC</b>		
<b>ANDROGENS</b>		
<i>danazol 50 mg cap, 100 mg cap, 200 mg cap</i>	1	
<i>depo-testosterone</i>	1	
TESTIM	1	PA, QL (10 GM PER DAY), P
<i>testosterone 1.62 % gel, 20.25 mg/act (1.62%) gel</i>	1	PA, QL (5 GM PER DAY), P
<i>testosterone 10 mg/act (2%) gel</i>	1	PA, QL (4 GM PER DAY), NP
TESTOSTERONE 10 MG/ACT (2%) GEL	1	PA, QL (4 GM PER 1 DAY), NP
<i>testosterone 20.25 mg/1.25gm (1.62%) gel</i>	1	PA, QL (1.25 GM PER DAY), NP
<i>testosterone 25 mg/2.5gm (1%) gel</i>	1	PA, QL (2.5 GM PER DAY), NP
<i>testosterone 30 mg/act solution</i>	1	PA, QL (6 ML PER DAY), NP
<i>testosterone 40.5 mg/2.5gm (1.62%) gel</i>	1	PA, QL (5 GM PER DAY), NP
<i>testosterone 50 mg/5gm (1%) gel</i>	1	PA, QL (10 GM PER DAY), NP
TESTOSTERONE 50 MG/5GM (1%) GEL	2	PA, QL (10 GM PER DAY), NP
<i>testosterone cypionate 100 mg/ml, 200 mg/ml</i>	1	
TESTOSTERONE TESTOSTERONE 12.5 MG/ACT (1%) GEL, TESTOSTERONE 12.5 MG/ACT (1%) GEL	1	PA, QL (10 GM PER 1 DAY), NP
VOGELXO	2	PA, QL (10 GM PER DAY), NP
VOGELXO PUMP	2	PA, QL (10 GM PER 1 DAY), NP

## **ANORECTAL AND RELATED PRODUCTS**

### **INTRARECTAL STEROIDS**

<i>budesonide 2 mg, 2 mg/act</i>	1	PA, NP
<i>hydrocortisone 100 mg/60ml enema</i>	1	
UCERIS 2 MG/ACT FOAM	2	PA, NP

### **RECTAL COMBINATIONS**

<i>hemorrhoidal cream</i>	1	OTC
<i>hemorrhoidal ointment</i>	1	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>hemorrhoidal suppository</i>	1	OTC
<i>phenylephrine / shark liver / petrolatum (preparation h)</i>	1	OTC
PROCTOFOAM HC	2	
<b>RECTAL LOCAL ANESTHETICS</b>		
<i>pramoxine (procto-foam)</i>	1	OTC
<b>RECTAL STEROIDS</b>		
<i>anucort-hc</i>	1	
<i>anusol-hc -25 mg suppos</i>	1	
<i>hemmorex-hc</i>	1	
<i>hydrocortisone (perianal) 2.5 % cream</i>	1	
<i>hydrocortisone acetate 25 mg suppos, 30 mg suppos</i>	1	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<b>VASODILATING AGENTS</b>		
RECTIV	2	
<b>ANTACIDS</b>		
<b>ANTACID COMBINATIONS</b>		
ANTACID	2	OTC
<i>calcium carbonate / magnesium hydroxide (mylanta supreme)</i>	1	OTC, EDS
<i>magnesium carbonate / aluminum hydroxide (gaviscon)</i>	1	OTC
<i>magnesium hydroxide / aluminum hydroxide / simethicone (mylanta)</i>	1	OTC
<b>ANTACIDS - ALUMINUM SALTS</b>		
<i>aluminum hydroxide (alternagel)</i>	2	OTC
<b>ANTACIDS - BICARBONATE</b>		
<i>sodium bicarbonate</i>	1	OTC, EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTACIDS - CALCIUM SALTS</b>		
<i>calcium carbonate (tums)</i>	1	OTC, EDS
<b>ANTACIDS - MAGNESIUM SALTS</b>		
<i>magnesium oxide</i>	1	OTC, EDS
MAGNESIUM OXIDE (ANTACID)	2	OTC
<i>magnesium oxide (antacid)</i>	1	OTC, EDS
<b>ANTHELMINTICS</b>		
<b>ANTHELMINTICS</b>		
<i>albendazole 200 mg tab</i>	1	
BENZNIDAZOLE	2	LA
<i>cvs pinworm treatment</i>	1	OTC
<i>ivermectin 3 mg tab</i>	1	
<i>pin-away</i>	1	OTC
<i>pinworm medicine</i>	1	OTC
<i>praziquantel 600 mg tab</i>	1	
<i>reeses pinworm medicine</i>	1	OTC
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<i>baciim</i>	1	
<i>bacitracin 50000 unit recon soln</i>	1	
<i>metronidazole 250 mg tab, 500 mg tab, 500 mg/100ml solution</i>	1	
<i>pentamidine isethionate</i>	1	
<i>tinidazole 250 mg tab, 500 mg tab</i>	1	
<i>trimethoprim 100 mg tab</i>	1	
XIFAXAN 200 MG TAB	2	QL (3 EA PER DAY)
XIFAXAN 550 MG TAB	2	PA, QL (2 EA PER DAY)
<b>ANTI-INFECTIVE MISC. - COMBINATIONS</b>		
<i>multivitamins / minerals</i>	2	OTC, EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>sulfamethoxazole-trimethoprim</i>	1	
<b>ANTIPROTOZOAL AGENTS</b>		
<i>atovaquone 750 mg/5ml suspension</i>	1	
LAMPIT	2	
<b>CARBAPENEMS</b>		
<i>ertapenem sodium</i>	1	
<i>meropenem</i>	1	
<b>CYCLIC LIPOPEPTIDES</b>		
<i>daptomycin</i>	1	
<b>GLYCOPEPTIDES</b>		
VANCOCIN	2	PA, QL (4 EA PER 1 DAY), NP
<i>vancomycin hcl 1 gm soln, 5 gm soln, 10 gm soln, 500 mg soln, 750 mg soln</i>	1	
<i>vancomycin hcl 125 mg cap, 250 mg cap</i>	1	QL (4 EA PER 1 DAY), P
<b>LEPROSTATICS</b>		
<i>dapsone 25 mg tab, 100 mg tab</i>	1	EDS
<b>LINCOSAMIDES</b>		
<i>clindamycin hcl 75 mg cap, 150 mg cap, 300 mg cap</i>	1	
<i>clindamycin palmitate hcl</i>	1	
<i>clindamycin phosphate 9 gm/60ml, 300 mg/2ml, 600 mg/4ml, 900 mg/6ml, 9000 mg/60ml</i>	1	
<b>MONOBACTAMS</b>		
<i>aztreonam 1 gm recon soln</i>	1	
CAYSTON	2	PA, LA, NP
<b>OXAZOLIDINONES</b>		
<i>linezolid 100 mg/5ml recon susp, 600 mg tab</i>	1	
LINEZOLID IN SODIUM CHLORIDE	2	
<b>PLEUROMUTILINS</b>		
XENLETA 600 MG TAB	2	PA

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>POLYMYXINS</b>		
<i>colistimethate sodium (cba)</i>	1	
<i>polymyxin b sulfate 500000 unit recon soln</i>	1	
<b>URINARY ANTI-INFECTIVES</b>		
<i>fosfomycin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>nitrofurantoin macrocrystal 50 mg cap, 100 mg cap</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
<b>ANTIANGINAL AGENTS</b>		
<b>ANTIANGINALS-OTHER</b>		
<i>ranolazine er</i>	1	EDS
<b>NITRATES</b>		
<i>isosorbide dinitrate 5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab</i>	1	EDS
<i>isosorbide mononitrate</i>	1	EDS
<i>isosorbide mononitrate er</i>	1	EDS
<i>minitran</i>	1	EDS
NITRO-BID	2	
<i>nitroglycerin 0.1 mg/hr patch 24hr, 0.2 mg/hr patch 24hr, 0.3 mg sl tab, 0.4 mg sl tab, 0.4 mg/hr patch 24hr, 0.6 mg sl tab, 0.6 mg/hr patch 24hr</i>	1	EDS
<i>nitroglycerin 0.4 mg/spray solution</i>	1	
<b>ANTIANKXIETY AGENTS</b>		
<b>ANTIANKXIETY AGENTS - MISC.</b>		
<i>buspirone hcl 5 mg tab, 7.5 mg tab, 10 mg tab, 15 mg tab, 30 mg tab</i>	1	EDS
<i>hydroxyzine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	1	EDS
<i>hydroxyzine hcl 10 mg/5ml syrup</i>	1	
HYDROXYZINE PAMOATE 100 MG CAP	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>hydroxyzine pamoate 25 mg cap, 50 mg cap</i>	1	EDS
<b>BENZODIAZEPINES</b>		
<i>alprazolam 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	
<i>clorazepate dipotassium</i>	1	
<i>diazepam 2 mg tab, 5 mg tab, 5 mg/5ml solution, 5 mg/ml conc, 5 mg/ml solution, 10 mg tab, 10 mg/2ml solution</i>	1	
<i>diazepam intensol</i>	1	
<i>lorazepam 0.5 mg tab, 1 mg tab, 2 mg tab, 2 mg/ml conc</i>	1	
<i>lorazepam intensol</i>	1	
<i>oxazepam</i>	1	
<b>ANTIARRHYTHMICS</b>		
<b>ANTIARRHYTHMICS TYPE I-A</b>		
<i>disopyramide phosphate</i>	1	EDS
<i>procainamide hcl 100 mg/ml solution</i>	1	
PROCAINAMIDE HCL 500 MG/ML SOLUTION	2	
<i>quinidine gluconate er</i>	1	EDS
QUINIDINE SULFATE	2	
<i>quinidine sulfate</i>	1	EDS
<b>ANTIARRHYTHMICS TYPE I-B</b>		
<i>mexiletine hcl 150 mg cap, 200 mg cap, 250 mg cap</i>	1	EDS
<b>ANTIARRHYTHMICS TYPE I-C</b>		
<i>flecainide acetate</i>	1	EDS
<i>propafenone hcl</i>	1	EDS
<b>ANTIARRHYTHMICS TYPE III</b>		
<i>amiodarone hcl 100 mg tab, 200 mg tab, 400 mg tab</i>	1	EDS
<i>dofetilide</i>	1	EDS



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>pacerone</i>	1	EDS
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS</b>		
<b>ANTI-INFLAMMATORY AGENTS</b>		
<i>cromolyn sodium 20 mg/2ml nebu soln</i>	1	EDS
<b>ANTIASTHMATIC - MONOCLONAL ANTIBODIES</b>		
CINQAIR	2	PA, SP, NP
FASENRA 10 MG/0.5ML SOLN PRSYR	2	PA, LA, QL (0.5 ML PER 56 DAYS), NP
FASENRA 30 MG/ML SOLN PRSYR	2	PA, LA, QL (1 ML PER 56 DAYS), NP
FASENRA PEN	2	PA, LA, QL (1 ML PER 56 DAYS), NP
NUCALA	2	PA, QL (1 EA PER 28 DAYS), SP, NP
TEZSPIRE	2	PA, QL (1.91 ML PER 28 DAYS), SP, NP
XOLAIR 150 MG RECON SOLN	2	PA, QL (2 EA PER 28 DAYS), SP, P
XOLAIR 150 MG/ML SOLN A-INJ, 150 MG/ML SOLN PRSYR	2	PA, QL (2 ML PER 28 DAYS), SP, P
XOLAIR 300 MG/2ML SOLN A-INJ, 300 MG/2ML SOLN PRSYR	2	PA, QL (4 ML PER 28 DAYS), SP, P
XOLAIR 75 MG/0.5ML SOLN A-INJ, 75 MG/0.5ML SOLN PRSYR	2	PA, QL (1 ML PER 28 DAYS), SP, P
<b>BRONCHODILATORS - ANTICHOLINERGICS</b>		
ATROVENT HFA	2	P
INCRUSE ELLIPTA	2	PA, NP
<i>ipratropium bromide 0.02 % solution</i>	1	EDS, P
SPIRIVA HANDIHALER	1	P
SPIRIVA RESPIMAT	2	P
<i>tiotropium bromide monohydrate</i>	1	PA, EDS, NP
TUDORZA PRESSAIR	2	P
YUPELRI	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>LEUKOTRIENE MODULATORS</b>		
ACCOLATE	2	PA, NP
<i>montelukast sodium 4 mg chew tab, 5 mg chew tab, 10 mg tab</i>	1	EDS, P
<i>montelukast sodium 4 mg packet</i>	1	PA, EDS, NP
SINGULAIR	2	PA, NP
<i>zafirlukast</i>	1	EDS, P
<i>zileuton er</i>	1	PA, NP
ZYFLO	2	PA, NP
<b>SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
DALIRESP	2	PA, NP
<i>roflumilast</i>	1	P
<b>STEROID INHALANTS</b>		
ALVESCO	2	PA, QL (0.21 GM PER DAY), NP
ARNUIITY ELLIPTA	2	QL (1 EA PER DAY), P
ASMANEX HFA	2	QL (0.44 GM PER DAY), P
ASMANEX INHALATION POWDER	2	QL (0.04 EA PER DAY), P
<i>budesonide 0.25 mg/2ml suspension, 0.5 mg/2ml suspension</i>	1	EDS, P
<i>budesonide 1 mg/2ml suspension</i>	1	QL (60 UNITS PER 30 DAYS), EDS, P
FLUTICASONE PROPIONATE DISKUS	1	PA, QL (2 EA PER DAY), NP
FLUTICASONE PROPIONATE HFA 110 MCG/ACT AEROSOL	1	QL (12 GM PER FILL), P
FLUTICASONE PROPIONATE HFA 220 MCG/ACT AEROSOL	1	QL (24 GM PER FILL), P
FLUTICASONE PROPIONATE HFA 44 MCG/ACT AEROSOL	1	QL (10.6 GM PER FILL), P
PULMICORT	2	PA, NP
PULMICORT FLEXHALER	2	QL (0.04 EA PER DAY), P
QVAR REDIHALER 40 MCG/ACT AERO BA	2	QL (0.36 GM PER DAY), P
QVAR REDIHALER 80 MCG/ACT AERO BA	2	QL (0.71 GM PER DAY), P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>SYMPATHOMIMETICS</b>		
ADVAIR DISKUS	1	QL (2 EA PER DAY), P
ADVAIR HFA	1	QL (0.4 GM PER DAY), P
AIRDUO RESPICLICK 113/14	2	PA, QL (1 EA PER 1 FILL), NP
AIRDUO RESPICLICK 232/14	2	PA, QL (1 EA PER 1 FILL), NP
AIRDUO RESPICLICK 55/14	2	PA, QL (1 EA PER 1 FILL), NP
AIRSUPRA	2	PA, QL (0.72 GM PER DAY), NP
ALBUTEROL SULFATE (5 MG/ML) 0.5% NEBU SOLN	2	P
<i>albuterol sulfate 0.63 mg/3ml nebu soln, 1.25 mg/3ml nebu soln, 2 mg/5ml syrup, (2.5 mg/3ml) 0.083% nebu soln, 2.5 mg/0.5ml nebu soln, (5 mg/ml) 0.5% nebu soln</i>	1	EDS, P
<i>albuterol sulfate 2 mg tab, 4 mg tab</i>	1	PA, EDS, NP
ALBUTEROL SULFATE ER	2	PA, NP
ALBUTEROL SULFATE HFA	1	PA, QL (1.2 GM PER DAY), NP
<i>albuterol sulfate hfa</i>	1	PA, QL (0.57 GM PER DAY), EDS, NP
ANORO ELLIPTA	2	QL (2 EA PER 1 DAY), P
<i>arformoterol tartrate</i>	1	PA, EDS, NP
BEVESPI AEROSPHERE	2	PA, QL (0.36 GM PER DAY), NP
BREO ELLIPTA	2	PA, QL (2 EA PER DAY), NP
<i>brey-na</i>	1	PA, QL (0.69 GM PER DAY), EDS, NP
BREZTRI AEROSPHERE	2	PA, QL (0.36 GM PER DAY), NP
BROVANA	2	PA, NP
<i>budesonide-formoterol fumarate</i>	1	PA, QL (0.69 GM PER DAY), EDS, NP
COMBIVENT RESPIMAT	2	QL (0.14 GM PER DAY), P
DUAKLIR PRESSAIR	2	PA, QL (0.04 EA PER DAY), NP
DULERA	2	QL (0.87 GM PER DAY), P
FLUTICASONE FUROATE- VILANTEROL	1	PA, QL (2 EA PER DAY), NP
<i>fluticasone-salmeterol -100-50 mcg/act, -250-50 mcg/act, -500-50 mcg/act</i>	1	PA, QL (2 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
FLUTICASONE-SALMETEROL -45-21 MCG/ACT AEROSOL, -115-21 MCG/ACT AEROSOL, -230-21 MCG/ACT AEROSOL	1	PA, QL (12 GM PER 30 DAYS), NP
FLUTICASONE-SALMETEROL -55-14 MCG/ACT AER POW BA, -113-14 MCG/ACT AER POW BA, -232-14 MCG/ACT AER POW BA	1	PA, QL (1 EA PER 1 FILL), NP
<i>formoterol fumarate 20 mcg/2ml nebu soln</i>	1	PA, EDS, NP
<i>ipratropium-albuterol</i>	1	QL (18 ML PER DAY), EDS, P
<i>levalbuterol hcl 0.31 mg/3ml soln, 0.63 mg/3ml soln, 1.25 mg/0.5ml soln, 1.25 mg/3ml soln</i>	1	PA, EDS, NP
LEVALBUTEROL TARTRATE	1	PA, QL (1 GM PER DAY), NP
PERFOROMIST	2	PA, NP
PROAIR DIGIHALER	2	PA, QL (2 EA PER FILL), NP
PROAIR RESPICLICK	2	PA, QL (2 EA PER FILL), NP
SEREVENT DISKUS	2	QL (2 EA PER DAY), P
STIOLTO RESPIMAT	2	QL (0.14 GM PER DAY), P
STRIVERDI RESPIMAT	2	PA, QL (0.14 GM PER DAY), NP
SYMBICORT	1	QL (0.69 GM PER DAY), P
<i>terbutaline sulfate 1 mg/ml solution</i>	1	
<i>terbutaline sulfate 2.5 mg tab, 5 mg tab</i>	1	EDS
TRELEGY ELLIPTA 100-62.5-25 MCG/ACT AER POW BA	2	PA, QL (2 EA PER DAY), NP
TRELEGY ELLIPTA 200-62.5-25 MCG/ACT AER POW BA	2	PA, QL (2 EA PER 1 DAY), NP
VENTOLIN HFA	1	QL (1.2 GM PER DAY), P
<i>wixela inhub</i>	1	QL (2 EA PER DAY), EDS
XOPENEX HFA	1	QL (1 GM PER DAY), P
<b>XANTHINES</b>		
<i>theophylline 80 mg/15ml solution</i>	1	EDS
<i>theophylline er er 300 mg tab er 12h, er 400 mg tab er 24h, er 450 mg tab er 12h, er 600 mg tab er 24h</i>	1	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTICOAGULANTS</b>		
<b>COUMARIN ANTICOAGULANTS</b>		
<i>jantoven</i>	1	EDS, P
<i>warfarin sodium 1 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab, 10 mg tab</i>	1	EDS, P
<b>DIRECT FACTOR XA INHIBITORS</b>		
ELIQUIS	2	P
ELIQUIS DVT/PE STARTER PACK	2	P
SAVAYSA	2	PA, NP
XARELTO 1 MG/ML RECON SUSP	2	PA, NP
XARELTO 2.5 MG TAB, 10 MG TAB, 15 MG TAB, 20 MG TAB	2	P
XARELTO STARTER PACK	2	P
<b>HEPARINS AND HEPARINOID-LIKE AGENTS</b>		
ARIXTRA	2	PA, NP
<i>bd heparin posiflush</i>	1	
<i>enoxaparin sodium</i>	1	P
<i>fondaparinux sodium</i>	1	PA, NP
FRAGMIN 10000 UNIT/4ML SOLUTION, 95000 UNIT/3.8ML SOLUTION	2	P
FRAGMIN 2500 UNIT/0.2ML SOLN PRSYR, 5000 UNIT/0.2ML SOLN PRSYR, 7500 UNIT/0.3ML SOLN PRSYR, 10000 UNIT/ML SOLN PRSYR, 12500 UNIT/0.5ML SOLN PRSYR, 15000 UNIT/0.6ML SOLN PRSYR, 18000 UNT/0.72ML SOLN PRSYR	2	PA, NP
<i>heparin (porcine) in nacl in 1000-0.9 ut/500ml-% solution</i>	1	
HEPARIN NA (PORK) LOCK FLSH PF 1 UNIT/ML SOLUTION	2	
<i>heparin na (pork) lock flsh pf 10 unit/ml, 100 unit/ml</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>heparin sod (pork) lock flush</i>	1	
<i>heparin sodium (porcine) 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf heparin sodium (porcine) pf 5000 unit/0.5ml solution, heparin sodium (porcine) pf 5000 unit/ml solution, heparin sodium (porcine) pf 1000 unit/ml solution</i>	1	
LOVENOX	2	PA, NP
<b>THROMBIN INHIBITORS</b>		
<i>dabigatran etexilate mesylate</i>	1	PA, NP
PRADAXA 20 MG PACKET, 30 MG PACKET, 40 MG PACKET, 50 MG PACKET, 110 MG PACKET, 150 MG PACKET	2	PA, NP
PRADAXA 75 MG CAP, 110 MG CAP, 150 MG CAP	1	P
<b>ANTICONVULSANTS</b>		
<b>AMPA GLUTAMATE RECEPTOR ANTAGONISTS</b>		
FYCOMPA	2	PA, NP
<b>ANTICONVULSANTS - BENZODIAZEPINES</b>		
<i>clobazam</i>	1	P
<i>clonazepam 0.125 mg tab disp, 0.25 mg tab disp, 0.5 mg tab, 0.5 mg tab disp, 1 mg tab, 1 mg tab disp, 2 mg tab, 2 mg tab disp</i>	1	
DIAZEPAM DIAZEPAM 2.5 MG GEL, DIAZEPAM 10 MG GEL, DIAZEPAM 20 MG GEL	1	QL (2 EA PER FILL), P
LIBERVANT	2	PA, QL (10 EA PER 30 DAYS), NP
NAYZILAM	2	QL (2 EA PER 1 FILL), P
ONFI	2	PA, NP
SYMPAZAN	2	PA, NP
VALTOCO 10 MG DOSE	2	QL (2 EA PER 1 FILL), P
VALTOCO 15 MG DOSE	2	QL (2 EA PER 1 FILL), P
VALTOCO 20 MG DOSE	2	QL (2 EA PER 1 FILL), P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
VALTOCO 5 MG DOSE	2	QL (2 EA PER 1 FILL), P
<b>ANTICONVULSANTS - MISC.</b>		
APTIOM	2	PA, NP
BANZEL	2	PA, NP
BRIVIACT 10 MG TAB, 10 MG/ML SOLUTION, 25 MG TAB, 50 MG TAB, 75 MG TAB, 100 MG TAB	2	PA, NP
<i>carbamazepine 100 mg chew tab, 100 mg/5ml suspension, 200 mg tab, 200 mg/10ml suspension</i>	1	EDS, P
CARBAMAZEPINE 200 MG CHEW TAB	1	P
<i>carbamazepine er er 100 mg cap er, er 200 mg cap er, er 300 mg cap er</i>	1	PA, EDS, NP
<i>carbamazepine er er 100 mg tab er, er 200 mg tab er, er 400 mg tab er</i>	1	EDS, P
DIACOMIT	2	PA, LA, NP
EPIDIOLEX	2	PA, SP, NP
<i>epitol</i>	1	EDS, P
EPRONTIA	2	PA, NP
FINTEPLA	2	PA, LA, NP
<i>gabapentin 100 mg cap, 300 mg cap, 400 mg cap</i>	1	QL (9 EA PER DAY), P
<i>gabapentin 250 mg/5ml, 300 mg/6ml</i>	1	QL (72 ML PER DAY), P
<i>gabapentin 600 mg tab</i>	1	QL (6 EA PER DAY), P
<i>gabapentin 800 mg tab</i>	1	QL (4.5 EA PER DAY), P
KEPPRA 100 MG/ML SOLUTION, 250 MG TAB, 500 MG TAB, 750 MG TAB, 1000 MG TAB	2	PA, NP
KEPPRA XR	2	PA, NP
<i>lacosamide 10 mg/ml, 50 mg/5ml, 100 mg/10ml</i>	1	
<i>lacosamide 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab</i>	1	P
LAMICTAL	2	PA, NP
LAMICTAL ODT	2	PA, NP
LAMICTAL STARTER	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
LAMICTAL XR	2	PA, NP
<i>lamotrigine 21 25 mg 7 50 mg, 25 50 100 mg, 42 50 mg 14100 mg</i>	1	PA, NP
<i>lamotrigine 25 mg tab disp, 50 mg tab disp, 100 mg tab disp, 200 mg tab disp</i>	1	PA, EDS, NP
<i>lamotrigine 5 mg chew tab, 25 mg chew tab, 25 mg tab, 100 mg tab, 150 mg tab, 200 mg tab</i>	1	EDS, P
<i>lamotrigine er</i>	1	EDS, P
<i>lamotrigine starter kit-blue</i>	1	PA, NP
<i>lamotrigine starter kit-green</i>	1	PA, NP
<i>lamotrigine starter kit-orange</i>	1	PA, NP
<i>levetiracetam 100 mg/ml solution, 250 mg tab, 500 mg tab, 500 mg/5ml solution, 750 mg tab, 1000 mg tab</i>	1	EDS, P
<i>levetiracetam er</i>	1	EDS, P
LYRICA 20 MG/ML SOLUTION	2	PA, QL (30 ML PER DAY), NP
LYRICA 225 MG CAP, 300 MG CAP	2	PA, QL (2 EA PER DAY), NP
LYRICA 25 MG CAP, 50 MG CAP, 75 MG CAP, 100 MG CAP, 150 MG CAP, 200 MG CAP	2	PA, QL (3 EA PER DAY), NP
MOTPOLY XR	2	PA, NP
MYSOLINE	2	PA, NP
NEURONTIN 100 MG CAP, 300 MG CAP, 400 MG CAP	2	PA, QL (9 EA PER DAY), NP
NEURONTIN 250 MG/5ML SOLUTION	2	PA, QL (72 ML PER DAY), NP
NEURONTIN 600 MG TAB	2	PA, QL (6 EA PER DAY), NP
NEURONTIN 800 MG TAB	2	PA, QL (4.5 EA PER DAY), NP
<i>oxcarbazepine</i>	1	EDS, P
OXTELLAR XR	2	PA, NP
<i>pregabalin 20 mg/ml solution</i>	1	PA, QL (30 ML PER DAY), NP
<i>pregabalin 225 mg cap, 300 mg cap</i>	1	QL (2 EA PER DAY), P
<i>pregabalin 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap, 200 mg cap</i>	1	QL (3 EA PER DAY), P
PRIMIDONE 125 MG TAB	2	P
<i>primidone 50 mg tab, 250 mg tab</i>	1	EDS, P



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
QUDEXY XR	1	P
<i>roweepra</i>	1	EDS, P
<i>roweepra xr</i>	1	EDS, P
<i>rufinamide</i>	1	PA, EDS, NP
SPRITAM	2	PA, NP
<i>subvenite</i>	1	EDS, P
<i>subvenite starter kit-blue</i>	1	PA, NP
<i>subvenite starter kit-green</i>	1	PA, NP
<i>subvenite starter kit-orange</i>	1	PA, NP
TEGRETOL	2	PA, NP
TEGRETOL-XR	2	PA, NP
TOPAMAX	2	PA, NP
TOPAMAX SPRINKLE	2	PA, NP
<i>topiramate 15 mg cap sprink, 25 mg cap sprink, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab</i>	1	EDS, P
TOPIRAMATE 50 MG CAP SPRINK	2	EDS, P
<i>topiramate er er 25 mg cap er, er 50 mg cap er, er 100 mg cap er, er 200 mg cap er</i>	1	PA, NP
<i>topiramate er er 25 mg, er 50 mg, er 100 mg, er 150 mg, er 200 mg</i>	1	PA, NP
TRILEPTAL	2	PA, NP
TROKENDI XR	2	PA, NP
VIMPAT 10 MG/ML SOLUTION, 50 MG TAB, 100 MG TAB, 150 MG TAB, 200 MG TAB	2	PA, NP
ZONISADE	2	PA, NP
<i>zonisamide 25 mg cap, 50 mg cap, 100 mg cap</i>	1	EDS, P
ZTALMY	2	PA, LA, NP
<b>CARBAMATES</b>		
<i>felbamate</i>	1	EDS, P
FELBATOL 400 MG TAB, 600 MG TAB	2	PA, NP
XCOPRI (250 MG DAILY DOSE)	2	PA, QL (2 EA PER DAY), NP
XCOPRI (350 MG DAILY DOSE)	2	PA, QL (2 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK, 14 X 150 MG & 14 X200 MG TAB THPK, 14 X 50 MG & 14 X100 MG TAB THPK, 50 MG TAB, 100 MG TAB	2	PA, QL (1 EA PER DAY), NP
XCOPRI 150 MG TAB, 200 MG TAB	2	PA, QL (2 EA PER DAY), NP
XCOPRI 25 MG TAB	2	PA, QL (1 EA PER 1 DAY), NP
<b>GABA MODULATORS</b>		
SABRIL	2	PA, LA, NP
<i>tiagabine hcl</i>	1	PA, EDS, NP
<i>vigabatrin</i>	1	PA, LA, NP
<i>vigadrone</i>	1	PA, LA, NP
<i>vigpoder</i>	1	PA, LA, NP
<b>HYDANTOINS</b>		
DILANTIN 100 MG CAP	1	P
DILANTIN 125 MG/5ML SUSPENSION	2	PA, NP
DILANTIN 30 MG CAP	2	P
DILANTIN INFATABS	2	PA, NP
DILANTIN-125	2	PA, NP
<i>fosphenytoin sodium</i>	1	
<i>phenytek</i>	1	EDS, P
<i>phenytoin 50 mg chew tab, 100 mg/4ml suspension, 125 mg/5ml suspension</i>	1	EDS, P
<i>phenytoin infatabs</i>	1	EDS, P
<i>phenytoin sodium extended</i>	1	EDS, P
<b>SUCCINIMIDES</b>		
CELONTIN	1	P
<i>ethosuximide 250 mg cap, 250 mg/5ml solution</i>	1	EDS, P
<i>methsuximide</i>	1	PA, NP
ZARONTIN	2	PA, NP
<b>VALPROIC ACID</b>		
DEPAKOTE	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
DEPAKOTE ER	2	PA, NP
DEPAKOTE SPRINKLES	2	PA, NP
<i>divalproex sodium 125 mg cap dr, 125 mg tab dr, 250 mg tab dr, 500 mg tab dr</i>	1	EDS, P
<i>divalproex sodium er</i>	1	EDS, P
<i>valproic acid 250 mg cap, 250 mg/5ml solution, 500 mg/10ml solution</i>	1	EDS, P

## **ANTIDEPRESSANTS**

### **ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)**

<i>mirtazapine 7.5 mg tab, 15 mg tab, 15 mg tab disp, 30 mg tab, 30 mg tab disp, 45 mg tab, 45 mg tab disp</i>	1	EDS, P
REMERON	2	PA, NP
REMERON SOLTAB	2	PA, NP

### **ANTIDEPRESSANT COMBINATIONS**

AUVELITY	2	PA, NP
----------	---	--------

### **ANTIDEPRESSANTS - MISC.**

APLENZIN	2	PA, QL (1 EA PER DAY), NP
<i>bupropion hcl 75 mg tab, 100 mg tab</i>	1	QL (3 EA PER DAY), EDS, P
<i>bupropion hcl er (smoking det)</i>	\$0	QL (2 EA PER DAY), EDS
<i>bupropion hcl er (sr)</i>	1	QL (2 EA PER DAY), EDS, P
BUPROPION HCL ER (XL) 450 MG TAB 24H	2	PA, QL (1 EA PER DAY), NP
<i>bupropion hcl er (xl) er 150 mg tab er, er 300 mg tab er</i>	1	QL (1 EA PER DAY), EDS, P
FORFIVO XL	2	PA, QL (1 EA PER DAY), NP
WELLBUTRIN SR	2	PA, QL (2 EA PER DAY), NP
WELLBUTRIN XL	2	PA, QL (1 EA PER DAY), NP

### **GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID**

ZURZUVAE	2	PA, LA, QL (28 EA PER 30 DAYS)
----------	---	--------------------------------

### **MONOAMINE OXIDASE INHIBITORS (MAOIS)**

NARDIL	1	
--------	---	--

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PHENELZINE SULFATE 15 MG TAB	1	
<i>phenelzine sulfate 15 mg tab</i>	1	EDS
<i>tranylcypromine sulfate</i>	1	EDS
<b>N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS</b>		
SPRAVATO (56 MG DOSE)	2	PA, SP
SPRAVATO (84 MG DOSE)	2	PA, SP
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
CELEXA	2	PA, NP
<i>citalopram hydrobromide 10 mg tab, 10 mg/5ml solution, 20 mg tab, 40 mg tab</i>	1	EDS, P
CITALOPRAM HYDROBROMIDE 30 MG CAP	2	PA, NP
<i>escitalopram oxalate 5 mg tab, 10 mg tab, 20 mg tab</i>	1	EDS, P
<i>escitalopram oxalate 5 mg/5ml solution</i>	1	PA, EDS, NP
<i>fluoxetine hcl 10 mg cap, 20 mg cap, 20 mg/5ml solution, 40 mg cap</i>	1	EDS, P
<i>fluoxetine hcl 10 mg tab</i>	1	PA, QL (30 UNITS PER 30 DAYS), EDS, NP
<i>fluoxetine hcl 20 mg tab, 60 mg tab</i>	1	PA, EDS, NP
FLUOXETINE HCL 60 MG TAB, 90 MG CAP DR	2	PA, NP
<i>fluvoxamine maleate 100 mg tab</i>	1	QL (90 UNITS PER 30 DAYS), EDS, P
<i>fluvoxamine maleate 25 mg tab</i>	1	QL (30 UNITS PER 30 DAYS), EDS, P
<i>fluvoxamine maleate 50 mg tab</i>	1	QL (60 UNITS PER 30 DAYS), EDS, P
<i>fluvoxamine maleate er</i>	1	PA, QL (68 UNITS PER FILL), EDS, NP
LEXAPRO	2	PA, NP
<i>paroxetine hcl 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab</i>	1	EDS, P
<i>paroxetine hcl 10 mg/5ml suspension</i>	1	PA, NP
<i>paroxetine hcl er</i>	1	PA, EDS, NP
PAXIL	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PAXIL CR	2	PA, NP
PEXEVA	2	PA, NP
PROZAC	2	PA, NP
SERTRALINE HCL 150 MG CAP, 200 MG CAP	2	PA, NP
<i>sertraline hcl 20 mg/ml conc, 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS, P
ZOLOFT	2	PA, NP
<b>SEROTONIN MODULATORS</b>		
NEFAZODONE HCL	1	P
<i>trazodone hcl 50 mg tab, 100 mg tab, 150 mg tab, 300 mg tab</i>	1	EDS, P
TRINTELLIX	2	PA, QL (1 EA PER DAY), NP
VIIBRYD	1	P
<i>vilazodone hcl</i>	1	PA, EDS, NP
<b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b>		
CYMBALTA	2	PA, NP
<i>desvenlafaxine succinate er</i>	1	PA, EDS, NP
DRIZALMA SPRINKLE	2	PA, NP
<i>duloxetine hcl 20 mg dr, 30 mg dr, 60 mg dr</i>	1	EDS, P
<i>duloxetine hcl 40 mg cp dr part</i>	1	PA, EDS, NP
EFFEXOR XR 150 MG CAP ER 24H	2	PA, QL (60 UNITS PER 30 DAYS), NP
EFFEXOR XR 37.5 MG CAP ER 24H	2	PA, QL (30 UNITS PER 30 DAYS), NP
EFFEXOR XR 75 MG CAP ER 24H	2	PA, NP
FETZIMA	2	PA, NP
FETZIMA TITRATION	2	PA, NP
PRISTIQ	2	PA, NP
<i>venlafaxine hcl</i>	1	EDS, P
<i>venlafaxine hcl er er 37.5 mg cap er, er 75 mg cap er, er 150 mg cap er</i>	1	EDS, P
<i>venlafaxine hcl er er 37.5 mg tab er, er 75 mg tab er, er 150 mg tab er, er 225 mg tab er</i>	1	PA, EDS, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>TRICYCLIC AGENTS</b>		
<i>amitriptyline hcl 10 mg tab, 25 mg tab, 50 mg tab, 75 mg tab, 100 mg tab, 150 mg tab</i>	1	EDS
<i>amoxapine</i>	1	EDS
<i>clomipramine hcl 25 mg cap, 50 mg cap, 75 mg cap</i>	1	EDS
<i>desipramine hcl 10 mg tab, 25 mg tab, 50 mg tab, 75 mg tab, 100 mg tab, 150 mg tab</i>	1	EDS
<i>doxepin hcl 10 mg cap, 10 mg/ml conc, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap</i>	1	EDS
<i>imipramine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	1	EDS
<i>imipramine pamoate</i>	1	EDS
<i>nortriptyline hcl 10 mg cap, 10 mg/5ml solution, 25 mg cap, 50 mg cap, 75 mg cap</i>	1	EDS
<i>protriptyline hcl</i>	1	EDS

## **ANTIDIABETICS**

### **ALPHA-GLUCOSIDASE INHIBITORS**

<i>acarbose 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS, P
<i>miglitol</i>	1	PA, EDS, NP
MIGLITOL	2	PA, NP
PRECOSE	2	PA, NP

### **ANTIDIABETIC - AMYLIN ANALOGS**

SYMLINPEN 120	2	PA, P
SYMLINPEN 60	2	PA, P

### **ANTIDIABETIC COMBINATIONS**

ALOGLIPTIN-METFORMIN HCL	1	PA, QL (2 EA PER DAY), NP
ALOGLIPTIN-PIOGLITAZONE	1	PA, QL (1 EA PER DAY), NP
DAPAGLIFLOZIN PRO-METFORMIN ER -10-1000 MG TAB 24H	1	PA, QL (1 EA PER DAY), NP
DAPAGLIFLOZIN PRO-METFORMIN ER -5-1000 MG TAB 24H	1	PA, QL (2 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
DUETACT	2	PA, NP
<i>glipizide-metformin hcl</i>	1	EDS
<i>glyburide-metformin</i>	1	EDS
GLYXAMBI	2	PA, QL (1 EA PER DAY), NP
INVOKAMET	2	PA, QL (2 EA PER DAY), NP
INVOKAMET XR	2	PA, QL (2 EA PER DAY), NP
JANUMET	2	PA, QL (2 EA PER DAY), P
JANUMET XR 100-1000 MG TAB ER 24H	2	PA, QL (1 EA PER DAY), P
JANUMET XR 50-1000 MG TAB ER 24H, 50-500 MG TAB ER 24H	2	PA, QL (2 EA PER DAY), P
JENTADUETO	2	PA, QL (2 EA PER DAY), P
JENTADUETO XR 2.5-1000 MG TAB ER 24H	2	PA, QL (2 EA PER DAY), P
JENTADUETO XR 5-1000 MG TAB ER 24H	2	PA, QL (1 EA PER DAY), P
<i>pioglitazone hcl-glimepiride</i>	1	PA, EDS, NP
<i>pioglitazone hcl-metformin hcl</i>	1	PA, EDS, NP
QTERN	2	PA, QL (1 EA PER DAY), NP
<i>saxagliptin-metformin er</i>	1	PA, QL (2 EA PER DAY), NP
SEGLUROMET	2	PA, QL (2 EA PER DAY), NP
SOLIQUA	2	PA, QL (0.6 ML PER DAY), NP
STEGLUJAN	2	PA, QL (1 EA PER DAY), NP
SYNJARDY	2	PA, QL (2 EA PER DAY), NP
SYNJARDY XR 10-1000 MG TAB ER 24H, 25-1000 MG TAB ER 24H	2	PA, QL (1 EA PER DAY), NP
SYNJARDY XR 5-1000 MG TAB ER 24H, 12.5-1000 MG TAB ER 24H	2	PA, QL (2 EA PER DAY), NP
TRIJARDY XR 10-5-1000 MG TAB ER 24H, 25-5-1000 MG TAB ER 24H	2	PA, QL (1 EA PER DAY), NP
TRIJARDY XR 5-2.5-1000 MG TAB ER 24H, 12.5-2.5-1000 MG TAB ER 24H	2	PA, QL (2 EA PER DAY), NP
XIGDUO XR 2.5-1000 MG TAB ER 24H, 5-1000 MG TAB ER 24H	2	PA, QL (2 EA PER DAY), NP
XIGDUO XR 5-500 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 10-500 MG TAB ER 24H	2	PA, QL (1 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
XULTOPHY	2	PA, QL (0.5 ML PER DAY), NP
ZITUVIMET	1	PA, NP
<b>BIGUANIDES</b>		
<i>metformin hcl 500 mg tab, 850 mg tab, 1000 mg tab</i>	1	EDS
<i>metformin hcl er</i>	1	EDS
<b>DIABETIC OTHER</b>		
BAQSIMI ONE PACK	2	QL (2 EA PER 1 FILL), P
BAQSIMI TWO PACK	2	QL (2 EA PER 1 FILL), P
<i>diazoxide 50 mg/ml suspension</i>	1	
GLUCAGEN HYPOKIT	2	QL (2 EA PER FILL)
GLUCAGON EMERGENCY 1 MG KIT	1	QL (2 EA PER FILL), P
GLUCAGON EMERGENCY 1 MG/ML RECON SOLN	1	PA, QL (2 EA PER FILL), NP
<i>glucose (dextrose)</i>	2	OTC
GVOKE HYPOPEN 1-PACK	2	PA, QL (2 EA PER FILL), NP
GVOKE HYPOPEN 2-PACK	2	PA, QL (2 EA PER FILL), NP
GVOKE KIT	2	PA, QL (2 EA PER FILL), NP
GVOKE PFS	2	PA, QL (2 EA PER FILL), NP
ZEGALOGUE	2	PA, QL (2 EA PER FILL), NP
<b>DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS</b>		
ALOGLIPTIN BENZOATE	1	PA, QL (1 EA PER DAY), NP
JANUVIA	2	PA, QL (1 EA PER DAY), P
<i>saxagliptin hcl</i>	1	PA, QL (1 EA PER DAY), NP
SITAGLIPTIN	1	PA, NP
TRADJENTA	2	PA, QL (1 EA PER DAY), P
ZITUVIO	2	PA, NP
<b>INCRETIN MIMETIC AGENTS</b>		
BYDUREON BCISE	2	PA, QL (3.4 ML PER 28 DAYS), P
BYETTA 10 MCG PEN	2	PA, QL (2.4 ML PER 28 DAYS), P
BYETTA 5 MCG PEN	2	PA, QL (1.2 ML PER 28 DAYS), P



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>liraglutide</i>	1	PA, QL (0.3 ML PER 1 DAY), NP
MOUNJARO	2	PA, QL (2 ML PER 28 DAYS), NP
OZEMPIC (0.25 OR 0.5 MG/DOSE) (MG/1.5ML SOLN PEN	2	PA, QL (1.5 ML PER 28 DAYS), P
OZEMPIC (0.25 OR 0.5 MG/DOSE) (MG/3ML SOLN PEN	2	PA, QL (3 ML PER 28 DAYS), P
OZEMPIC (1 MG/DOSE)	2	PA, QL (3 ML PER 28 DAYS), P
OZEMPIC (2 MG/DOSE)	2	PA, QL (3 ML PER 28 DAYS), P
RYBELSUS	2	PA, QL (1 EA PER DAY), NP
TRULICITY	2	PA, QL (2 ML PER 28 DAYS), NP
VICTOZA	1	PA, QL (0.3 ML PER 1 DAY), P

## **INSULIN**

ADMELOG	2	PA, NP
ADMELOG SOLOSTAR	2	PA, NP
AFREZZA	2	PA, NP
APIDRA	2	PA, NP
APIDRA SOLOSTAR	2	PA, NP
BASAGLAR KWIKPEN	2	PA, NP
BASAGLAR TEMPO PEN	2	PA, NP
FIASP	2	PA, NP
FIASP FLEXTOUCH	2	PA, NP
FIASP PENFILL	2	PA, NP
FIASP PUMPCART	2	PA, NP
HUMALOG 100 UNIT/ML SOLN CART	2	P
HUMALOG 100 UNIT/ML SOLUTION	2	PA, NP
HUMALOG JUNIOR KWIKPEN	2	P
HUMALOG KWIKPEN KWIK100 UNIT/ML SOLN	2	P
HUMALOG KWIKPEN KWIK200 UNIT/ML SOLN	2	PA, NP
HUMALOG MIX 50/50	2	P
HUMALOG MIX 50/50 KWIKPEN	2	P
HUMALOG MIX 75/25	2	P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
HUMALOG MIX 75/25 KWIKPEN	2	P
HUMALOG TEMPO PEN	2	PA, NP
HUMULIN 70/30	2	OTC, P
HUMULIN 70/30 KWIKPEN	2	OTC, P
HUMULIN N	2	OTC, P
HUMULIN N KWIKPEN	2	PA, OTC, NP
HUMULIN R	2	OTC, P
HUMULIN R U-500 (CONCENTRATED)	2	P
HUMULIN R U-500 KWIKPEN	2	P
INSULIN ASP PROT & ASP FLEXPEN	2	P
INSULIN ASPART	2	P
INSULIN ASPART FLEXPEN	2	P
INSULIN ASPART PENFILL	2	P
INSULIN ASPART PROT & ASPART	2	P
INSULIN DEGLUDEC	2	PA, NP
INSULIN DEGLUDEC FLEXTOUCH	2	PA, NP
INSULIN GLARGINE MAX SOLOSTAR	2	PA, NP
INSULIN GLARGINE-YFGN	2	PA, NP
INSULIN LISPRO	2	P
INSULIN LISPRO (1 UNIT DIAL)	2	P
INSULIN LISPRO JUNIOR KWIKPEN	2	P
INSULIN LISPRO PROT & LISPRO	2	PA, NP
LANTUS	2	P
LANTUS SOLOSTAR	2	P
LYUMJEV	2	PA, NP
LYUMJEV KWIKPEN	2	PA, NP
NOVOLIN 70/30	2	PA, OTC, NP
NOVOLIN 70/30 FLEXPEN	2	PA, OTC, NP
NOVOLIN 70/30 FLEXPEN RELION	2	PA, OTC, NP
NOVOLIN 70/30 RELION	2	PA, OTC, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
NOVOLIN N	2	OTC, P
NOVOLIN N FLEXPEN	2	PA, OTC, NP
NOVOLIN N FLEXPEN RELION	2	PA, OTC, NP
NOVOLIN N RELION	2	OTC, P
NOVOLIN R	2	OTC, P
NOVOLIN R FLEXPEN	2	PA, OTC, NP
NOVOLIN R FLEXPEN RELION	2	PA, OTC, NP
NOVOLIN R RELION	2	OTC, P
NOVOLOG	2	P
NOVOLOG 70/30 FLEXPEN RELION	2	P
NOVOLOG FLEXPEN	2	P
NOVOLOG FLEXPEN RELION	2	P
NOVOLOG MIX 70/30	2	P
NOVOLOG MIX 70/30 FLEXPEN	2	P
NOVOLOG MIX 70/30 RELION	2	P
NOVOLOG PENFILL	2	P
NOVOLOG RELION	2	P
REZVOGLAR KWIKPEN	2	PA, NP
SEMGLEE (YFGN)	2	PA, NP
SEMGLEE 100 UNIT/ML SOLUTION	2	PA, NP
TOUJEO MAX SOLOSTAR	2	PA, NP
TOUJEO SOLOSTAR	2	PA, NP
TRESIBA	2	PA, NP
TRESIBA FLEXTOUCH	2	PA, NP
<b>INSULIN SENSITIZING AGENTS</b>		
<i>pioglitazone hcl</i>	1	EDS, P
<b>MEGLITINIDE ANALOGUES</b>		
<i>nateglinide</i>	1	EDS, P
<i>repaglinide</i>	1	EDS, P
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</b>		
DAPAGLIFLOZIN PROPANEDIOL	1	PA, QL (1 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
FARXIGA	1	QL (1 EA PER DAY), P
INVOKANA	2	QL (1 EA PER DAY), P
JARDIANCE	2	QL (1 EA PER DAY), P
STEGLATRO	2	PA, QL (1 EA PER DAY), NP

## **SULFONYLUREAS**

<i>glimepiride 1 mg tab, 2 mg tab, 4 mg tab</i>	1	EDS
<i>glipizide 5 mg tab, 10 mg tab</i>	1	EDS
<i>glipizide er</i>	1	EDS
<i>glipizide xl</i>	1	EDS
<i>glyburide 1.25 mg tab, 2.5 mg tab, 5 mg tab</i>	1	EDS

## **ANTIDIARRHEAL/PROBIOTIC AGENTS**

### **ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.**

<i>bismuth subsalicylate</i>	1	OTC
BISMUTH SUBSALICYLATE	2	OTC
<i>bismuth subsalicylate (pepto-bismol)</i>	1	OTC

### **ANTIPERISTALTIC AGENTS**

<i>diphenoxylate-atropine -2.5-0.025 mg tab</i>	1	
DIPHENOXYLATE-ATROPINE -2.5-0.025 MG/5ML LIQUID	2	
LOPERAMIDE	2	OTC
<i>loperamide</i>	1	OTC, EDS
<i>opium</i>	1	QL (2.4 ML PER DAY)

## **ANTIDOTES AND SPECIFIC ANTAGONISTS**

### **ANTIDOTES - CHELATING AGENTS**

CHEMET	2	
<i>deferasirox 90 mg packet, 180 mg packet, 360 mg packet</i>	1	LA, SP
<i>deferasirox 90 mg tab, 125 mg tab sol, 180 mg tab, 250 mg tab sol, 360 mg tab, 500 mg tab sol</i>	1	SP
<i>deferasirox granules</i>	1	LA, SP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<i>activated charcoal</i>	1	OTC
VISTOGARD	2	LA
<b>OPIOID ANTAGONISTS</b>		
KLOXXADO	2	P
NALMEFENE HCL	2	
NALOXONE HCL 0.4 MG/ML SOLN CART	2	QL (2 EA PER 1 FILL), P
<i>naloxone hcl 4 mg/0.1ml liquid</i>	1	PA, OTC, NP
NALOXONE HCL NALOXONE HCL 2 MG/2ML SOLN PRSYR, NALOXONE HCL 0.4 MG/ML SOLN PRSYR, NALOXONE HCL 0.4 MG/ML SOLUTION, NALOXONE HCL 4 MG/10ML SOLUTION	1	P
<i>naltrexone hcl 50 mg tab</i>	1	EDS
NARCAN	2	OTC, P
OPVEE	2	PA, NP
ZIMHI	2	PA, NP
<b>ANTIEMETICS</b>		
<b>5-HT3 RECEPTOR ANTAGONISTS</b>		
ANZEMET 50 MG TAB	2	PA, NP
<i>granisetron hcl 1 mg tab</i>	1	PA, QL (14 EA PER FILL), NP
<i>granisetron hcl 1 mg/ml, 4 mg/4ml</i>	1	
<i>ondansetron hcl 4 mg tab, 4 mg/5ml solution, 8 mg tab</i>	1	P
<i>ondansetron hcl 4 mg/2ml, 40 mg/20ml</i>	1	
<i>ondansetron ondansetron 4 mg tab disp, ondansetron 8 mg tab disp, ondansetron 16 mg tab disp</i>	1	P
SANCUSO	2	PA, QL (1 UNIT PER FILL), NP
ZOFRAN	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTIEMETICS - ANTICHOLINERGIC</b>		
<i>dimenhydrinate (dramamine)</i>	1	OTC
<i>meclizine</i>	1	OTC
<i>scopolamine</i>	1	PA, NP
TRANSDERM SCOP (1.5 MG)	1	P
TRANSDERM-SCOP	1	P
<i>trimethobenzamide hcl 300 mg cap</i>	1	
<b>ANTIEMETICS - MISCELLANEOUS</b>		
AKYNZEO 300-0.5 MG CAP	2	PA, NP
BONJESTA	2	PA, NP
DICLEGIS	1	P
<i>doxylamine-pyridoxine</i>	1	PA, NP
<i>dronabinol</i>	1	
<b>SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS</b>		
<i>aprepitant</i>	1	QL (3 EA PER FILL)
<b>ANTIFUNGALS</b>		
<b>ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS</b>		
<i>micafungin sodium</i>	1	
<b>ANTIFUNGALS</b>		
AMPHOTERICIN B 50 MG RECON SOLN	2	
ANCOBON	2	PA, NP
<i>flucytosine 250 mg cap, 500 mg cap</i>	1	PA, NP
<i>griseofulvin microsize 125 mg/5ml suspension, 500 mg tab</i>	1	PA, NP
<i>griseofulvin ultramicrosize</i>	1	PA, NP
<i>nystatin 500000 unit tab</i>	1	PA, NP
<i>terbinafine hcl 250 mg tab</i>	1	P
<b>IMIDAZOLE-RELATED ANTIFUNGALS</b>		
CRESEMBA 74.5 MG CAP, 186 MG CAP	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
DIFLUCAN 10 MG/ML RECON SUSP, 40 MG/ML RECON SUSP	2	PA, NP
<i>fluconazole 10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab</i>	1	P
<i>fluconazole in sodium chloride in 200-0.9 mg/100ml-%, in 400-0.9 mg/200ml-%</i>	1	
<i>itraconazole 10 mg/ml solution, 100 mg cap</i>	1	PA, NP
<i>ketoconazole 200 mg tab</i>	1	PA, NP
NOXAFIL 40 MG/ML SUSPENSION, 100 MG TAB DR	2	PA, NP
<i>posaconazole 40 mg/ml suspension, 100 mg tab dr</i>	1	PA, NP
SPORANOX	2	PA, NP
SPORANOX PULSEPAK	2	PA, NP
TOLSURA	2	PA, NP
VIVJOA	2	PA, NP
<i>voriconazole 40 mg/ml recon susp</i>	1	PA, NP
<i>voriconazole 50 mg tab, 200 mg recon soln, 200 mg tab</i>	1	

## **ANTIHISTAMINES**

### **ANTIHISTAMINES - ALKYLAMINES**

<i>chlorpheniramine</i>	1	OTC
-------------------------	---	-----

### **ANTIHISTAMINES - ETHANOLAMINES**

<i>carbinoxamine maleate 4 mg tab</i>	1	
CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION	2	
<i>clemastine fumarate</i>	1	OTC
CLEMASTINE FUMARATE	1	
<i>diphenhydramine (benadryl)</i>	1	OTC
<i>diphenhydramine (sleep)</i>	1	OTC
<i>diphenhydramine</i>	1	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTIHISTAMINES - NON-SEDATING</b>		
<i>cetirizine (zyrtec)</i>	1	OTC, EDS, P
<i>cetirizine chew tab (zyrtec)</i>	1	PA, OTC, EDS, NP
CLARINEX	2	PA, NP
DESLORATADINE 2.5 MG TAB DISP, 5 MG TAB DISP	2	PA, NP
<i>desloratadine 5 mg tab</i>	1	PA, EDS, NP
<i>fexofenadine (allegra)</i>	1	OTC
<i>levocetirizine (xyzal)</i>	1	OTC, EDS, P
<i>loratadine (claritin)</i>	1	OTC, EDS, P
<b>ANTIHISTAMINES - PHENOTHIAZINES</b>		
<i>promethazine hcl 6.25 mg/5ml solution, 12.5 mg suppos, 12.5 mg tab, 25 mg suppos, 25 mg tab, 25 mg/ml solution, 50 mg tab, 50 mg/ml solution</i>	1	
<i>promethegan 12.5 mg suppos, 25 mg suppos</i>	1	
<b>ANTIHISTAMINES - PIPERIDINES</b>		
<i>cyproheptadine hcl 2 mg/5ml syrup, 4 mg tab</i>	1	EDS
<b>ANTIHYPERLIPIDEMICS</b>		
<b>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</b>		
NEXLETOL	2	PA, NP
<b>ANGIOPOIETIN-LIKE PROTEIN INHIBITORS</b>		
EVKEEZA	2	PA, LA, NP
<b>ANTIHYPERLIPIDEMICS - COMBINATIONS</b>		
<i>ezetimibe-simvastatin</i>	1	PA, EDS, NP
NEXLIZET	2	PA, NP
VYTORIN	2	PA, NP
<b>ANTIHYPERLIPIDEMICS - MISC.</b>		
<i>icosapent ethyl</i>	1	PA, EDS, NP
LOVAZA	2	PA, NP
<i>omega-3-acid ethyl esters</i>	1	EDS, P



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
VASCEPA	2	PA, NP
<b>BILE ACID SEQUESTRANTS</b>		
<i>cholestyramine 4 gm packet, 4 gm/dose powder</i>	1	EDS, P
<i>cholestyramine light</i>	1	EDS, P
<i>colesevelam hcl</i>	1	PA, EDS, NP
COLESTID 1 GM TAB	2	PA, NP
<i>colestipol hcl</i>	1	EDS, P
<i>prevalite</i>	1	EDS, P
QUESTRAN	2	PA, NP
QUESTRAN LIGHT	2	PA, NP
WELCHOL	2	PA, NP
<b>FIBRIC ACID DERIVATIVES</b>		
ANTARA	2	PA, NP
<i>fenofibrate 48 mg tab, 54 mg tab, 67 mg cap, 134 mg cap, 145 mg tab, 160 mg tab, 200 mg cap</i>	1	EDS, P
FENOFIBRATE FENOFIBRATE 120 MG TAB, FENOFIBRATE 50 MG CAP, FENOFIBRATE 150 MG CAP, FENOFIBRATE 40 MG TAB	1	PA, NP
FENOFIBRATE MICRONIZED 30 MG CAP, 90 MG CAP	1	PA, NP
<i>fenofibrate micronized 43 mg cap, 130 mg cap</i>	1	PA, EDS, NP
<i>fenofibrate micronized 67 mg cap, 134 mg cap, 200 mg cap</i>	1	EDS, P
FENOFIBRIC ACID 35 MG TAB, 105 MG TAB	1	PA, NP
<i>fenofibric acid 45 mg cap dr, 135 mg cap dr</i>	1	PA, EDS, NP
FENOGLIDE	2	PA, NP
FIBRICOR	1	PA, NP
<i>gemfibrozil 600 mg tab</i>	1	EDS, P
LIPOFEN	2	PA, NP
LOPID	2	PA, NP
TRICOR	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
TRILIPIX	2	PA, NP
<b>HMG COA REDUCTASE INHIBITORS</b>		
ALTOPREV	2	PA, NP
ATORVALIQ	2	PA, NP
<i>atorvastatin calcium 10 mg tab, 20 mg tab</i>	\$0	EDS, P
<i>atorvastatin calcium 40 mg tab, 80 mg tab</i>	1	EDS, P
CRESTOR	2	PA, NP
EZALLOR SPRINKLE	2	PA, NP
<i>fluvastatin sodium</i>	\$0	PA, NP
<i>fluvastatin sodium er</i>	\$0	PA, NP
LESCOL XL	2	PA, QL (34 UNITS PER FILL), NP
LIPITOR	2	PA, NP
LIVALO	2	PA, NP
<i>lovastatin 10 mg tab, 20 mg tab, 40 mg tab</i>	\$0	EDS, P
<i>pravastatin sodium</i>	\$0	EDS, P
<i>rosuvastatin calcium 20 mg tab, 40 mg tab</i>	1	EDS, P
<i>rosuvastatin calcium 5 mg tab, 10 mg tab</i>	\$0	EDS, P
<i>simvastatin 5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab</i>	\$0	EDS, P
<i>simvastatin 80 mg tab</i>	1	EDS, P
ZOCOR	2	PA, NP
ZYPITAMAG	2	PA, NP
<b>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe</i>	1	EDS, P
ZETIA	2	PA, NP
<b>NICOTINIC ACID DERIVATIVES</b>		
NIACIN (ANTIHYPERLIPIDEMIC)	2	PA, NP
<i>niacin er (antihyperlipidemic)</i>	1	EDS, P
NIACOR	2	PA, NP
NIASPAN	1	P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>PROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS</b>		
LEQVIO	2	PA, NP
PRALUENT	2	PA, QL (2 EA PER 28 DAYS), NP
REPATHA	2	PA, QL (2 EA PER 28 DAYS), NP
REPATHA PUSHTRONEX SYSTEM	2	PA, QL (3.5 ML PER 28 DAYS), NP
REPATHA SURECLICK	2	PA, QL (2 EA PER 28 DAYS), NP

## **ANTIHYPERTENSIVES**

### **ACE INHIBITORS**

ACCUPRIL	2	PA, NP
ALTACE	2	PA, NP
<i>benazepril hcl 5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab</i>	1	EDS, P
<i>captopril 12.5 mg tab, 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS, P
<i>enalapril maleate 1 mg/ml solution</i>	1	PA, EDS, NP
<i>enalapril maleate 2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab</i>	1	EDS, P
EPANED	2	PA, NP
<i>fosinopril sodium</i>	1	EDS, P
<i>lisinopril 2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab</i>	1	EDS, P
LOTENSIN	2	PA, NP
<i>moexipril hcl</i>	1	EDS, P
<i>perindopril erbumine</i>	1	EDS, P
PERINDOPRIL ERBUMINE 2 MG TAB	1	P
PERINDOPRIL ERBUMINE 8 MG TAB	2	P
PRINIVIL	2	PA, NP
QBRELIS	2	PA, NP
<i>quinapril hcl</i>	1	EDS, P
<i>ramipril</i>	1	EDS, P
<i>trandolapril</i>	1	EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
VASOTEC	2	PA, NP
ZESTRIL	2	PA, NP
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
ATACAND	2	PA, NP
AVAPRO	2	PA, NP
BENICAR	2	PA, NP
<i>candesartan cilexetil</i>	1	PA, EDS, NP
COZAAR	2	PA, NP
DIOVAN	2	PA, NP
EDARBI	2	PA, NP
EPROSARTAN MESYLATE	2	PA, NP
<i>irbesartan</i>	1	EDS, P
<i>losartan potassium 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS, P
MICARDIS	2	PA, NP
<i>olmesartan medoxomil 5 mg tab, 20 mg tab, 40 mg tab</i>	1	EDS, P
<i>telmisartan</i>	1	PA, EDS, NP
VALSARTAN 4 MG/ML SOLUTION	1	P
<i>valsartan 40 mg tab, 80 mg tab, 160 mg tab, 320 mg tab</i>	1	EDS, P
<b>ANTIADRENERGIC ANTIHYPERTENSIVES</b>		
CARDURA	2	PA, NP
<i>clonidine</i>	1	EDS
<i>clonidine hcl 0.1 mg tab, 0.2 mg tab, 0.3 mg tab</i>	1	EDS
<i>doxazosin mesylate 1 mg tab, 2 mg tab, 4 mg tab</i>	1	QL (30 UNITS PER 30 DAYS), EDS, P
<i>doxazosin mesylate 8 mg tab</i>	1	QL (60 UNITS PER 30 DAYS), EDS, P
<i>guanfacine hcl</i>	1	EDS
<i>methyldopa</i>	1	EDS
<i>prazosin hcl 1 mg cap, 2 mg cap, 5 mg cap</i>	1	EDS
<i>terazosin hcl 1 mg cap, 5 mg cap</i>	1	QL (30 UNITS PER 30 DAYS), EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>terazosin hcl 10 mg cap</i>	1	QL (60 UNITS PER 30 DAYS), EDS, P
<i>terazosin hcl 2 mg cap</i>	1	EDS, P
<b>ANTIHYPERTENSIVE COMBINATIONS</b>		
<i>amlodipine besy-benazepril hcl</i>	1	EDS, P
<i>amlodipine besylate-valsartan</i>	1	EDS, P
<i>amlodipine-olmesartan</i>	1	PA, EDS, NP
<i>amlodipine-valsartan-hctz</i>	1	P
ATACAND HCT	2	PA, NP
<i>atenolol-chlorthalidone</i>	1	PA, EDS, NP
AVALIDE	2	PA, NP
AZOR	2	PA, NP
<i>benazepril-hydrochlorothiazide</i>	1	EDS, P
BENICAR HCT	2	PA, NP
<i>bisoprolol-hydrochlorothiazide</i>	1	PA, EDS, NP
<i>candesartan cilexetil-hctz</i>	1	PA, EDS, NP
CAPTOPRIL- HYDROCHLOROTHIAZIDE	2	P
DIOVAN HCT	2	PA, NP
EDARBYCLOR	2	PA, NP
<i>enalapril-hydrochlorothiazide</i>	1	EDS, P
EXFORGE	2	PA, NP
EXFORGE HCT	2	PA, NP
<i>fosinopril sodium-hctz</i>	1	EDS, P
HYZAAR	2	PA, NP
<i>irbesartan-hydrochlorothiazide</i>	1	EDS, P
<i>lisinopril-hydrochlorothiazide</i>	1	EDS, P
<i>losartan potassium-hctz</i>	1	EDS, P
LOTENSIN HCT	2	PA, NP
LOTREL	2	PA, NP
<i>metoprolol-hydrochlorothiazide</i>	1	PA, NP
MICARDIS HCT	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>olmesartan medoxomil-hctz</i>	1	EDS, P
<i>olmesartan-amlodipine-hctz</i>	1	PA, NP
PROPRANOLOL-HCTZ	1	P
<i>quinapril-hydrochlorothiazide</i>	1	EDS, P
QUINAPRIL-HYDROCHLOROTHIAZIDE -20-25 MG TAB	1	P
TEKTURNA HCT	2	P
<i>telmisartan-amlodipine</i>	1	PA, NP
TELMISARTAN-AMLODIPINE	2	PA, NP
<i>telmisartan-hctz</i>	1	PA, NP
TENORETIC 100	2	PA, NP
TENORETIC 50	2	PA, NP
TRANDOLAPRIL-VERAPAMIL HCL ER	2	PA, NP
TRIBENZOR	2	PA, NP
<i>valsartan-hydrochlorothiazide</i>	1	EDS, P
VASERETIC	2	PA, NP
ZESTORETIC	2	PA, NP
ZIAC	2	PA, NP
<b>DIRECT RENIN INHIBITORS</b>		
<i>aliskiren fumarate</i>	1	PA, NP
TEKTURNA	2	PA, NP
<b>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</b>		
<i>eplerenone</i>	1	EDS
<b>VASODILATORS</b>		
<i>hydralazine hcl 10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS
<i>hydralazine hcl 20 mg/ml solution</i>	1	
<i>minoxidil 2.5 mg tab, 10 mg tab</i>	1	EDS

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
-----------	-----------	---------------------

## ANTIMALARIALS

### ANTIMALARIAL COMBINATIONS

<i>atovaquone-proguanil hcl</i>	1	EDS
COARTEM	2	

### ANTIMALARIALS

<i>chloroquine phosphate 250 mg tab, 500 mg tab</i>	1	
<i>hydroxychloroquine sulfate 200 mg tab</i>	1	EDS
<i>mefloquine hcl</i>	1	
<i>pyrimethamine 25 mg tab</i>	1	PA, LA
<i>quinine sulfate 324 mg cap</i>	1	

## ANTIMYASTHENIC/CHOLINERGIC AGENTS

### ANTIMYASTHENIC/CHOLINERGIC AGENTS

FIRDAPSE	2	PA, LA
NEOSTIGMINE METHYLSULFATE 3 MG/3ML SOLUTION, 5 MG/5ML SOLUTION	2	
<i>neostigmine methylsulfate 5 mg/10ml, 10 mg/10ml</i>	1	
<i>pyridostigmine bromide 60 mg tab</i>	1	

## ANTIMYCOBACTERIAL AGENTS

### ANTIMYCOBACTERIAL AGENTS

<i>ethambutol hcl 100 mg tab, 400 mg tab</i>	1	
<i>isoniazid 50 mg/5ml syrup, 100 mg tab, 300 mg tab</i>	1	
PRETOMANID	2	
PRIFTIN	2	
<i>pyrazinamide 500 mg tab</i>	1	
<i>rifabutin</i>	1	
<i>rifampin 150 mg cap, 300 mg cap, 600 mg recon soln</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SIRTIURO	2	LA
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES</b>		
<b>ALKYLATING AGENTS</b>		
<i>cyclophosphamide 1 gm soln, 2 gm soln, 500 mg soln</i>	1	LA
CYCLOPHOSPHAMIDE CYCLOPHOSPHAMIDE 25 MG CAP, CYCLOPHOSPHAMIDE 50 MG CAP, CYCLOPHOSPHAMIDE 25 MG TAB, CYCLOPHOSPHAMIDE 50 MG TAB	1	
GLEOSTINE	2	PA, SP
MYLERAN	2	SP
<i>temozolomide</i>	1	SP
<i>thiotepa 15 mg recon soln</i>	1	LA
<b>ANTIMETABOLITES</b>		
<i>capecitabine 150 mg</i>	1	QL (56 UNITS PER FILL), SP
<i>capecitabine 500 mg</i>	1	SP
<i>fluorouracil 2.5 gm/50ml, 5 gm/100ml</i>	1	
<i>mercaptopurine 50 mg tab</i>	1	EDS
<i>methotrexate sodium (pf) 1 gm/40ml, 50 mg/2ml, 250 mg/10ml</i>	1	
<i>methotrexate sodium 1 gm recon soln</i>	1	
METHOTREXATE SODIUM 250 MG/10ML SOLUTION	2	
METHOTREXATE SODIUM METHOTREXATE SODIUM 50 MG/2ML SOLUTION, METHOTREXATE SODIUM 2.5 MG TAB	1	EDS
ONUREG	2	PA, QL (1 EA PER DAY), SP
TABLOID	2	SP
<b>ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS</b>		
FRUZAQLA 1 MG CAP	2	PA, QL (84 EA PER 28 DAYS), SP
FRUZAQLA 5 MG CAP	2	PA, QL (21 EA PER 28 DAYS), SP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
INLYTA 1 MG TAB	2	PA, QL (8 EA PER 1 DAY), SF, SP
INLYTA 5 MG TAB	2	PA, QL (4 EA PER DAY), SF, SP
LENVIMA (10 MG DAILY DOSE)	2	PA, QL (1 EA PER DAY), SF, SP
LENVIMA (12 MG DAILY DOSE)	2	PA, QL (3 EA PER DAY), SF, SP
LENVIMA (14 MG DAILY DOSE)	2	PA, QL (2 EA PER DAY), SF, SP
LENVIMA (18 MG DAILY DOSE)	2	PA, QL (3 EA PER DAY), SF, SP
LENVIMA (20 MG DAILY DOSE)	2	PA, QL (2 EA PER DAY), SF, SP
LENVIMA (24 MG DAILY DOSE)	2	PA, QL (3 EA PER DAY), SF, SP
LENVIMA (4 MG DAILY DOSE)	2	PA, QL (1 EA PER DAY), SF, SP
LENVIMA (8 MG DAILY DOSE)	2	PA, QL (2 EA PER DAY), SF, SP

### **ANTINEOPLASTIC - ANTI-HER2 AGENTS**

TUKYSA	2	PA, QL (4 EA PER DAY), SP
--------	---	---------------------------

### **ANTINEOPLASTIC - BCL-2 INHIBITORS**

VENCLEXTA	2	PA, LA
VENCLEXTA STARTING PACK	2	PA, LA

### **ANTINEOPLASTIC - EGFR INHIBITORS**

<i>erlotinib hcl 100 mg tab, 150 mg tab</i>	1	PA, QL (1 EA PER DAY), SP
<i>erlotinib hcl 25 mg tab</i>	1	PA, QL (3 EA PER DAY), SP
<i>gefitinib</i>	1	PA, QL (1 EA PER DAY), SP
GILOTRIF	2	PA, LA, QL (1 EA PER DAY)
LAZCLUZE 240 MG TAB	2	PA, QL (1 EA PER DAY), SP
LAZCLUZE 80 MG TAB	2	PA, QL (2 EA PER DAY), SP
TAGRISSE	2	PA, QL (1 EA PER DAY), SF, SP
VIZIMPRO	2	PA, QL (1 EA PER 1 DAY), SF, SP

### **ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS**

DAURISMO 100 MG TAB	2	PA, QL (1 EA PER 1 DAY), SF, SP
DAURISMO 25 MG TAB	2	PA, QL (2 EA PER 1 DAY), SF, SP
ERIVEDGE	2	PA, QL (1 EA PER DAY), SF, SP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS</b>		
<i>abiraterone acetate 250 mg tab</i>	1	PA, QL (4 EA PER DAY), SP
<i>abiraterone acetate 500 mg tab</i>	1	PA, QL (2 EA PER DAY), SP
AKEEGA	2	PA, QL (1 EA PER 1 DAY), SF, SP
<i>anastrozole 1 mg tab</i>	\$0	EDS
<i>bicalutamide</i>	1	EDS
EMCYT	2	SP
ERLEADA 240 MG TAB	2	PA, QL (1 EA PER DAY), SP
ERLEADA 60 MG TAB	2	PA, QL (4 EA PER DAY), SP
<i>exemestane</i>	\$0	EDS
<i>flutamide</i>	1	LA, EDS
<i>letrozole 2.5 mg tab</i>	1	EDS
LEUPROLIDE ACETATE (3 MONTH)	2	PA, SP
<i>leuprolide acetate 1 mg/0.2ml kit</i>	1	SP
<i>megestrol acetate 20 mg tab, 40 mg tab, 40 mg/ml suspension, 400 mg/10ml suspension, 800 mg/20ml suspension</i>	1	EDS, P
<i>nilutamide</i>	1	SP
NUBEQA	2	PA, QL (4 EA PER DAY), SF, SP
ORGOVYX	2	PA, QL (1 EA PER DAY), SP
ORSERDU 345 MG TAB	2	PA, QL (1 EA PER DAY), SF, SP
ORSERDU 86 MG TAB	2	PA, QL (3 EA PER DAY), SF, SP
<i>tamoxifen citrate 10 mg tab, 20 mg tab</i>	\$0	EDS
<i>toremifene citrate</i>	1	SP
XTANDI 40 MG CAP, 40 MG TAB	2	PA, QL (4 EA PER DAY), SF, SP
XTANDI 80 MG TAB	2	PA, QL (2 EA PER DAY), SF, SP
<b>ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS</b>		
WELIREG	2	PA, QL (3 EA PER DAY), SF, SP
<b>ANTINEOPLASTIC - IMMUNOMODULATORS</b>		
POMALYST	2	PA, LA, QL (1 EA PER DAY)

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS</b>		
AYVAKIT	2	PA, LA, QL (1 EA PER DAY)
<b>ANTINEOPLASTIC - XPO1 INHIBITORS</b>		
XPOVIO (100 MG ONCE WEEKLY) 20 TAB THPK	2	PA, LA, QL (20 EA PER FILL)
XPOVIO (100 MG ONCE WEEKLY) 50 TAB THPK	2	PA, LA, QL (8 EA PER FILL)
XPOVIO (40 MG ONCE WEEKLY) 20 TAB THPK	2	PA, LA, QL (8 EA PER FILL)
XPOVIO (40 MG ONCE WEEKLY) TAB THPK	2	PA, LA, QL (4 EA PER FILL)
XPOVIO (40 MG TWICE WEEKLY) 20 TAB THPK	2	PA, LA, QL (16 EA PER FILL)
XPOVIO (40 MG TWICE WEEKLY) TAB THPK	2	PA, LA, QL (8 EA PER FILL)
XPOVIO (60 MG ONCE WEEKLY) 20 TAB THPK	2	PA, LA, QL (12 EA PER FILL)
XPOVIO (60 MG ONCE WEEKLY) TAB THPK	2	PA, LA, QL (4 EA PER FILL)
XPOVIO (60 MG TWICE WEEKLY)	2	PA, LA, QL (24 EA PER FILL)
XPOVIO (80 MG ONCE WEEKLY) 20 TAB THPK	2	PA, LA, QL (16 EA PER FILL)
XPOVIO (80 MG ONCE WEEKLY) 40 TAB THPK	2	PA, LA, QL (8 EA PER FILL)
XPOVIO (80 MG TWICE WEEKLY)	2	PA, LA, QL (32 EA PER FILL)
<b>ANTINEOPLASTIC COMBINATIONS</b>		
INQOVI	2	PA, LA, QL (1 EA PER DAY)
KISQALI FEMARA (200 MG DOSE)	2	PA, QL (3.25 EA PER DAY), SP
KISQALI FEMARA (400 MG DOSE)	2	PA, QL (3.25 EA PER DAY), SP
KISQALI FEMARA (600 MG DOSE)	2	PA, QL (3.25 EA PER DAY), SP
LONSURF	2	PA, LA
<b>ANTINEOPLASTIC ENZYME INHIBITORS</b>		
ALECENSA	2	PA, QL (8 EA PER DAY), SF, SP
ALUNBRIG 30 MG TAB	2	PA, QL (4 EA PER DAY), SP
ALUNBRIG 90 & 180 MG TAB THPK, 90 MG TAB, 180 MG TAB	2	PA, QL (1 EA PER DAY), SP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
AUGTYRO 160 MG CAP	2	PA, QL (2 EA PER 1 DAY), SP
AUGTYRO 40 MG CAP	2	PA, QL (8 EA PER DAY), SP
BALVERSA 3 MG TAB	2	PA, QL (3 EA PER DAY), SF, SP
BALVERSA 4 MG TAB	2	PA, QL (2 EA PER DAY), SF, SP
BALVERSA 5 MG TAB	2	PA, QL (1 EA PER DAY), SF, SP
BOSULIF 100 MG CAP	2	PA, QL (4 EA PER DAY), SP
BOSULIF 100 MG TAB	2	PA, QL (4 EA PER 1 DAY), SF, SP
BOSULIF 400 MG TAB, 500 MG TAB	2	PA, QL (1 EA PER 1 DAY), SF, SP
BOSULIF 50 MG CAP	2	PA, QL (1 EA PER DAY), SP
BRAFTOVI	2	PA, QL (6 EA PER DAY), SP
BRUKINSA	2	PA, QL (4 EA PER DAY), SF, SP
CABOMETYX	2	PA, LA, QL (1 EA PER DAY)
CALQUENCE 100 MG TAB	2	PA, QL (2 EA PER DAY), SF, SP
CAPRELSA 100 MG TAB	2	PA, LA, QL (2 EA PER 1 DAY)
CAPRELSA 300 MG TAB	2	PA, LA, QL (1 EA PER 1 DAY)
COMETRIQ (100 MG DAILY DOSE)	2	PA, QL (2 EA PER DAY), SF, SP
COMETRIQ (140 MG DAILY DOSE)	2	PA, QL (4 EA PER DAY), SF, SP
COMETRIQ (60 MG DAILY DOSE)	2	PA, QL (3 EA PER DAY), SF, SP
COPIKTRA	2	PA, QL (2 EA PER DAY), SF, SP
COTELLIC	2	PA, QL (3 EA PER DAY), SP
<i>dasatinib 20 mg tab, 50 mg tab, 80 mg tab, 100 mg tab, 140 mg tab</i>	1	PA, QL (1 EA PER 1 DAY), SF, SP
<i>dasatinib 70 mg tab</i>	1	PA, QL (2 EA PER 1 DAY), SF, SP
<i>everolimus 2 mg tab sol, 2.5 mg tab, 3 mg tab sol, 5 mg tab, 5 mg tab sol, 7.5 mg tab, 10 mg tab</i>	1	PA, QL (1 EA PER DAY), SP
FOTIVDA	2	PA, LA, QL (1 EA PER DAY)
GAVRETO	2	PA, LA, QL (4 EA PER 1 DAY)
IBRANCE	2	PA, QL (1 EA PER DAY), SP
ICLUSIG	2	PA, QL (1 EA PER DAY), SF, SP
IDHIFA	2	PA, LA, QL (1 EA PER DAY)

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>imatinib mesylate</i>	1	PA, SP
IMBRUVICA 140 MG CAP	2	PA, LA, QL (4 EA PER 1 DAY)
IMBRUVICA 70 MG CAP, 140 MG TAB, 420 MG TAB	2	PA, LA, QL (1 EA PER DAY)
IMBRUVICA 70 MG/ML SUSPENSION	2	PA, LA, QL (6 ML PER DAY)
JAKAFI	2	PA, QL (2 EA PER DAY), SF, SP
JAYPIRCA	2	PA, QL (2 EA PER 1 DAY), SF, SP
KISQALI (200 MG DOSE)	2	PA, QL (2.25 EA PER DAY), SP
KISQALI (400 MG DOSE)	2	PA, QL (2.25 EA PER DAY), SP
KISQALI (600 MG DOSE)	2	PA, QL (2.25 EA PER DAY), SP
KOSELUGO 10 MG CAP	2	PA, QL (8 EA PER DAY), SP
KOSELUGO 25 MG CAP	2	PA, QL (4 EA PER DAY), SP
KRAZATI	2	PA, LA, QL (6 EA PER DAY)
<i>lapatinib ditosylate</i>	1	PA, SP
LORBRENA 100 MG TAB	2	PA, QL (1 EA PER 1 DAY), SF, SP
LORBRENA 25 MG TAB	2	PA, QL (3 EA PER 1 DAY), SF, SP
LUMAKRAS 120 MG TAB	2	PA, QL (8 EA PER DAY), SF, SP
LUMAKRAS 240 MG TAB	2	PA, QL (4 EA PER 1 DAY), SF, SP
LUMAKRAS 320 MG TAB	2	PA, QL (3 EA PER DAY), SF, SP
LYNPARZA	2	PA, QL (4 EA PER DAY), SF, SP
LYTGOBI (12 MG DAILY DOSE)	2	PA, LA, QL (5 EA PER DAY)
LYTGOBI (16 MG DAILY DOSE)	2	PA, LA, QL (5 EA PER DAY)
LYTGOBI (20 MG DAILY DOSE)	2	PA, LA, QL (5 EA PER DAY)
MEKINIST 0.05 MG/ML RECON SOLN	2	PA, QL (40 ML PER DAY), SP
MEKINIST 0.5 MG TAB	2	PA, QL (3 EA PER DAY), SP
MEKINIST 2 MG TAB	2	PA, QL (1 EA PER DAY), SP
MEKTOVI	2	PA, QL (6 EA PER DAY), SP
NERLYNX	2	PA, QL (6 EA PER DAY), SF, SP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
NINLARO	2	PA, SP
OGSIVEO 100 MG TAB, 150 MG TAB	2	PA, QL (2 EA PER DAY)
OGSIVEO 50 MG TAB	2	PA, QL (6 EA PER DAY)
OJEMDA 100 MG TAB	2	PA, QL (24 EA PER 28 DAYS)
OJEMDA 25 MG/ML RECON SUSP	2	PA, QL (96 ML PER 28 DAYS)
OJJAARA	2	PA, QL (1 EA PER DAY), SP
<i>pazopanib hcl</i>	1	PA, SF, SP
PEMAZYRE	2	PA, QL (1 EA PER DAY), SP
PIQRAY (200 MG DAILY DOSE)	2	PA, SP
PIQRAY (250 MG DAILY DOSE)	2	PA, SP
PIQRAY (300 MG DAILY DOSE)	2	PA, SP
QINLOCK	2	PA, LA, QL (3 EA PER DAY)
RETEVMO 40 MG CAP	2	PA, QL (3 EA PER DAY), SF, SP
RETEVMO 40 MG TAB	2	PA, QL (3 EA PER 1 DAY), SF, SP
RETEVMO 80 MG CAP	2	PA, QL (2 EA PER DAY), SF, SP
RETEVMO 80 MG TAB, 120 MG TAB, 160 MG TAB	2	PA, QL (2 EA PER 1 DAY), SF, SP
REZLIDHIA	2	PA, QL (2 EA PER 1 DAY), SF, SP
ROZLYTREK 100 MG CAP, 200 MG CAP	2	PA, QL (3 EA PER DAY), SF, SP
ROZLYTREK 50 MG PACKET	2	PA, LA, QL (6 EA PER DAY), SP
RUBRACA	2	PA, QL (4 EA PER DAY), SF, SP
RYDAPT	2	PA, QL (2 EA PER DAY), SP
SCSEMBLIX 100 MG TAB	2	PA, QL (120 EA PER FILL), SP
SCSEMBLIX 20 MG TAB	2	PA, QL (4 EA PER DAY), SP
SCSEMBLIX 40 MG TAB	2	PA, QL (2 EA PER DAY), SP
<i>sorafenib tosylate</i>	1	PA, SP
STIVARGA	2	PA, QL (4 EA PER DAY), SP
<i>sunitinib malate</i>	1	PA, QL (1 EA PER DAY), SP
TABRECTA	2	PA, QL (4 EA PER DAY), SP
TAFINLAR 10 MG TAB SOL	2	PA, QL (30 ML PER DAY), SP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
TAFINLAR 50 MG CAP, 75 MG CAP	2	PA, QL (4 EA PER DAY), SF, SP
TALZENNA	2	PA, QL (1 EA PER 1 DAY), SF, SP
TASIGNA	2	PA, QL (4 EA PER DAY), SF, SP
TAZVERIK	2	PA, LA, QL (8 EA PER DAY)
TEPMETKO	2	PA, QL (2 EA PER DAY), SF, SP
TIBSOVO	2	PA, LA, QL (2 EA PER DAY)
<i>torpenz</i>	1	PA, QL (1 EA PER DAY), SP
TRUQAP	2	PA, QL (64 EA PER 28 DAYS), SP
TURALIO 125 MG CAP	2	PA, LA, QL (4 EA PER DAY)
VANFLYTA	2	PA, QL (60 EA PER 30 DAYS), SP
VERZENIO	2	PA, QL (2 EA PER DAY), SF, SP
VITRAKVI 100 MG CAP	2	PA, LA, QL (2 EA PER DAY)
VITRAKVI 20 MG/ML SOLUTION	2	PA, LA, QL (10 ML PER DAY)
VITRAKVI 25 MG CAP	2	PA, LA, QL (6 EA PER DAY)
VONJO	2	PA, LA, QL (4 EA PER DAY)
XALKORI	2	PA, QL (2 EA PER 1 DAY), SF, SP
XOSPATA	2	PA, QL (3 EA PER 1 DAY), SF, SP
ZEJULA 100 MG TAB, 200 MG TAB, 300 MG TAB	2	PA, QL (1 EA PER DAY), SP
ZELBORAF	2	PA, QL (8 EA PER DAY), SP
ZOLINZA	2	QL (4 EA PER DAY), SF, SP
ZYDELIG	2	PA, LA
ZYKADIA	2	PA, QL (3 EA PER DAY), SF, SP
<b>ANTINEOPLASTICS MISC.</b>		
<i>bexarotene 75 mg cap</i>	1	PA, SP
<i>hydroxyurea 500 mg cap</i>	1	EDS
<i>tretinoin 10 mg cap</i>	1	SP
<b>CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS</b>		
IWILFIN	2	PA, QL (8 EA PER DAY)
<i>leucovorin calcium 5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>mesna 400 mg tab</i>	1	
<b>MITOTIC INHIBITORS</b>		
ETOPOSIDE 50 MG CAP	2	LA
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS</b>		
<b>ANTIPARKINSON ADJUNCTIVE THERAPY</b>		
NOURIANZ	2	PA, SP, NP
<b>ANTIPARKINSON ANTICHOLINERGICS</b>		
<i>benztropine mesylate 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	EDS
<i>benztropine mesylate 1 mg/ml solution</i>	1	
<i>trihexyphenidyl hcl</i>	1	EDS
TRIHEXYPHENIDYL HCL 0.4 MG/ML SOLUTION	2	EDS
<b>ANTIPARKINSON COMT INHIBITORS</b>		
<i>entacapone</i>	1	EDS, P
ONGENTYS	2	PA, QL (1 EA PER DAY), NP
TASMAR	2	PA, NP
<i>tolcapone</i>	1	PA, NP
<b>ANTIPARKINSON DOPAMINERGICS</b>		
<i>amantadine hcl 50 mg/5ml solution, 100 mg cap, 100 mg tab</i>	1	EDS
<i>bromocriptine mesylate 2.5 mg tab</i>	1	EDS
<i>carbidopa-levodopa</i>	1	EDS, P
CARBIDOPA-LEVODOPA -10-100 MG TAB DISP, -25-100 MG TAB DISP, -25-250 MG TAB DISP	2	P
<i>carbidopa-levodopa er</i>	1	EDS, P
<i>carbidopa-levodopa-entacapone</i>	1	EDS, P
CARBIDOPA-LEVODOPA-ENTACAPONE --12.5-50-200 MG TAB	1	NP
CARBIDOPA-LEVODOPA-ENTACAPONE --18.75-75-200 MG TAB, --37.5-150-200 MG TAB	1	P



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
DHIVY	2	PA, NP
GOCOVRI	2	PA, LA, NP
INBRIJA	2	PA, LA, NP
KYNMOBI	2	PA, SP, NP
MIRAPEX ER	2	PA, NP
NEUPRO	2	PA, NP
<i>pramipexole dihydrochloride</i>	1	EDS, P
<i>pramipexole dihydrochloride er</i>	1	PA, NP
<i>ropinirole hcl</i>	1	EDS, P
<i>ropinirole hcl er</i>	1	PA, EDS, NP
RYTARY	2	PA, NP
SINEMET	2	PA, NP
STALEVO 100	2	PA, NP
STALEVO 125	2	PA, NP
STALEVO 150	2	PA, NP
STALEVO 200	2	PA, NP
STALEVO 50	2	PA, NP
STALEVO 75	2	PA, NP

### **ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS**

<i>selegiline hcl 5 mg cap, 5 mg tab</i>	1	EDS
XADAGO	2	PA, NP

### **ANTIPSYCHOTICS/ANTIMANIC AGENTS**

#### **ANTIMANIC AGENTS**

<i>lithium</i>	\$0	
<i>lithium carbonate 150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap</i>	\$0	EDS
<i>lithium carbonate er</i>	\$0	EDS

#### **ANTIPSYCHOTICS - MISC.**

CAPLYTA	\$0	PA, NP
EQUETRO	\$0	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
GEODON	\$0	PA, NP
LATUDA	\$0	PA, NP
<i>lurasidone hcl</i>	\$0	EDS, P
NUPLAZID	\$0	PA, LA, NP
VRAYLAR	\$0	PA, NP
<i>ziprasidone hcl</i>	\$0	EDS, P
<i>ziprasidone mesylate</i>	\$0	PA, NP

## **BENZISOXAZOLES**

FANAPT	\$0	PA, NP
FANAPT TITRATION PACK	\$0	PA, NP
INVEGA	\$0	PA, NP
INVEGA HAFYERA	\$0	P
INVEGA SUSTENNA	\$0	P
INVEGA TRINZA	\$0	P
<i>paliperidone er</i>	\$0	PA, EDS, NP
PERSERIS	\$0	P
RISPERDAL	\$0	PA, NP
RISPERDAL CONSTA	\$0	P
<i>risperidone 0.25 mg tab, 0.5 mg tab, 1 mg tab, 1 mg/ml solution, 2 mg tab, 3 mg tab, 4 mg tab</i>	\$0	EDS, P
<i>risperidone microspheres er</i>	\$0	
<i>risperidone risperidone 2 mg tab disp, risperidone 0.25 mg tab disp, risperidone 0.5 mg tab disp, risperidone 1 mg tab disp, risperidone 3 mg tab disp, risperidone 4 mg tab disp</i>	\$0	P
RYKINDO	\$0	PA, NP
UZEDY	\$0	PA, NP

## **BUTYROPHENONES**

<i>haloperidol 0.5 mg tab, 1 mg tab, 2 mg tab, 5 mg tab, 10 mg tab, 20 mg tab</i>	\$0	EDS
<i>haloperidol decanoate 50 mg/ml, 100 mg/ml</i>	\$0	EDS
<i>haloperidol lactate 2 mg/ml conc</i>	\$0	EDS
<i>haloperidol lactate 5 mg/ml solution</i>	\$0	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>DIBENZAPINES</b>		
<i>asenapine maleate</i>	\$0	PA, EDS, NP
CLOZAPINE 12.5 MG TAB DISP	\$0	P
<i>clozapine 25 mg tab, 25 mg tab disp, 50 mg tab, 100 mg tab, 100 mg tab disp, 150 mg tab disp, 200 mg tab, 200 mg tab disp</i>	\$0	EDS, P
CLOZARIL	\$0	PA, NP
<i>loxapine succinate</i>	\$0	EDS
<i>olanzapine 10 mg recon soln</i>	\$0	P
<i>olanzapine 15 mg tab disp, 20 mg tab disp</i>	\$0	PA, QL (30 UNITS PER 30 DAYS), EDS, NP
<i>olanzapine 2.5 mg tab, 5 mg tab, 7.5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab</i>	\$0	EDS, P
<i>olanzapine 5 mg tab disp, 10 mg tab disp</i>	\$0	PA, QL (60 UNITS PER 30 DAYS), EDS, NP
<i>quetiapine fumarate 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab, 300 mg tab, 400 mg tab</i>	\$0	EDS, P
<i>quetiapine fumarate er</i>	\$0	EDS, P
SAPHRIS	\$0	PA, NP
SECUADO	\$0	PA, NP
SEROQUEL	\$0	PA, NP
SEROQUEL XR	\$0	PA, NP
VERSACLOZ	\$0	PA, NP
ZYPREXA 2.5 MG TAB, 5 MG TAB, 7.5 MG TAB, 10 MG RECON SOLN, 10 MG TAB, 15 MG TAB	\$0	PA, NP
ZYPREXA 20 MG TAB	\$0	PA, EDS, NP
ZYPREXA RELPREVV	\$0	PA, NP
ZYPREXA ZYDIS	\$0	PA, NP
<b>PHENOTHIAZINES</b>		
<i>chlorpromazine hcl 10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab</i>	\$0	EDS
<i>chlorpromazine hcl 25 mg/ml, 50 mg/2ml</i>	\$0	
<i>compro</i>	\$0	
<i>fluphenazine decanoate 25 mg/ml solution</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>fluphenazine hcl 1 mg tab, 2.5 mg tab, 5 mg tab, 10 mg tab</i>	\$0	EDS
FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR, 5 MG/ML CONC	\$0	
<i>perphenazine 2 mg tab, 4 mg tab, 8 mg tab, 16 mg tab</i>	\$0	EDS
<i>prochlorperazine</i>	\$0	
<i>prochlorperazine edisylate prochlorperazine edisylate 10 mg/2ml solution, prochlorperazine edisylate 50 mg/10ml solution</i>	\$0	
<i>prochlorperazine maleate 5 mg tab, 10 mg tab</i>	\$0	
<i>thioridazine hcl 10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab</i>	\$0	EDS
<i>trifluoperazine hcl</i>	\$0	EDS
<b>QUINOLINONE DERIVATIVES</b>		
ABILIFY	\$0	PA, NP
ABILIFY ASIMTUFII	\$0	P
ABILIFY MAINTENA	\$0	P
ABILIFY MYCITE	\$0	PA, LA, NP
<i>aripiprazole 1 mg/ml solution, 2 mg tab, 5 mg tab, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab</i>	\$0	EDS, P
<i>aripiprazole 10 mg tab disp, 15 mg tab disp</i>	\$0	PA, NP
ARISTADA	\$0	PA, NP
ARISTADA INITIO	\$0	PA, NP
REXULTI	\$0	PA, NP
<b>THIOXANTHENES</b>		
<i>thiothixene</i>	\$0	EDS
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<i>hydrogen peroxide</i>	1	OTC
<b>CHLORINE ANTISEPTICS</b>		
<i>chlorhexidine gluconate</i>	1	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
HIBICLENS 4 % LIQUID	2	OTC
<b>IODINE ANTISEPTICS</b>		
APLICARE POVIDONE-IODINE 10 % GEL	2	OTC
LUGOLS STRONG IODINE	2	
<i>povidone-iodine (betadine)</i>	1	OTC
<b>ANTIVIRALS</b>		
<b>ANTIRETROVIRALS</b>		
<i>abacavir sulfate</i>	1	
<i>abacavir sulfate-lamivudine</i>	1	
<i>abacavir-lamivudine-zidovudine</i>	1	
APRETUDE	\$0	
APTIVUS	2	
<i>atazanavir sulfate</i>	1	
BIKTARVY	2	
CABENUVA	2	
CIMDUO	2	
COMPLERA	2	
CRIXIVAN	2	
DELSTRIGO	2	
DESCOVY 120-15 MG TAB	2	
DESCOVY 200-25 MG TAB	2	PV
DIDANOSINE 250 MG CAP DR, 400 MG CAP DR	2	
DOVATO	2	
EDURANT	2	
EFAVIRENZ 50 MG CAP, 200 MG CAP	2	
<i>efavirenz 600 mg tab</i>	1	
<i>efavirenz-emtricitab-tenofo df</i>	1	
<i>efavirenz-lamivudine-tenofovir</i>	1	
<i>emtricitabine</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>emtricitabine-tenofovir df -100-150 mg tab, -133-200 mg tab, -167-250 mg tab</i>	1	
<i>emtricitabine-tenofovir df -200-300 mg</i>	\$0	
EMTRIVA 10 MG/ML SOLUTION	2	
<i>etravirine</i>	1	
EVOTAZ	2	
<i>fosamprenavir calcium</i>	1	
GENVOYA	2	
INTELENCE 25 MG TAB	2	
INVIRASE	2	
ISENTRESS 25 MG CHEW TAB, 100 MG CHEW TAB, 400 MG TAB	2	
ISENTRESS HD	2	
JULUCA	2	
<i>lamivudine 10 mg/ml solution, 150 mg tab, 300 mg tab</i>	1	
<i>lamivudine-zidovudine</i>	1	
LEXIVA 50 MG/ML SUSPENSION	2	
<i>lopinavir-ritonavir</i>	1	
<i>maraviroc</i>	1	
<i>nevirapine 200 mg tab</i>	1	
NEVIRAPINE 50 MG/5ML SUSPENSION	2	
NORVIR 80 MG/ML SOLUTION, 100 MG PACKET	2	
ODEFSEY	2	
PIFELTRO	2	
PREZCOBIX	2	
PREZISTA	2	
<i>ritonavir</i>	1	
RUKOBIA	2	
SELZENTRY 20 MG/ML SOLUTION	2	
<i>stavudine</i>	1	
STRIBILD	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SUNLENCA	2	
SYMTUZA	2	
TEMIXYS	2	
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	2	
VIRACEPT	2	
VIREAD 40 MG/GM POWDER, 150 MG TAB, 200 MG TAB, 250 MG TAB	2	SP
<i>zidovudine</i>	1	
<b>ANTIVIRAL COMBINATIONS</b>		
PAXLOVID (150/100)	2	QL (20 EA PER FILL)
PAXLOVID (300/100)	2	QL (30 EA PER FILL)
<b>CMV AGENTS</b>		
<i>foscarnet sodium</i>	1	
PREVYMIS 240 MG TAB	2	QL (1 TAB PER 1 DAY; 200 TABS PER 365 DAYS)
PREVYMIS 240 MG/12ML SOLUTION, 480 MG/24ML SOLUTION	2	
PREVYMIS 480 MG TAB	2	QL (1 UNIT PER 1 DAY; 100 TABS PER 6 MONTHS)
<i>valganciclovir hcl</i>	1	EDS
<b>HEPATITIS AGENTS</b>		
<i>adefovir dipivoxil</i>	1	PA, SP, NP
BARACLUDE 0.05 MG/ML SOLUTION	2	SP, P
BARACLUDE 0.5 MG TAB, 1 MG TAB	2	PA, QL (1 EA PER DAY), SP, NP
<i>entecavir</i>	1	QL (1 EA PER DAY), EDS, P
EPCLUSA 150-37.5 MG PACKET, 200-50 MG PACKET, 400-100 MG TAB	2	PA, QL (84 EA PER 365 DAYS), SP, NP
EPCLUSA 200-50 MG TAB	2	PA, QL (28 UNITS PER FILL; 84 UNITS PER 365 DAYS), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
EPIVIR HBV 100 MG TAB	1	SP, P
EPIVIR HBV 5 MG/ML SOLUTION	2	SP, P
HARVONI 33.75-150 MG PACKET	2	PA, QL (28 UNITS PER FILL; 56 UNITS PER 365 DAYS), SP, NP
HARVONI 45-200 MG PACKET, 45-200 MG TAB	2	PA, QL (56 UNITS PER FILL; 112 UNITS PER 365 DAYS), SP, NP
HARVONI 90-400 MG TAB	2	PA, QL (84 EA PER 365 DAYS), SP, NP
HEPSERA	1	SP, P
<i>lamivudine 100 mg tab</i>	1	EDS, SP, P
LEDIPASVIR-SOFOSBUVIR	1	PA, QL (84 EA PER 365 DAYS), QL (28 UNITS PER FILL; 56 UNITS PER 365 DAYS FOR MEMBERS 18 YEARS OF AGE AND OLDER), SP, NP
MAVYRET 100-40 MG TAB	2	PA, QL (168 EA PER 365 DAYS), SP, P
MAVYRET 50-20 MG PACKET	2	QL (336 EA PER 365 DAYS), SP, P
PEGASYS 180 MCG/0.5ML SOLN PRSYR	2	QL (0.08 ML PER DAY), SP, P
PEGASYS 180 MCG/ML SOLUTION	2	QL (0.15 ML PER DAY), SP, P
RIBAVIRIN 200 MG TAB	2	SP, P
<i>ribavirin ribavirin 200 mg cap, ribavirin 200 mg tab, ribavirin 200 mg cap</i>	1	SP, P
SOFOSBUVIR-VELPATASVIR	1	PA, QL (84 EA PER 365 DAYS), QL (28 UNITS PER FILL; 84 UNITS PER 365 DAYS), SP, NP
SOVALDI 150 MG PACKET, 400 MG TAB	2	PA, QL (84 EA PER 365 DAYS), SP, NP
SOVALDI 200 MG PACKET, 200 MG TAB	2	PA, QL (168 EA PER 365 DAYS), SP, NP
VEMLIDY	2	PA, SP, NP
VOSEVI	2	PA, QL (84 EA PER 365 DAYS), SP, NP
ZEPATIER	2	PA, QL (84 EA PER 365 DAYS), SP, NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>HERPES AGENTS</b>		
<i>acyclovir 200 mg cap, 200 mg/5ml suspension, 800 mg tab</i>	1	P
<i>acyclovir 400 mg tab</i>	1	EDS, P
<i>acyclovir sodium</i>	1	
<i>famciclovir 125 mg tab, 250 mg tab, 500 mg tab</i>	1	PA, EDS, NP
<i>valacyclovir hcl 1 gm tab, 500 mg tab</i>	1	EDS, P
VALTREX	2	PA, NP
<b>INFLUENZA AGENTS</b>		
<i>oseltamivir phosphate 30 mg cap</i>	1	QL (20 EA PER FILL), P
<i>oseltamivir phosphate 45 mg cap, 75 mg cap</i>	1	QL (10 EA PER FILL), P
<i>oseltamivir phosphate 6 mg/ml recon susp</i>	1	QL (250 ML PER FILL), P
RELENZA DISKHALER	2	QL (0.67 GM PER DAY), P
RIMANTADINE HCL	2	
TAMIFLU 30 MG CAP	2	PA, QL (20 EA PER FILL), NP
TAMIFLU 45 MG CAP, 75 MG CAP	2	PA, QL (10 EA PER FILL), NP
TAMIFLU 6 MG/ML RECON SUSP	2	PA, QL (250 ML PER FILL), NP
XOFLUZA (40 MG DOSE) OFLUZA 1 TAB THPK	2	PA, QL (1 EA PER FILL), NP
XOFLUZA (40 MG DOSE) OFLUZA 20 TAB THPK	2	PA, QL (2 EA PER FILL), NP
XOFLUZA (80 MG DOSE) OFLUZA 1 TAB THPK	2	PA, QL (1 EA PER FILL), NP
<b>MISC. ANTIVIRALS</b>		
LAGEVRIO	2	QL (40 EA PER FILL)
<b>BETA BLOCKERS</b>		
<b>ALPHA-BETA BLOCKERS</b>		
<i>carvedilol</i>	1	EDS, P
<i>carvedilol phosphate er</i>	1	PA, NP
COREG	2	PA, NP
<i>labetalol hcl 100 mg tab, 200 mg tab, 300 mg tab</i>	1	EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
LABETALOL HCL 400 MG TAB	1	P
<b>BETA BLOCKERS CARDIO-SELECTIVE</b>		
<i>acebutolol hcl 200 mg cap, 400 mg cap</i>	1	PA, EDS, NP
<i>atenolol 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS, P
<i>betaxolol hcl 10 mg tab, 20 mg tab</i>	1	PA, EDS, NP
<i>bisoprolol fumarate 5 mg tab, 10 mg tab</i>	1	EDS, P
KAPSPARGO SPRINKLE	2	PA, NP
LOPRESSOR	2	PA, NP
<i>metoprolol succinate er</i>	1	EDS, P
<i>metoprolol tartrate 25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab, 100 mg tab</i>	1	EDS, P
<i>nebivolol hcl</i>	1	PA, EDS, NP
TENORMIN	2	PA, NP
TOPROL XL	2	PA, NP
<b>BETA BLOCKERS NON-SELECTIVE</b>		
BETAPACE	2	PA, NP
BETAPACE AF	2	PA, NP
CORGARD	2	PA, NP
HEMANGEOL	2	PA, LA, NP
INDERAL LA	2	PA, NP
INDERAL XL	2	PA, NP
INNOPRAN XL	2	PA, NP
<i>nadolol 20 mg tab, 40 mg tab, 80 mg tab</i>	1	EDS, P
<i>pindolol</i>	1	EDS, P
<i>propranolol hcl 10 mg tab, 20 mg tab, 20 mg/5ml solution, 40 mg tab, 60 mg tab, 80 mg tab</i>	1	EDS, P
PROPRANOLOL HCL 40 MG/5ML SOLUTION	2	EDS, P
<i>propranolol hcl er</i>	1	EDS, P
<i>sorine</i>	1	EDS, P
<i>sotalol hcl</i>	1	EDS, P
<i>sotalol hcl (af)</i>	1	EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SOTYLIZE	2	PA, NP
<i>timolol maleate 5 mg tab, 10 mg tab, 20 mg tab</i>	1	PA, EDS, NP

## **CALCIUM CHANNEL BLOCKERS**

### **CALCIUM CHANNEL BLOCKERS**

<i>amlodipine besylate 2.5 mg tab, 5 mg tab, 10 mg tab</i>	1	EDS, P
CALAN SR	2	PA, NP
CARDIZEM	2	PA, NP
CARDIZEM CD	2	PA, NP
CARDIZEM LA	2	PA, NP
<i>cartia xt</i>	1	EDS, P
<i>dilt-xr</i>	1	EDS, P
<i>diltiazem hcl 25 mg/5ml, 50 mg/10ml, 125 mg/25ml</i>	1	
<i>diltiazem hcl 30 mg tab, 60 mg tab, 90 mg tab, 120 mg tab</i>	1	EDS, P
<i>diltiazem hcl er beads</i>	1	EDS, P
<i>diltiazem hcl er coated beads</i>	1	EDS, P
<i>diltiazem hcl er er 120 mg tab er, er 180 mg tab er, er 240 mg tab er, er 300 mg tab er, er 360 mg tab er, er 420 mg tab er</i>	1	PA, EDS, NP
<i>diltiazem hcl er er 60 mg cap er 12h, er 90 mg cap er 12h, er 120 mg cap er 12h, er 120 mg cap er 24h, er 180 mg cap er 24h, er 240 mg cap er 24h</i>	1	EDS, P
<i>felodipine er</i>	1	EDS, P
<i>isradipine</i>	1	PA, NP
KATERZIA	2	PA, NP
LEVAMLODIPINE MALEATE	1	PA, NP
<i>matzim la</i>	1	PA, EDS, NP
<i>nicardipine hcl 20 mg cap, 30 mg cap</i>	1	PA, NP
<i>nicardipine hcl nicardipine hcl 2.5 mg/ml solution, nicardipine hcl 2.5 mg/ml solution</i>	1	
<i>nifedipine 10 mg cap, 20 mg cap</i>	1	EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>nifedipine er</i>	1	EDS, P
<i>nifedipine er osmotic release</i>	1	EDS, P
<i>nimodipine 30 mg cap</i>	1	PA, NP
NIMODIPINE 60 MG/20ML SOLUTION	2	PA, NP
NISOLDIPINE ER ER 20 MG TAB ER 24H, ER 25.5 MG TAB ER 24H, ER 30 MG TAB ER 24H, ER 40 MG TAB ER 24H	2	PA, NP
<i>nisoldipine er er 8.5 mg tab er, er 17 mg tab er, er 34 mg tab er</i>	1	PA, NP
NORLIQVA	2	PA, NP
NORVASC	2	PA, NP
NYMALIZE	2	PA, NP
PROCARDIA	2	PA, NP
PROCARDIA XL	2	PA, NP
SULAR	2	PA, NP
<i>taztia xt</i>	1	EDS, P
<i>tiadylt er</i>	1	EDS, P
TIAZAC	2	PA, NP
<i>verapamil hcl 40 mg tab, 80 mg tab, 120 mg tab</i>	1	EDS, P
VERAPAMIL HCL ER ER 100 MG CAP ER 24H, ER 200 MG CAP ER 24H, ER 300 MG CAP ER 24H, ER 360 MG CAP ER 24H	1	PA, NP
<i>verapamil hcl er er 120 mg cap er 24h, er 120 mg tab er, er 180 mg cap er 24h, er 180 mg tab er, er 240 mg cap er 24h, er 240 mg tab er</i>	1	EDS, P
VERELAN PM	2	PA, NP

## **CARDIOTONICS**

### **CARDIAC GLYCOSIDES**

<i>digitek</i>	1	EDS
<i>digox</i>	1	EDS
<i>digoxin 0.05 mg/ml solution, 125 mcg tab, 250 mcg tab</i>	1	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>digoxin 0.25 mg/ml solution</i>	1	
<b>CARDIOVASCULAR AGENTS - MISC.</b>		
<b>CARDIAC MYOSIN INHIBITORS</b>		
CAMZYOS	2	PA, LA, QL (1 EA PER DAY)
<b>CARDIOVASCULAR AGENTS MISC. - COMBINATIONS</b>		
<i>amlodipine-atorvastatin</i>	1	PA, NP
CADUET	2	PA, NP
ENTRESTO 24-26 MG TAB, 49-51 MG TAB, 97-103 MG TAB	2	QL (2 EA PER DAY), P
ENTRESTO 6-6 MG CAP SPRINK, 15-16 MG CAP SPRINK	2	QL (4 EA PER 1 DAY), P
OPSYNVI	2	PA, QL (1 EA PER 1 DAY), NP
<b>CARDIOVASCULAR SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS</b>		
INPEFA	2	PA, QL (1 EA PER DAY), NP
<b>PROSTAGLANDIN VASODILATORS</b>		
<i>epoprostenol sodium</i>	1	LA
ORENITRAM	2	PA, LA, NP
ORENITRAM MONTH 1	2	PA, LA, NP
ORENITRAM MONTH 2	2	PA, LA, NP
ORENITRAM MONTH 3	2	PA, LA, NP
TYVASO	2	PA, LA, NP
TYVASO DPI INSTITUTIONAL KIT	2	PA, LA, QL (4 EA PER DAY), NP
TYVASO DPI MAINTENANCE KIT KIT 16 MCG POWDER, KIT 32 MCG POWDER, KIT 48 MCG POWDER, KIT 64 MCG POWDER	2	PA, LA, QL (4 EA PER DAY), NP
TYVASO DPI TITRATION KIT 112 X 16MCG & 84 X 32MCG POWDER	2	PA, LA, QL (196 EA PER 28 DAYS), NP
TYVASO DPI TITRATION KIT 16 & 32 & 48 MCG POWDER	2	PA, LA, QL (252 EA PER 28 DAYS), NP
TYVASO REFILL	2	PA, LA, NP
TYVASO STARTER	2	PA, LA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR</b>		
WINREVAIR	2	PA, QL (1 KIT PER 21 DAYS)
<b>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</b>		
<i>ambrisentan</i>	1	PA, QL (1 EA PER DAY), SP, P
<i>bosentan</i>	1	PA, LA, QL (2 EA PER DAY), NP
LETAIRIS	2	PA, LA, QL (1 EA PER DAY), NP
OPSUMIT	2	PA, LA, QL (1 EA PER DAY), NP
TRACLEER 32 MG TAB SOL	2	PA, LA, QL (4 EA PER DAY), NP
TRACLEER 62.5 MG TAB, 125 MG TAB	1	PA, LA, QL (2 EA PER DAY), P
<b>PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS</b>		
ADCIRCA	2	PA, SP, NP
<i>alyq</i>	1	PA, SP, NP
LIQREV	2	PA, SP, NP
REVATIO 10 MG/ML RECON SUSP, 20 MG TAB	2	PA, SP, NP
<i>sildenafil citrate 10 mg/ml recon susp, 20 mg tab</i>	1	PA, SP, P
<i>tadalafil (pah)</i>	1	PA, SP, NP
TADLIQ	2	PA, QL (10 ML PER 1 DAY), SP, NP
<b>PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST</b>		
UPTRAVI 200 & 800 MCG TAB THPK	2	PA, LA, QL (2 EA PER DAY), QL (200 EAPER PER FILL; 2 FILLSPER365 DAYS), NP
UPTRAVI 200 MCG TAB	2	PA, LA, QL (2 EA PER DAY), QL (140 EAPER PER FILL; 2 FILLSPER365 DAYS), NP
UPTRAVI 400 MCG TAB, 600 MCG TAB, 800 MCG TAB, 1000 MCG TAB, 1200 MCG TAB, 1400 MCG TAB, 1600 MCG TAB	2	PA, LA, QL (2 EA PER DAY), NP
<b>PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR</b>		
ADEMPAS	2	PA, LA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>SINUS NODE INHIBITORS</b>		
<i>ivabradine hcl</i>	1	
<b>TRANSTHYRETIN STABILIZERS</b>		
VYNDAMAX	2	PA, QL (1 EA PER DAY), SP
VYNDAQEL	2	PA, QL (4 EA PER DAY), SP
<b>CEPHALOSPORINS</b>		
<b>CEPHALOSPORINS - 1ST GENERATION</b>		
CEFADROXIL 1 GM TAB	2	PA, NP
<i>cefadroxil 250 mg/5ml recon susp, 500 mg cap, 500 mg/5ml recon susp</i>	1	P
<i>cefazolin sodium 1 gm soln, 10 gm soln, 500 mg soln</i>	1	
CEFAZOLIN SODIUM-DEXTROSE -1-4 GM/50ML-% SOLUTION	2	
<i>cephalexin 125 mg/5ml recon susp, 250 mg cap, 250 mg/5ml recon susp, 500 mg cap, 750 mg cap</i>	1	P
<i>cephalexin 250 mg tab, 500 mg tab</i>	1	PA, NP
<b>CEPHALOSPORINS - 2ND GENERATION</b>		
CEFACLOR	2	P
CEFACLOR ER	2	PA, NP
<i>cefoxitin sodium</i>	1	
<i>cefprozil</i>	1	P
<i>cefuroxime axetil</i>	1	P
<i>cefuroxime sodium</i>	1	
<b>CEPHALOSPORINS - 3RD GENERATION</b>		
<i>cefdinir</i>	1	P
<i>cefixime 100 mg/5ml, 200 mg/5ml</i>	1	PA, NP
<i>cefixime 400 mg cap</i>	1	P
<i>cefpodoxime proxetil</i>	1	PA, NP
<i>ceftazidime 1 gm soln, 2 gm soln, 6 gm soln</i>	1	
<i>ceftriaxone sodium 1 gm soln, 2 gm soln, 10 gm soln, 250 mg soln, 500 mg soln</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SUPRAX 100 MG CHEW TAB, 100 MG/5ML RECON SUSP, 200 MG CHEW TAB, 200 MG/5ML RECON SUSP, 500 MG/5ML RECON SUSP	2	PA, NP
<i>tazicef 1 gm soln, 2 gm soln</i>	1	
<b>CEPHALOSPORINS - 4TH GENERATION</b>		
<i>cefepime hcl 1 gm soln, 2 gm soln</i>	1	
CEFEPIME HCL 1 GM/50ML SOLUTION, 2 GM/100ML SOLUTION	2	
<b>CHEMICALS</b>		
<b>BULK CHEMICALS</b>		
NATAPRES	2	
POLYETHYLENE GLYCOL 600 (BULK)	2	
<b>BULK CHEMICALS - A'S</b>		
MAGNASWEET 110	2	
MAGNASWEET 135	2	
<b>BULK CHEMICALS - B'S</b>		
BACITRACIN MICRONIZED	2	
BENZOCAINE	2	OTC
BIOTIN POWDER	2	OTC
BIOTIN-D	2	OTC
<b>BULK CHEMICALS - C'S</b>		
CELLULOSE CRYSTALS	2	OTC
<b>BULK CHEMICALS - L'S</b>		
LIDOCAINE BASE	2	
LIDOCAINE CRYSTALS, POWDER	2	
LIDOCAINE HCL MONOHYDRATE	2	
LIDOCAINE HCL POWDER	2	
<b>BULK CHEMICALS - N'S</b>		
NYSTATIN POWDER	2	



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>BULK CHEMICALS - P'S</b>		
PRILOCAINE	2	
PRILOCAINE HCL	2	
PROGESTERONE MICRONIZED POWDER	2	
PROGESTERONE MILLED	2	
PROGESTERONE POWDER	2	
PROGESTERONE ULTRA MICRONIZED	2	
PROGESTERONE WETTABLE	2	
PROGESTERONE WETTABLE (SOY)	2	
<b>BULK CHEMICALS - S'S</b>		
NICE PURE BAKING SODA	2	OTC
SODIUM BICARBONATE POWDER	2	OTC
STEVIA EXTRACT 90 % POWDER	2	OTC
<b>BULK CHEMICALS - T'S</b>		
TETRACAINE	2	
TETRACAINE HCL POWDER	2	
<b>BULK CHEMICALS - Z'S</b>		
ZINC OXIDE POWDER	2	OTC
<b>LIQUIDS</b>		
BENZYL BENZOATE	2	OTC
GLYCERIN SOLUTION	2	
<b>SOLIDS</b>		
CITRIC ACID	2	OTC
CITRIC ACID ANHYDROUS POWDER	2	OTC
CITRIC ACID MONOHYDRATE POWDER	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>CONTRACEPTIVES</b>		
<b>COMBINATION CONTRACEPTIVES - ORAL</b>		
<i>afirmelle</i>	\$0	EDS
<i>altavera</i>	\$0	EDS
<i>alyacen 1/35</i>	\$0	EDS
<i>alyacen 7/7/7</i>	\$0	EDS
<i>amethia</i>	\$0	EDS
<i>amethia lo</i>	\$0	EDS
<i>amethyst</i>	\$0	EDS
<i>apri</i>	\$0	EDS
<i>aranelle</i>	\$0	EDS
<i>ashlyna</i>	\$0	EDS
<i>aubra</i>	\$0	EDS
<i>aubra eq</i>	\$0	EDS
<i>aurovela 1.5/30</i>	\$0	EDS
<i>aurovela 1/20</i>	\$0	EDS
<i>aurovela 24 fe</i>	\$0	EDS
<i>aurovela fe 1.5/30</i>	\$0	EDS
<i>aurovela fe 1/20</i>	\$0	EDS
<i>aviane</i>	\$0	EDS
<i>ayuna</i>	\$0	EDS
<i>azurette</i>	\$0	EDS
<i>balziva</i>	\$0	EDS
<i>bekyree</i>	\$0	EDS
<i>blisovi 24 fe</i>	\$0	EDS
<i>blisovi fe 1.5/30</i>	\$0	EDS
<i>blisovi fe 1/20</i>	\$0	EDS
<i>briellyn</i>	\$0	EDS
<i>camrese</i>	\$0	EDS
<i>camrese lo</i>	\$0	EDS
<i>caziant</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>charlotte 24 fe</i>	\$0	EDS
<i>chateal</i>	\$0	EDS
<i>chateal eq</i>	\$0	EDS
<i>cryselle-28</i>	\$0	EDS
<i>cyclafem 1/35</i>	\$0	EDS
<i>cyclafem 7/7/7</i>	\$0	EDS
<i>cyred</i>	\$0	EDS
<i>cyred eq</i>	\$0	EDS
<i>dasetta 1/35</i>	\$0	EDS
<i>dasetta 7/7/7</i>	\$0	EDS
<i>daysee</i>	\$0	EDS
<i>delyla</i>	\$0	EDS
<i>desogestrel-ethinyl estradiol</i>	\$0	EDS
<i>dolishale</i>	\$0	EDS
<i>drospiren-eth estrad-levomefol</i>	\$0	EDS
<i>drospirenone-ethinyl estradiol</i>	\$0	EDS
<i>elinest</i>	\$0	EDS
<i>emoquette</i>	\$0	EDS
<i>enpresse-28</i>	\$0	EDS
<i>enskyce</i>	\$0	EDS
<i>estarylla</i>	\$0	EDS
<i>ethynodiol diac-eth estradiol</i>	\$0	EDS
<i>falmina</i>	\$0	EDS
<i>fayosim</i>	\$0	EDS
<b>FEMLYV</b>	\$0	
<i>femynor</i>	\$0	EDS
<i>finzala</i>	\$0	EDS
<i>gemmily</i>	\$0	EDS
<i>gianvi</i>	\$0	EDS
<i>hailey 1.5/30</i>	\$0	EDS
<i>hailey 24 fe</i>	\$0	EDS
<i>hailey fe 1.5/30</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>hailey fe 1/20</i>	\$0	EDS
<i>iclevia</i>	\$0	EDS
<i>introvale</i>	\$0	EDS
<i>isibloom</i>	\$0	EDS
<i>jaimiess</i>	\$0	EDS
<i>jasmiel</i>	\$0	EDS
<i>jolessa</i>	\$0	EDS
<i>joyeaux</i>	\$0	EDS
<i>juleber</i>	\$0	EDS
<i>junel 1.5/30</i>	\$0	EDS
<i>junel 1/20</i>	\$0	EDS
<i>junel fe 1.5/30</i>	\$0	EDS
<i>junel fe 1/20</i>	\$0	EDS
<i>junel fe 24</i>	\$0	EDS
<i>kaitlib fe</i>	\$0	EDS
<i>kalliga</i>	\$0	EDS
<i>kariva</i>	\$0	EDS
<i>kelnor 1/35</i>	\$0	EDS
<i>kelnor 1/50</i>	\$0	EDS
<i>kurvelo</i>	\$0	EDS
<i>larin 1.5/30</i>	\$0	EDS
<i>larin 1/20</i>	\$0	EDS
<i>larin 24 fe</i>	\$0	EDS
<i>larin fe 1.5/30</i>	\$0	EDS
<i>larin fe 1/20</i>	\$0	EDS
<i>larissia</i>	\$0	EDS
<i>layolis fe</i>	\$0	EDS
<i>leena</i>	\$0	EDS
<i>lessina</i>	\$0	EDS
<i>levonest</i>	\$0	EDS
<i>levonorg-eth estrad triphasic</i>	\$0	EDS
<i>levonorgest-eth est &amp; eth est</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>levonorgest-eth estrad 91-day</i>	\$0	EDS
<i>levonorgest-eth estradiol-iron</i>	\$0	EDS
<i>levonorgestrel-ethinyl estrad</i>	\$0	EDS
<i>levora 0.15/30 (28)</i>	\$0	EDS
<i>lillow</i>	\$0	EDS
<i>lo-zumandimine</i>	\$0	EDS
<i>loestrin 1.5/30 (21)</i>	\$0	EDS
<i>loestrin 1/20 (21)</i>	\$0	EDS
<i>loestrin fe 1.5/30</i>	\$0	EDS
<i>loestrin fe 1/20</i>	\$0	EDS
<i>lojaimiess</i>	\$0	EDS
<i>loryna</i>	\$0	EDS
<i>low-ogestrel</i>	\$0	EDS
<i>lutra</i>	\$0	EDS
<i>marlissa</i>	\$0	EDS
<i>melodetta 24 fe</i>	\$0	EDS
<i>merzee</i>	\$0	EDS
<i>mibelas 24 fe</i>	\$0	EDS
<i>microgestin 1.5/30</i>	\$0	EDS
<i>microgestin 1/20</i>	\$0	EDS
<i>microgestin 24 fe</i>	\$0	EDS
<i>microgestin fe 1.5/30</i>	\$0	EDS
<i>microgestin fe 1/20</i>	\$0	EDS
<i>mili</i>	\$0	EDS
<i>mono-linyah</i>	\$0	EDS
<i>necon 0.5/35 (28)</i>	\$0	EDS
<i>nikki</i>	\$0	EDS
<i>norethin ace-eth estrad-fe</i>	\$0	EDS
<i>norethin-eth estradiol-fe</i>	\$0	EDS
<i>norethindron-ethinyl estrad-fe</i>	\$0	EDS
<i>norethindrone acet-ethinyl est</i>	\$0	EDS
<i>norgestim-eth estrad triphasic</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>norgestimate-eth estradiol</i>	\$0	EDS
<i>nortrel 0.5/35 (28)</i>	\$0	EDS
<i>nortrel 1/35 (21)</i>	\$0	EDS
<i>nortrel 1/35 (28)</i>	\$0	EDS
<i>nortrel 7/7/7</i>	\$0	EDS
<i>nylia 1/35</i>	\$0	EDS
<i>nylia 7/7/7</i>	\$0	EDS
<i>nymyo</i>	\$0	EDS
<i>ocella</i>	\$0	EDS
<i>orsythia</i>	\$0	EDS
<i>philith</i>	\$0	EDS
<i>pimtrea</i>	\$0	EDS
<i>pirmella 1/35</i>	\$0	EDS
<i>pirmella 7/7/7</i>	\$0	EDS
<i>portia-28</i>	\$0	EDS
<i>previfem</i>	\$0	EDS
<i>reclipsen</i>	\$0	EDS
<i>rivelsa</i>	\$0	EDS
<i>setlakin</i>	\$0	EDS
<i>simliya</i>	\$0	EDS
<i>simpesse</i>	\$0	EDS
<i>sprintec 28</i>	\$0	EDS
<i>sronyx</i>	\$0	EDS
<i>syeda</i>	\$0	EDS
<i>tarina 24 fe</i>	\$0	EDS
<i>tarina fe 1/20</i>	\$0	EDS
<i>tarina fe 1/20 eq</i>	\$0	EDS
<i>taysofy</i>	\$0	EDS
<i>tilia fe</i>	\$0	EDS
<i>tri femynor</i>	\$0	EDS
<i>tri-estarylla</i>	\$0	EDS
<i>tri-legest fe</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>tri-linyah</i>	\$0	EDS
<i>tri-lo-estarylla</i>	\$0	EDS
<i>tri-lo-marzia</i>	\$0	EDS
<i>tri-lo-mili</i>	\$0	EDS
<i>tri-lo-sprintec</i>	\$0	EDS
<i>tri-mili</i>	\$0	EDS
<i>tri-nymyo</i>	\$0	EDS
<i>tri-previfem</i>	\$0	EDS
<i>tri-sprintec</i>	\$0	EDS
<i>tri-vylibra</i>	\$0	EDS
<i>tri-vylibra lo</i>	\$0	EDS
<i>trivora (28)</i>	\$0	EDS
<i>turqoz</i>	\$0	EDS
<i>tydemy</i>	\$0	EDS
<i>vestura</i>	\$0	EDS
<i>vienva</i>	\$0	EDS
<i>viorele</i>	\$0	EDS
<i>volnea</i>	\$0	EDS
<i>vyfemla</i>	\$0	EDS
<i>vylibra</i>	\$0	EDS
<i>wera</i>	\$0	EDS
<i>wymzya fe</i>	\$0	EDS
<i>zarah</i>	\$0	EDS
<i>zovia 1/35 (28)</i>	\$0	EDS
<i>zovia 1/35e (28)</i>	\$0	EDS
<i>zumandimine</i>	\$0	EDS
<b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>		
<i>norelgestromin-eth estradiol</i>	\$0	EDS
<i>xulane</i>	\$0	EDS
<i>zafemy</i>	\$0	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>COMBINATION CONTRACEPTIVES - VAGINAL</b>		
<i>eluryng</i>	\$0	EDS
<i>enilloring</i>	\$0	EDS
<i>etonogestrel-ethinyl estradiol</i>	\$0	EDS
<i>haloette</i>	\$0	EDS
<b>EMERGENCY CONTRACEPTIVES</b>		
ELLA	\$0	
<i>levonorgestrel (plan b)</i>	\$0	QL (1 EA PER FILL), OTC
<b>PROGESTIN CONTRACEPTIVES - INJECTABLE</b>		
<i>medroxyprogesterone acetate 150 mg/ml susp prsyr, 150 mg/ml suspension</i>	\$0	QL (0.04 ML PER DAY)
<b>PROGESTIN CONTRACEPTIVES - ORAL</b>		
<i>camila</i>	\$0	EDS
<i>deblitane</i>	\$0	EDS
<i>emzahh</i>	\$0	EDS
<i>errin</i>	\$0	EDS
<i>heather</i>	\$0	EDS
<i>incassia</i>	\$0	EDS
<i>jencycla</i>	\$0	EDS
<i>lyleq</i>	\$0	EDS
<i>lyza</i>	\$0	EDS
<i>nora-be</i>	\$0	EDS
<i>norethindrone 0.35 mg tab</i>	\$0	EDS
<i>norlyda</i>	\$0	EDS
<i>norlyroc</i>	\$0	EDS
<i>sharobel</i>	\$0	EDS
<i>tulana</i>	\$0	EDS
<b>CORTICOSTEROIDS</b>		
<b>GLUCOCORTICOSTEROIDS</b>		
<i>budesonide 3 mg cp dr part</i>	1	



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>budesonide er</i>	1	PA, QL (1 EA PER DAY), NP
CORTISONE ACETATE 25 MG TAB	2	
<i>decadron</i>	1	
<i>dexamethasone 0.5 mg tab, 0.5 mg/5ml elixir, 0.75 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 4 mg tab, 6 mg tab</i>	1	
DEXAMETHASONE 0.5 MG/5ML SOLUTION	2	
DEXAMETHASONE INTENSOL	2	
DEXAMETHASONE SOD PHOS +RFID	1	
<i>dexamethasone sod phosphate pf 10 mg/ml solution</i>	1	
<i>dexamethasone sodium phosphate dexamethasone sodium phosphate 20 mg/5ml solution, dexamethasone sodium phosphate 100 mg/10ml solution, dexamethasone sodium phosphate 4 mg/ml soln prsy, dexamethasone sodium phosphate 4 mg/ml solution, dexamethasone sodium phosphate 10 mg/ml solution, dexamethasone sodium phosphate 120 mg/30ml solution</i>	1	
ENTOCORT EC	1	
<i>hydrocortisone 5 mg tab, 10 mg tab, 20 mg tab</i>	1	EDS
<i>hydrocortisone sod suc (pf)</i>	1	
<i>methylprednisolone 4 mg tab, 4 mg tab thpk, 8 mg tab, 16 mg tab, 32 mg tab</i>	1	
<i>methylprednisolone acetate 40 mg/ml suspension, 80 mg/ml suspension</i>	1	
<i>methylprednisolone sodium succ</i>	1	
<i>prednisolone 15 mg/5ml solution</i>	1	
<i>prednisolone sodium phosphate 6.7 (5 base) mg/5ml, 15 mg/5ml, 25 mg/5ml</i>	1	
<i>prednisone 1 mg tab, 2.5 mg tab, 5 mg (21) tab thpk, 5 mg (48) tab thpk, 5 mg tab, 10 mg (21) tab thpk, 10 mg (48) tab thpk, 10 mg tab, 20 mg tab, 50 mg tab</i>	1	
PREDNISONE 5 MG/5ML SOLUTION	2	
SOLU-CORTEF	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SOLU-MEDROL (PF)	2	
SOLU-MEDROL -2 GM RECON SOLN	2	
TARPEYO	2	PA, LA
UCERIS 9 MG TAB 24H	2	PA, QL (1 EA PER DAY), NP

## **MINERALOCORTICIDS**

<i>fludrocortisone acetate 0.1 mg tab</i>	1	EDS
---	---	-----

## **COUGH/COLD/ALLERGY**

### **ANTITUSSIVES**

<i>benzonatate</i>	1	
<i>dextromethorphan (robitussin)</i>	1	OTC
WAL-TUSSIN COUGH RELIEF	2	OTC

### **COUGH/COLD/ALLERGY COMBINATIONS**

<i>bromfed dm</i>	1	
<i>bromphen-pseudoeph-dm</i>	1	
<i>brompheniramine / phenylephrine</i>	1	OTC
<i>brompheniramine / pseudoephedrine</i>	1	OTC
<i>cetirizine / pseudoephedrine (zyrtec - d)</i>	1	OTC, P
CHILDRENS COLD-ALLERGY	2	OTC
<i>chlorpheniramine / phenylephrine</i>	1	OTC
<i>chlorpheniramine / phenylephrine / acetaminophen</i>	1	OTC
<i>chlorpheniramine / phenylephrine / aspirin</i>	1	OTC
<i>chlorpheniramine / pseudoephedrine</i>	1	OTC
CLARINEX-D 12 HOUR	2	PA, NP
<i>dextromethorphan / phenylephrine / acetaminophen</i>	1	OTC
<i>doxylamine / dextromethorphan</i>	2	
<i>guaifenesin / codeine</i>	1	QL (60 ML PER 1 DAY), OTC
<i>guaifenesin / dextromethorphan (mucinex dm)</i>	1	OTC
<i>guaifenesin / dextromethorphan / phenylephrine</i>	1	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>guaifenesin / dextromethorphan / pseudoephedrine</i>	2	OTC
GUAIFENESIN/ DEXTROMETHORPHAN/ PHENYLEPHRINE	2	OTC
<i>loratadine / pseudoephedrine (claritin – d)</i>	1	OTC, P
MUCINEX DM	1	OTC
<i>phenylephrine / acetaminophen</i>	1	OTC
<i>phenylephrine / bropheniramine / dextromethorphan</i>	1	OTC
<i>phenylephrine / chlorpheniramine / dextromethorphan / acetaminophen</i>	1	OTC
<i>phenylephrine / dextromethorphan</i>	1	OTC
<i>phenylephrine / guaifenesin</i>	1	OTC
PHENYLEPHRINE / GUAIFENESIN	2	OTC
<i>pseudoeph-bromphen-dm</i>	1	
<i>pseudoephedrine / guaifenesin</i>	1	OTC
<i>pseudoephedrine / ibuprofen</i>	1	OTC
<b>EXPECTORANTS</b>		
<i>guaifenesin (mucinex)</i>	1	OTC
<b>MISC. RESPIRATORY INHALANTS</b>		
<i>sodium chloride nasal spray</i>	1	OTC, EDS
<b>MUCOLYTICS</b>		
<i>acetylcysteine 10 %, 20 %</i>	1	
<b>DERMATOLOGICALS</b>		
<b>ACNE PRODUCTS</b>		
ACANYA	2	PA, NP
<i>accutane</i>	1	
<i>adapalene 0.1 % cream, 0.3 % gel</i>	1	PA, NP
<i>adapalene 0.1 % gel</i>	1	OTC, P
<i>adapalene treatment</i>	1	OTC, P
<i>adapalene-benzoyl peroxide -0.1-2.5 % gel</i>	1	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
ALTRENO	2	PA, NP
<i>amnesteam</i>	1	
AMZEEQ	2	PA, NP
ARAZLO	2	PA, NP
ATRALIN	2	PA, NP
<i>avar cleanser</i>	1	PA, NP
<i>avar-e emollient</i>	1	
<i>avar-e green</i>	1	
AVAR-E LS	2	PA, NP
<i>avita</i>	1	PA, NP
BENZAACLIN WITH PUMP	1	P
BENZAMYCIN	2	PA, NP
<i>benzoyl peroxide</i>	1	PA, OTC, NP
<i>benzoyl peroxide cleanser 6%</i>	1	PA, OTC, NP
<i>benzoyl peroxide pad</i>	2	PA, OTC, NP
<i>benzoyl peroxide-erythromycin</i>	1	P
<i>bp 10-1</i>	1	PA, NP
BPO GEL 4%, 8%	1	OTC, P
CABTREO	2	PA, NP
<i>claravis</i>	1	
CLENIA PLUS	2	PA, NP
<i>clindacin</i>	1	PA, NP
<i>clindacin etz 1 % swab</i>	1	P
<i>clindacin-p</i>	1	P
<i>clindamycin phos-benzoyl perox -1-5 % gel, -1.2-5 % gel</i>	1	P
<i>clindamycin phos-benzoyl perox -1.2-2.5 % gel, -1.2-3.75 % gel</i>	1	PA, NP
<i>clindamycin phosphate 1 % foam</i>	1	PA, NP
<i>clindamycin phosphate 1 % gel, 1 % lotion, 1 % solution, 1 % swab</i>	1	P
<i>clindamycin-tretinoin</i>	1	PA, NP
<i>cvs adapalene</i>	1	OTC, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>dapsone 5 % gel, 7.5 % gel</i>	1	PA, NP
ERY	2	
<i>erythromycin 2 % gel, 2 % solution</i>	1	P
FABIOR	1	PA, NP
<i>isotretinoin 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap</i>	1	
<i>myorisan</i>	1	
<i>neuac 1.2-5 % gel</i>	1	PA, NP
NEUAC 1.2-5 % KIT	2	PA, NP
ONEXTON	2	PA, NP
RETIN-A	1	P
RETIN-A MICRO	2	PA, NP
RETIN-A MICRO PUMP	2	PA, NP
<i>sss 10-5 --% cream</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
SULFACETAMIDE SODIUM-SULFUR -10-2 % CREAM	2	P
<i>sulfacetamide sodium-sulfur -10-4 % pad, -10-5 % cream</i>	1	
<i>sulfacetamide sodium-sulfur -10-5 % liquid, -10-5 % lotion</i>	1	P
<i>sulfacetamide sodium-sulfur -8-4 % suspension, -10-5 % suspension</i>	1	PA, NP
SULFACETAMIDE SODIUM-SULFUR -9-4.25 % SUSPENSION	2	PA, NP
<i>sulfacleanse 8/4</i>	1	PA, NP
<i>sulfamez wash</i>	1	PA, NP
TAZAROTENE 0.1 % FOAM	1	PA, NP
<i>tretinoin 0.01 % gel, 0.025 % cream, 0.025 % gel, 0.05 % cream, 0.05 % gel, 0.1 % cream</i>	1	PA, NP
<i>tretinoin microsphere 0.04 % gel, 0.1 % gel</i>	1	PA, NP
<i>tretinoin microsphere 0.08 % gel</i>	1	
<i>tretinoin microsphere pump</i>	1	PA, NP
VELTIN	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
WINLEVI	2	PA, NP
<i>zenatane</i>	1	
ZIANA	2	PA, NP
<b>ANTI-INFLAMMATORY AGENTS - TOPICAL</b>		
DICLOFENAC EPOLAMINE	1	PA, QL (2 EA PER DAY), NP
<i>diclofenac sodium 1 % gel</i>	1	QL (16.6 GM PER DAY), OTC, EDS, P
FLECTOR	2	PA, QL (2 EA PER DAY), NP
LICART	2	PA, QL (1 EA PER DAY), NP
<b>ANTIBIOTICS - TOPICAL</b>		
<i>bacitracin</i>	1	OTC
<i>bacitracin / polymyxin b (polysporin)</i>	1	OTC
<i>bacitracin zinc</i>	1	OTC
CENTANY	2	PA, NP
CENTANY AT	2	PA, NP
<i>gentamicin sulfate 0.1 % cream, 0.1 % ointment</i>	1	
<i>mupirocin 2 % ointment</i>	1	P
<i>mupirocin calcium</i>	1	PA, NP
<i>neomycin / bacitracin / polymixin (neosporin)</i>	1	OTC
<i>neomycin / bacitracin / polymixin / pramoxine (neosporin plus)</i>	1	OTC
XEPI	2	PA, NP
<b>ANTIFUNGALS - TOPICAL</b>		
<i>ciclodan</i>	1	P
<i>ciclopirox 0.77 % gel, 1 % shampoo</i>	1	PA, NP
<i>ciclopirox 8 % solution</i>	1	P
<i>ciclopirox olamine 0.77 % cream, 0.77 % suspension</i>	1	P
<i>clotrimazole (lotrimin)</i>	1	PA, OTC, NP
<i>clotrimazole-betamethasone -1-0.05 % cream</i>	1	P
CLOTRIMAZOLE-BETAMETHASONE CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % LOTION, CLOTRIMAZOLE- BETAMETHASONE 1-0.05 % LOTION	1	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>econazole nitrate 1 % cream</i>	1	P
ERTACZO	2	PA, NP
JUBLIA	2	PA, NP
KERYDIN	2	PA, NP
<i>ketoconazole 2 % cream, 2 % shampoo</i>	1	P
<i>ketoconazole 2 % foam</i>	1	PA, NP
<i>ketodan 2 % foam</i>	1	PA, NP
<i>klayesta</i>	1	P
LOPROX	2	PA, NP
LULICONAZOLE	1	PA, QL (60 GM PER 30 DAYS), NP
LUZU	2	PA, QL (60 GM PER 30 DAYS), NP
MICATIN	2	OTC
<i>miconazole (micatin)</i>	1	OTC, P
MICONAZOLE-ZINC OXIDE- PETROLAT	1	PA, NP
<i>naftifine hcl 1 % gel, 2 % gel</i>	1	PA, NP
NAFTIN	2	PA, NP
<i>nyamyc</i>	1	P
<i>nystatin 100000 unit/gm cream, 100000 unit/gm ointment, 100000 unit/gm powder</i>	1	P
<i>nystatin-triamcinolone -100000-0.1 unit/gm-% cream</i>	1	P
<i>nystatin-triamcinolone -100000-0.1 unit/gm-% ointment</i>	1	PA, NP
<i>nystop</i>	1	P
<i>oxiconazole nitrate</i>	1	PA, NP
OXISTAT 1 % LOTION	2	PA, NP
<i>tavaborole</i>	1	PA, NP
<i>terbinafine (lamisil)</i>	1	OTC, P
<i>tolnaftate (tinactin)</i>	1	PA, OTC, NP
VUSION	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTIHISTAMINES-TOPICAL</b>		
<i>diphenhydramine / zinc</i>	1	OTC
<b>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL</b>		
<i>bexarotene 1 % gel</i>	1	PA, SP
<i>diclofenac sodium 3 % gel</i>	1	PA, QL (300 GM PER 30 DAYS)
FLUOROURACIL 2 % SOLUTION	2	
<i>fluorouracil 5 % cream, 5 % solution</i>	1	
VALCHLOR	2	LA, QL (240 GM PER 30 DAYS)
<b>ANTIPRURITICS - TOPICAL</b>		
<i>anti-itch lotion</i>	1	OTC
<b>ANTIPSORIATICS</b>		
<i>acitretin</i>	1	SP
BIMZELX 160 MG/ML SOLN A-INJ, 160 MG/ML SOLN PRSYR	2	PA, QL (2 EA PER 56 DAYS), SP, NP
BIMZELX 320 MG/2ML SOLN A-INJ, 320 MG/2ML SOLN PRSYR	2	PA, QL (1 EA PER 56 DAYS), SP, NP
<i>calcipotriene 0.005 % cream, 0.005 % solution</i>	1	
CALCIPOTRIENE 0.005 % SOLUTION	2	
COSENTYX (300 MG DOSE)	2	PA, QL (2 ML PER 28 DAYS), SP, NP
COSENTYX 125 MG/5ML SOLUTION	2	PA, QL (12 ML PER 28 DAYS), SP, NP
COSENTYX 150 MG/ML SOLN PRSYR	2	PA, QL (2 ML PER 28 DAYS), SP, NP
COSENTYX 75 MG/0.5ML SOLN PRSYR	2	PA, QL (0.5 ML PER 28 DAYS), SP, NP
COSENTYX SENSOREADY (300 MG)	2	PA, QL (2 ML PER 28 DAYS), SP, NP
COSENTYX SENSOREADY PEN	2	PA, QL (2 ML PER 28 DAYS), SP, NP
COSENTYX UNOREADY	2	PA, QL (2 ML PER 28 DAYS), SP, NP
ILUMYA	2	PA, LA, QL (1 EA PER 84 DAYS), SP, NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>methoxsalen rapid</i>	1	
METHOXSALEN RAPID	2	
SILIQ	2	PA, QL (0.11 ML PER DAY), SP, NP
SKYRIZI (150 MG DOSE)	2	PA, QL (1 EA PER 84 DAYS), SP, NP
SKYRIZI 150 MG/ML SOLN PRSYR	2	PA, QL (1 EA PER 84 DAYS), SP, NP
SKYRIZI PEN	2	PA, QL (1 EA PER 84 DAYS), SP, NP
SOTYKTU	2	PA, QL (30 EA PER 30 DAYS), SP, NP
SPEVIGO 150 MG/ML SOLN PRSYR	2	PA, QL (2 EA PER 28 DAYS), SP, NP
SPEVIGO 450 MG/7.5ML SOLUTION	2	PA, LA, QL (15 ML PER 365 DAYS), SP, NP
STELARA 45 MG/0.5ML SOLN PRSYR	2	PA, QL (0.5 ML PER 84 DAYS), SP, NP
STELARA 45 MG/0.5ML SOLUTION	2	PA, QL (0.5 ML PER 84 DAYS), SP, NP
STELARA 90 MG/ML SOLN PRSYR	2	PA, QL (1 ML PER 84 DAYS), SP, NP
TALTZ 20 MG/0.25ML SOLN PRSYR, 40 MG/0.5ML SOLN PRSYR	2	PA, QL (0.5 ML PER 28 DAYS), SP, NP
TALTZ 80 MG/ML SOLN A-INJ, 80 MG/ML SOLN PRSYR	2	PA, QL (1 ML PER 28 DAYS), SP, NP
<i>tazarotene 0.05 % cream, 0.05 % gel, 0.1 % cream, 0.1 % gel</i>	1	PA, NP
TREMFYA 100 MG/ML SOLN A-INJ, 200 MG/2ML SOLN A-INJ, 200 MG/2ML SOLN PRSYR	2	PA, QL (2 ML PER 28 DAYS), SP, NP
TREMFYA 100 MG/ML SOLN PRSYR	2	PA, QL (1 ML PER 56 DAYS), SP, NP
<b>ANTISEBORRHEIC PRODUCTS</b>		
<i>anti-dandruff shampoo</i>	1	OTC, EDS
OVACE PLUS 10 % CREAM, 10 % SHAMPOO	2	PA, NP
<i>sodium sulfacetamide wash</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SODIUM SULFACETAMIDE- BAKUCHIOL	2	
<i>sulfacetamide sodium 10 % liquid</i>	1	
<b>ANTIVIRALS - TOPICAL</b>		
<i>acyclovir 5 % cream</i>	1	PA, NP
<i>acyclovir 5 % ointment</i>	1	P
DENAVIR	1	P
<i>penciclovir</i>	1	PA, NP
XERESE	2	PA, NP
ZOVIRAX 5 % CREAM, 5 % OINTMENT	2	PA, NP
<b>BATH PRODUCTS</b>		
<i>emollient</i>	2	OTC
MOISTURIZING CREAM (VANICREAM)	2	OTC
<b>BURN PRODUCTS</b>		
<i>silver sulfadiazine 1 % cream</i>	1	
<i>ssd</i>	1	
<b>CORTICOSTEROIDS - TOPICAL</b>		
<i>betamethasone dipropionate 0.05 % cream, 0.05 % lotion, 0.05 % ointment</i>	1	
<i>betamethasone dipropionate aug 0.05 % cream, 0.05 % lotion, 0.05 % ointment</i>	1	
BETAMETHASONE DIPROPIONATE AUG 0.05 % GEL	2	
<i>betamethasone valerate 0.1 % cream, 0.1 % lotion, 0.1 % ointment</i>	1	
<i>clobetasol prop emollient base</i>	1	
<i>clobetasol propionate 0.05 % cream, 0.05 % ointment</i>	1	QL (120 UNITS PER 30 DAYS)
<i>clobetasol propionate 0.05 % foam, 0.05 % gel, 0.05 % solution</i>	1	
<i>clobetasol propionate e</i>	1	
<i>desonide 0.05 % cream, 0.05 % ointment</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>fluocinolone acetonide 0.025 % ointment</i>	1	
<i>fluocinolone acetonide body</i>	1	
<i>fluocinolone acetonide scalp</i>	1	
<i>fluocinonide 0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.05 % solution, 0.1 % cream</i>	1	
<i>fluticasone propionate 0.05 % cream</i>	1	
<i>halobetasol propionate 0.05 % cream, 0.05 % ointment</i>	1	
<i>hydrocortisone</i>	1	OTC, EDS
<b>HYDROCORTISONE ACE-PRAMOXINE -2.5-1 % CREAM</b>	1	
<i>mometasone furoate 0.1 % cream, 0.1 % ointment, 0.1 % solution</i>	1	
<i>triamcinolone acetonide 0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment</i>	1	
<i>triderm</i>	1	
<b>DIAPER RASH PRODUCTS</b>		
<i>diaper rash products</i>	1	OTC
<b>ECZEMA AGENTS</b>		
ADBRY 150 MG/ML SOLN PRSYR	2	PA, QL (4 EA PER 28 DAYS), SP, NP
ADBRY DBRY 300 MG/2ML SOLN - INJ	2	PA, QL (4 ML PER 28 DAYS), SP, NP
DUPIXENT 100 MG/0.67ML SOLN PRSYR	2	PA, QL (2.68 ML PER 28 DAYS), SP, P
DUPIXENT 200 MG/1.14ML SOLN A-INJ, 200 MG/1.14ML SOLN PRSYR	2	PA, QL (2.28 ML PER 28 DAYS), SP, P
DUPIXENT 300 MG/2ML SOLN A-INJ	2	PA, QL (4 ML PER 28 DAYS), SP, P
DUPIXENT 300 MG/2ML SOLN PRSYR	2	PA, QL (4 UNITS PER 28 DAYS), SP, P
OPZELURA	2	PA, QL (240 GM PER 30 DAYS), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>EMOLLIENT/KERATOLYTIC AGENTS</b>		
<i>urea 10% and 20% (carmol)</i>	1	OTC, EDS
<b>EMOLLIENTS</b>		
<i>ammonium lactate (amlactin)</i>	1	OTC
EMOLLIENT	2	OTC
<i>glycerin topical liquid</i>	1	OTC
VITAMIN A	2	OTC
<i>vitamin a / vitamin d</i>	1	OTC
<b>IMMUNOMODULATING AGENTS - TOPICAL</b>		
<i>imiquimod 5 % cream</i>	1	
<b>IMMUNOSUPPRESSIVE AGENTS - TOPICAL</b>		
<i>pimecrolimus</i>	1	
<i>tacrolimus 0.03 %, 0.1 %</i>	1	
<b>KERATOLYTIC/ANTIMITOTIC AGENTS</b>		
PODOFILOX 0.5 % SOLUTION	2	
<i>podofilox 0.5 % solution</i>	1	
SALICYLIC ACID	2	OTC
<i>salicylic acid</i>	1	OTC, EDS
<b>LINIMENTS</b>		
<i>camphor / menthol / methyl salicylate (salonpas)</i>	1	OTC
<i>methyl salicylate / menthol</i>	1	OTC
<i>trolamine salicylate</i>	1	OTC
<i>trolamine salicylate (myoflex)</i>	1	OTC
TROLAMINE SALICYLATE (MYOFLEX)	2	OTC
<b>LOCAL ANESTHETICS - TOPICAL</b>		
<i>capsaicin (zostrix)</i>	1	OTC, EDS
<i>glydo</i>	1	
LIDOCAINE 5 % OINTMENT	1	QL (107 GM PER 30 DAYS)
LIDOCAINE 5 % PATCH	1	PA, QL (3 EA PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>lidocaine hcl 4 % solution</i>	1	
<i>lidocaine hcl urethral/mucosal 2 % prsy</i>	1	
LIDOCAINE PATCH 4%	1	QL (3 EA PER DAY), OTC
<i>lidocaine-prilocaine -2.5-2.5 % cream</i>	1	
<i>lidocaine-prilocaine cream kit</i>	1	
<i>pramoxine / calamine</i>	1	OTC
ZTLIDO 1.8 % PATCH	2	PA, NP

### **MISC. TOPICAL**

<i>a+d first aid</i>	1	OTC
A+D FIRST AID	2	OTC
<i>a+d prevent original</i>	1	OTC
<i>benzoin tincture</i>	2	OTC
<i>calamine</i>	2	OTC
<i>calamine / zinc oxide</i>	2	OTC
<i>cvs multi-purpose -15.5-53.4 % ointment</i>	1	OTC
<i>dermamed</i>	1	OTC
<i>dimethicone</i>	2	OTC
DIMETHICONE CREAM	2	OTC
DRYSOL	2	
<i>eyelid cleansers</i>	2	OTC
<i>isopropyl alcohol (skin cleanser)</i>	\$0	OTC
<i>lanolin/mineral oil/white petrolatum (eucerin)</i>	1	OTC
MENTHOL / ZINC OXIDE	2	OTC
<i>menthol / zinc oxide</i>	1	OTC
MINERAL OIL	2	OTC
SODIUM CHLORIDE	2	OTC
<i>witch hazel</i>	1	OTC
<i>zinc oxide (desitin)</i>	1	OTC

### **PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL**

EUCRISA	2	PA, QL (120 GM PER 30 DAYS), NP
ZORYVE 0.15 % CREAM	2	PA, QL (120 GM PER 30 DAYS), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ROSACEA AGENTS</b>		
<i>azelaic acid 15 % gel</i>	1	
<i>metronidazole 0.75 % cream, 0.75 % gel, 0.75 % lotion</i>	1	
<i>rosadan 0.75 % cream, 0.75 % gel</i>	1	
<b>SCABICIDES PEDICULICIDES</b>		
CROTAN	2	PA, NP
LINDANE	2	PA, NP
<i>malathion</i>	1	PA, NP
NATROBA	1	P
OVIDE	2	PA, NP
<i>permethrin (nix)</i>	1	OTC, P
<i>piperonyl / pyrethrins (rid)</i>	1	OTC, P
SPINOSAD	1	PA, NP
<b>TAR PRODUCTS</b>		
<i>coal tar</i>	1	OTC
X-SEB T 10 % SHAMPOO	2	OTC
<b>DIAGNOSTIC PRODUCTS</b>		
<b>DIAGNOSTIC DRUGS</b>		
GLUCAGEN DIAGNOSTIC	2	
GLUCAGON HCL (DIAGNOSTIC)	1	P
<b>DIAGNOSTIC TESTS</b>		
ACCU-CHEK BLOOD GLUCOSE METER	\$0	OTC, CDS, P
ACCU-CHEK SMARTVIEW	\$0	OTC, CDS, P
ALBUSTIX	\$0	OTC
CHEMSTRIP 10 MD	2	
CHEMSTRIP 10/SG	2	
CHEMSTRIP 2 GP	2	
CHEMSTRIP 5 OB	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
CHEMSTRIP 7	2	
CHEMSTRIP 9	2	
CHEMSTRIP K	\$0	OTC
CHEMSTRIP MICRAL	\$0	OTC
CHEMSTRIP UGK	\$0	OTC, CDS
CONTOUR NEXT TEST	\$0	OTC, CDS, P
CONTOUR PLUS TEST	\$0	CDS
CONTOUR TEST	\$0	OTC, CDS, P
CVS KETONE CARE	\$0	OTC, CDS
FORA G20 BLOOD GLUCOSE TEST	\$0	PA, OTC, CDS, NP
FORA GTEL BLOOD KETONE TEST	\$0	OTC, CDS
FORA TEST N'GO ADV-VOICE-6 CON	\$0	OTC, CDS
FREESTYLE INSULINX TEST	\$0	PA, OTC, CDS, NP
FREESTYLE LITE TEST	\$0	PA, OTC, CDS, NP
FREESTYLE TEST	\$0	PA, OTC, CDS, NP
GLUCOCARD EXPRESSION TEST	\$0	PA, OTC, CDS, NP
GLUCOCARD SHINE TEST	\$0	PA, OTC, CDS, NP
<i>glucose urine test</i>	\$0	OTC, CDS
GOJJI BLOOD KETONE TEST	\$0	OTC, CDS
KETO-DIASTIX	\$0	OTC, CDS
KETONE TEST	\$0	OTC
KETOSTIX	\$0	OTC
MULTISTIX 10 SG	2	
NOVA MAX PLUS KETONE TEST	\$0	OTC, CDS
ONETOUCH ULTRA	\$0	PA, OTC, CDS, NP
ONETOUCH ULTRA BLUE TEST	\$0	PA, OTC, CDS, NP
ONETOUCH ULTRA TEST	\$0	PA, OTC, CDS, NP
ONETOUCH VERIO STRIP	\$0	PA, OTC, CDS, NP
PRECISION XTRA BLOOD GLUCOSE	\$0	PA, OTC, CDS, NP
PRECISION XTRA KETONE	\$0	OTC, CDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PRODIGY NO CODING BLOOD GLUC STRIP	\$0	PA, OTC, CDS, NP
PTS PANELS KETONE TEST	\$0	OTC, CDS
RELION KETONE TEST	\$0	OTC
TRUE METRIX BLOOD GLUCOSE TEST	\$0	PA, OTC, CDS, NP

## **DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS**

### **DIETARY MANAGEMENT PRODUCTS**

<i>l-methylfolate</i>	2	
<i>l-methylfolate combinations</i>	2	OTC

### **DIGESTIVE AIDS**

#### **DIGESTIVE ENZYMES**

CREON	2	P
<i>lactase (lactaid)</i>	1	OTC, EDS
PERTZYE	2	PA, NP
VIOKACE	2	PA, NP
ZENPEP	2	P

### **DIURETICS**

#### **CARBONIC ANHYDRASE INHIBITORS**

<i>acetazolamide 125 mg tab, 250 mg tab</i>	1	EDS
<i>acetazolamide er</i>	1	EDS
<i>acetazolamide sodium</i>	1	

#### **DIURETIC COMBINATIONS**

<i>amiloride-hydrochlorothiazide</i>	1	EDS
AMILORIDE-HYDROCHLOROTHIAZIDE	1	
<i>spironolactone-hctz</i>	1	EDS
<i>triamterene-hctz</i>	1	EDS



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>LOOP DIURETICS</b>		
<i>bumetanide 0.25 mg/ml solution</i>	1	
<i>bumetanide 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	EDS
<i>furosemide 10 mg/ml solution, 20 mg tab, 40 mg tab, 80 mg tab</i>	1	EDS
FUROSEMIDE 8 MG/ML SOLUTION	2	
<i>torseamide</i>	1	EDS
<b>POTASSIUM SPARING DIURETICS</b>		
<i>amiloride hcl 5 mg tab</i>	1	EDS
<i>spironolactone 25 mg tab, 50 mg tab, 100 mg tab</i>	1	EDS
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<i>chlorthalidone</i>	1	EDS
<i>hydrochlorothiazide 12.5 mg cap, 12.5 mg tab, 25 mg tab, 50 mg tab</i>	1	EDS
<i>indapamide</i>	1	EDS
<i>metolazone</i>	1	EDS
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		
<b>ADRENAL STEROID INHIBITORS</b>		
ISTURISA 1 MG TAB, 5 MG TAB	2	PA, LA, QL (12 EA PER 1 DAY)
<b>BONE DENSITY REGULATORS</b>		
ACTONEL	2	PA, NP
<i>alendronate sodium 10 mg tab, 35 mg tab, 70 mg/75ml solution</i>	1	EDS, P
<i>alendronate sodium 70 mg tab</i>	1	QL (4 UNITS PER 30 DAYS), EDS, P
AELVIA	2	PA, NP
BONIVA 150 MG TAB	2	PA, NP
<i>calcitonin (salmon) 200 unit/act solution</i>	1	EDS, P
EVENITY	2	PA, SP, NP
FORTEO	1	SP, P
FOSAMAX	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
FOSAMAX PLUS D	2	PA, NP
<i>ibandronate sodium 150 mg tab</i>	1	EDS, P
PROLIA	2	PA, SP, NP
<i>risedronate sodium 5 mg tab, 35 mg tab, 35 mg tab dr, 150 mg tab</i>	1	PA, EDS, NP
<i>teriparatide</i>	1	PA, SP, NP
<i>teriparatide (recombinant) 600 mcg/2.4ml soln pen</i>	1	PA, SP, NP
TERIPARATIDE (RECOMBINANT) 620 MCG/2.48ML SOLN PEN	2	PA, SP, NP
TYMLOS	2	PA, SP, NP
<b>GNRH/LHRH ANTAGONISTS</b>		
ORILISSA 150 MG TAB	2	PA, QL (1 EA PER DAY)
ORILISSA 200 MG TAB	2	PA, QL (2 EA PER DAY)
<b>GROWTH HORMONES</b>		
GENOTROPIN	2	PA, SP, P
GENOTROPIN MINIQUICK	2	PA, SP, P
HUMATROPE	2	PA, SP, NP
NGENLA	2	PA, SP, NP
NORDITROPIN FLEXP	2	PA, SP, P
NUTROPIN AQ NUSPIN 10	2	PA, SP, P
NUTROPIN AQ NUSPIN 20	2	PA, SP, P
NUTROPIN AQ NUSPIN 5	2	PA, SP, P
OMNITROPE	2	PA, SP, NP
SAIZEN	2	PA, SP, NP
SAIZENPREP	2	PA, SP, NP
SEROSTIM	2	PA, LA, NP
SKYTROFA	2	PA, SP, NP
SOGROYA	2	PA, SP, NP
ZOMACTON	2	PA, SP, NP
ZOMACTON (FOR ZOMA-JET 10)	2	PA, SP, NP
ZORBTIVE	2	PA, SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>HORMONE RECEPTOR MODULATORS</b>		
EVISTA	2	PA, NP
<i>raloxifene hcl</i>	\$0	EDS, P
<b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b>		
LUPRON DEPOT-PED (1-MONTH)	2	PA, SP
LUPRON DEPOT-PED (3-MONTH)	2	PA, SP
LUPRON DEPOT-PED (6-MONTH)	2	PA, SP
TRIPTODUR	2	PA, LA
<b>METABOLIC MODIFIERS</b>		
<i>calcitriol 0.25 mcg cap, 0.5 mcg cap, 1 mcg/ml solution</i>	1	EDS
<i>carglumic acid</i>	1	PA, SP
<i>cinacalcet hcl</i>	1	EDS, SP
CRYSVITA 10 MG/ML SOLUTION	2	PA, LA, QL (36 ML PER 28 DAYS)
CRYSVITA 20 MG/ML SOLUTION	2	PA, LA, QL (18 ML PER 28 DAYS)
CRYSVITA 30 MG/ML SOLUTION	2	PA, LA, QL (12 ML PER 28 DAYS)
<i>levocarnitine 1 gm/10ml solution, 330 mg tab</i>	1	EDS
<i>levocarnitine sf</i>	1	EDS
MYALEPT	2	PA, SP
OPFOLDA	2	LA, QL (0.29 EA PER DAY)
PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR, 10 MG/0.5ML SOLN PRSYR	2	PA, LA, QL (0.5 ML PER DAY)
PALYNZIQ 20 MG/ML SOLN PRSYR	2	PA, LA, QL (1 ML PER DAY)
RAVICTI	2	PA, LA
REVCOVI	2	PA, LA
<i>sodium phenylbutyrate 500 mg tab</i>	1	PA, SP
STRENSIQ	2	PA, LA
<b>NATRIURETIC PEPTIDES</b>		
VOXZOGO	2	PA, LA, QL (1 EA PER DAY)
<b>POSTERIOR PITUITARY HORMONES</b>		
<i>desmopressin ace spray refrig</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>desmopressin acetate 0.1 mg tab, 0.2 mg tab</i>	1	EDS
<i>desmopressin acetate 4 mcg/ml solution</i>	1	
<i>desmopressin acetate pf</i>	1	
<i>desmopressin acetate spray</i>	1	
<b>PROGESTERONE RECEPTOR ANTAGONISTS</b>		
<i>mifepristone 200 mg tab</i>	1	
<b>PROLACTIN INHIBITORS</b>		
<i>cabergoline</i>	1	EDS
<b>SOMATOSTATIC AGENTS</b>		
OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR, 100 MCG/ML SOLN PRSYR, 500 MCG/ML SOLN PRSYR	2	LA
<i>octreotide acetate 50 mcg/ml, 100 mcg/ml, 200 mcg/ml, 500 mcg/ml, 1000 mcg/ml</i>	1	LA
SIGNIFOR	2	PA, LA, QL (2 EA PER DAY)
<b>VASOPRESSIN RECEPTOR ANTAGONISTS</b>		
JYNARQUE 15 MG TAB THPK, 30 & 15 MG TAB THPK, 45 & 15 MG TAB THPK, 60 & 30 MG TAB THPK, 90 & 30 MG TAB THPK	2	PA, LA, QL (2 EA PER DAY)
<i>tolvaptan</i>	1	PA, QL (2 EA PER 1 DAY), SP
<b>ESTROGENS</b>		
<b>ESTROGEN COMBINATIONS</b>		
<i>amabelz</i>	1	EDS
<i>estradiol-norethindrone acet</i>	1	EDS
<i>fyavolv</i>	1	EDS
<i>jinteli</i>	1	EDS
<i>mimvey</i>	1	EDS
<i>norethindrone-eth estradiol</i>	1	EDS
ORIAHNN	2	PA
PREMPHASE	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ESTROGENS</b>		
<i>dotti</i>	1	EDS
<i>estradiol 0.025 mg/24hr patch tw, 0.025 mg/24hr patch wk, 0.0375 mg/24hr patch tw, 0.0375 mg/24hr patch wk, 0.05 mg/24hr patch tw, 0.05 mg/24hr patch wk, 0.06 mg/24hr patch wk, 0.075 mg/24hr patch tw, 0.075 mg/24hr patch wk, 0.1 mg/24hr patch tw, 0.1 mg/24hr patch wk, 0.5 mg tab, 1 mg tab, 2 mg tab</i>	1	EDS
<i>estradiol valerate 10 mg/ml, 20 mg/ml, 40 mg/ml</i>	1	EDS
<i>lyllana</i>	1	EDS

## **FLUOROQUINOLONES**

### **FLUOROQUINOLONES**

BAXDELA 450 MG TAB	2	PA, NP
CIPRO	2	PA, NP
<i>ciprofloxacin 250 mg/5ml (5%), 500 mg/5ml (10%)</i>	1	PA, NP
CIPROFLOXACIN HCL 100 MG TAB	2	P
<i>ciprofloxacin hcl 250 mg tab, 500 mg tab, 750 mg tab</i>	1	P
<i>levofloxacin 25 mg/ml solution, 250 mg tab, 500 mg tab, 750 mg tab</i>	1	P
<i>moxifloxacin hcl 400 mg tab</i>	1	PA, NP
OFLOXACIN 300 MG TAB	2	PA, NP
<i>ofloxacin 400 mg tab</i>	1	PA, NP

## **GASTROINTESTINAL AGENTS - MISC.**

### **5-HT4 RECEPTOR AGONISTS**

MOTEGRITY	2	PA, NP
-----------	---	--------

### **AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)**

TRULANCE	2	PA, NP
----------	---	--------

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTIFLATULENTS</b>		
<i>simethicone (mylicon)</i>	1	OTC, EDS
<b>FARNESOID X RECEPTOR (FXR) AGONISTS</b>		
OCALIVA	2	LA, QL (1 EA PER DAY)
<b>GALLSTONE SOLUBILIZING AGENTS</b>		
<i>ursodiol 250 mg tab, 300 mg cap, 500 mg tab</i>	1	EDS
<b>GASTROINTESTINAL ANTIALLERGY AGENTS</b>		
<i>cromolyn sodium 100 mg/5ml conc</i>	1	EDS
<b>GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS</b>		
<i>lubiprostone</i>	1	EDS, P
<b>GASTROINTESTINAL STIMULANTS</b>		
GIMOTI	2	PA, LA, NP
METOCLOPRAMIDE HCL 5 MG TAB DISP, 10 MG TAB DISP	2	PA, NP
<i>metoclopramide hcl 5 mg tab, 5 mg/5ml solution, 5 mg/ml solution, 10 mg tab, 10 mg/10ml solution</i>	1	
<b>HEPATOTROPICS</b>		
REZDIFFRA	2	PA, QL (1 EA PER DAY)
<b>INFLAMMATORY BOWEL AGENTS</b>		
APRISO	1	P
ASACOL HD	2	PA, NP
AVSOLA	2	PA, SP, NP
AZULFIDINE	2	PA, NP
AZULFIDINE EN-TABS	2	PA, NP
<i>balsalazide disodium</i>	1	P
CANASA	2	PA, NP
CIMZIA	2	PA, QL (2 EA PER 28 DAYS), SP, NP
CIMZIA (2 SYRINGE)	2	PA, QL (2 EA PER 28 DAYS), SP, NP
CIMZIA-STARTER	2	PA, QL (3 EA PER 365 DAYS), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
COLAZAL	1	PA, NP
DIPENTUM	2	PA, NP
ENTYVIO 108 MG/0.68ML SOLN A-INJ	2	PA, QL (2 EA PER 28 DAYS), SP, NP
ENTYVIO 300 MG RECON SOLN	2	PA, SP, NP
INFLECTRA	2	PA, SP, NP
INFLIXIMAB	2	PA, SP, P
LIALDA	1	P
<i>mesalamine 1000 mg suppos</i>	1	P
<i>mesalamine 4 gm enema, 400 mg cap dr</i>	1	PA, NP
<i>mesalamine 800 mg tab dr</i>	1	PA, EDS, NP
<i>mesalamine er</i>	1	PA, NP
<i>mesalamine-cleanser</i>	1	PA, NP
OMVOH 100 MG/ML SOLN A-INJ, 100 MG/ML SOLN PRSYR	2	PA, QL (2 ML PER 28 DAYS), SP, NP
OMVOH 300 MG/15ML SOLUTION	2	PA, QL (15 ML PER 28 DAYS), SP, NP
PENTASA 250 MG CAP ER	2	P
PENTASA 500 MG CAP ER	1	P
REMICADE	2	PA, SP, NP
RENFLEXIS	2	PA, SP, NP
ROWASA	1	P
SFROWASA	1	P
SKYRIZI 180 MG/1.2ML SOLN CART	2	PA, QL (1.2 ML PER 28 DAYS), SP, NP
SKYRIZI 360 MG/2.4ML SOLN CART	2	PA, QL (2.4 ML PER 28 DAYS), SP, NP
SKYRIZI 600 MG/10ML SOLUTION	2	PA, QL (10ML PER 28 DAYS; 30MLPER180 DAYS), SP, NP
STELARA 130 MG/26ML SOLUTION	2	PA, SP, NP
<i>sulfasalazine 500 mg tab, 500 mg tab dr</i>	1	EDS, P
VELSIPITY	2	PA, QL (1 EA PER 1 DAY), SP, NP
ZYMFENTRA (1 PEN)	2	PA, QL (2 EA PER 28 DAYS), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
ZYMFENTRA (2 PEN)	2	PA, QL (1 EA PER 28 DAYS), SP, NP
ZYMFENTRA (2 SYRINGE)	2	PA, QL (1 EA PER 28 DAYS), SP, NP
<b>INTESTINAL ACIDIFIERS</b>		
<i>enulose</i>	1	EDS
<i>generlac</i>	1	EDS
<i>lactulose encephalopathy</i>	1	EDS
<b>IRRITABLE BOWEL SYNDROME (IBS) AGENTS</b>		
<i>alosetron hcl</i>	1	PA, NP
IBSRELA	2	PA, NP
LINZESS	2	P
LOTRONEX	2	PA, NP
VIBERZI	2	PA, NP
<b>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</b>		
MOVANTIK	2	PA, NP
RELISTOR	2	PA, NP
SYMPROIC	2	PA, NP
<b>PHOSPHATE BINDER AGENTS</b>		
AURYXIA	2	PA, NP
<i>calcium acetate (phos binder)</i>	1	EDS, P
<i>calcium acetate 667 mg tab</i>	1	EDS, P
FOSRENOL	2	PA, NP
<i>lanthanum carbonate</i>	1	PA, NP
RENVELA 0.8 GM PACKET, 800 MG TAB	1	P
RENVELA 2.4 GM PACKET	2	PA, NP
<i>sevelamer carbonate 0.8 gm packet, 2.4 gm packet</i>	1	PA, EDS, NP
<i>sevelamer carbonate 800 mg tab</i>	1	EDS, P
<i>sevelamer hcl</i>	1	PA, EDS, NP
VELPHORO	2	PA, NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>GENITOURINARY AGENTS - MISCELLANEOUS</b>		
<b>ALKALINIZERS</b>		
<i>cytra-2</i>	1	OTC
<i>potassium citrate</i>	1	OTC
<i>potassium citrate / sodium citrate (cytra-3)</i>	1	
<i>potassium citrate er</i>	1	EDS
<i>sod citrate-citric acid</i>	1	OTC
<b>CYSTINOSIS AGENTS</b>		
CYSTAGON	2	LA
<b>GENITOURINARY IRRIGANTS</b>		
<i>acetic acid 0.25 % solution</i>	1	
<i>aminoacetic acid</i>	1	
<i>argyle sterile saline</i>	1	
<i>curity sterile saline</i>	1	
<i>glycine 1.5 % solution</i>	1	
<i>glycine urologic</i>	1	
NEOMYCIN-POLYMYXIN B GU	2	
<i>sodium chloride 0.9 % solution</i>	1	
<b>PROSTATIC HYPERTROPHY AGENTS</b>		
<i>alfuzosin hcl er</i>	1	EDS, P
AVODART	2	PA, NP
CARDURA XL	2	PA, NP
<i>dutasteride 0.5 mg cap</i>	1	EDS, P
<i>dutasteride-tamsulosin hcl</i>	1	PA, EDS, NP
ENTADFI	2	PA, NP
<i>finasteride 5 mg tab</i>	1	EDS, P
FLOMAX	2	PA, NP
JALYN	2	PA, NP
PROSCAR	2	PA, NP
RAPAFLO	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>silodosin</i>	1	PA, EDS, NP
<i>tamsulosin hcl</i>	1	EDS, P
<b>URINARY ANALGESICS</b>		
<i>phenazopyridine (azo)</i>	1	OTC
<b>URINARY STONE AGENTS</b>		
<i>tiopronin 100 mg tab, 100 mg tab dr, 300 mg tab dr</i>	1	PA, SP
<i>venxxiva</i>	1	PA, SP
<b>GOUT AGENTS</b>		
<b>GOUT AGENT COMBINATIONS</b>		
<i>colchicine-probenecid</i>	1	EDS
<b>GOUT AGENTS</b>		
<i>allopurinol 100 mg tab, 300 mg tab</i>	1	EDS
<i>allopurinol sodium</i>	1	
<i>colchicine 0.6 mg tab</i>	1	EDS
<i>febuxostat</i>	1	EDS
<b>URICOSURICS</b>		
<i>probenecid</i>	1	EDS
<b>HEMATOLOGICAL AGENTS - MISC.</b>		
<b>ANTIHEMOPHILIC PRODUCTS</b>		
ADVATE	2	SP, P
ADYNOVATE	2	SP, P
AFSTYLA	2	SP, P
ALPHANATE	2	SP, P
ALPHANINE SD	2	SP, P
ALPROLIX	2	SP, P
ALTUVIIIIO	2	SP
BENEFIX	2	SP, P
COAGADEX	2	SP, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
CORIFACT	2	SP, P
ELOCTATE	2	SP, P
ESPEROCT	2	SP, P
FEIBA	2	SP, P
HEMLIBRA	2	PA, SP
HEMOFIL M	2	SP, P
HUMATE-P	2	SP, P
IDELVION	2	SP, P
IXINITY	2	SP, P
JIVI	2	SP, P
KOATE	2	SP, P
KOATE-DVI	2	SP, P
KOGENATE FS	2	SP, P
KOVALTRY	2	SP, P
MONONINE	2	SP, P
NOVOEIGHT	2	SP, P
NOVOSEVEN RT	2	SP, P
NUWIQ	2	SP, P
OBIZUR	2	SP, P
PROFILNINE	2	SP, P
REBINYN	2	SP, P
RECOMBINATE	2	SP, P
RIXUBIS	2	SP, P
SEVENFACT	2	SP, P
TRETTEN	2	SP, P
VONVENDI	2	SP, P
WILATE	2	SP, P
XYNTHA	2	SP, P
XYNTHA SOLOFUSE	2	SP, P
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>		
FIRAZYR	2	PA, SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>icatibant acetate</i>	1	PA, QL (9 UNITS PER DAY(S)), SP, P
<b>COMPLEMENT INHIBITORS</b>		
BERINERT	2	PA, SP, P
CINRYZE	2	PA, QL (16 EA PER 28 DAYS), SP, P
HAEGARDA	2	PA, LA, QL (16 EA PER 28 DAYS), NP
RUCONEST	2	PA, LA, NP
TAVNEOS	2	PA, LA, QL (6 EA PER DAY), NP
<b>HEMATORHEOLOGIC AGENTS</b>		
<i>pentoxifylline er</i>	1	EDS
<b>PLASMA KALLIKREIN INHIBITORS</b>		
KALBITOR	2	PA, LA, NP
ORLADEYO	2	PA, LA, QL (28 EA PER 28 DAYS), NP
TAKHZYRO 150 MG/ML SOLN PRSYR	2	PA, LA, QL (2 ML PER 28 DAYS), NP
TAKHZYRO 300 MG/2ML SOLN PRSYR, 300 MG/2ML SOLUTION	2	PA, LA, QL (4 ML PER 28 DAYS), NP
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>anagrelide hcl</i>	1	EDS
<i>aspirin-dipyridamole er</i>	1	PA, EDS, NP
BRILINTA	2	P
CABLIVI	2	PA, SP
<i>cilostazol</i>	1	EDS
<i>clopidogrel bisulfate 300 mg tab</i>	1	P
<i>clopidogrel bisulfate 75 mg tab</i>	1	EDS, P
<i>dipyridamole 25 mg tab, 50 mg tab, 75 mg tab</i>	1	EDS, P
EFFIENT	2	PA, NP
PLAVIX	2	PA, NP
<i>prasugrel hcl</i>	1	EDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>THROMBOLYTIC ENZYMES</b>		
CATHFLO ACTIVASE	2	
<b>HEMATOPOIETIC AGENTS</b>		
<b>AGENTS FOR GAUCHER DISEASE</b>		
CERDELGA	2	SP
<i>miglustat</i>	1	SP
<i>yargesa</i>	1	SP
<b>AGENTS FOR SICKLE CELL DISEASE</b>		
ADAKVEO	2	PA, SP, P
DROXIA	2	P
ENDARI	1	PA, QL (6 EA PER 1 DAY), SP, P
<i>l-glutamine -glutamine 5 gm packet</i>	1	PA, QL (6 EA PER 1 DAY), SP, NP
OXBRYTA 300 MG TAB SOL	2	PA, QL (5 EA PER DAY), SP, P
OXBRYTA 300 MG TAB, 500 MG TAB	2	PA, QL (3 EA PER DAY), SP, P
SIKLOS	2	PA, NP
<b>COBALAMINS</b>		
<i>b-12 (methylcobalamin)</i>	1	OTC, EDS
<i>vitamin b12</i>	1	OTC, EDS
VITAMIN B12	2	OTC
<b>FOLIC ACID/FOLATES</b>		
FOLIC ACID 1 MG	1	OTC, EDS
<i>folic acid 400 mcg/800 mcg</i>	\$0	OTC, EDS
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
ARANESP (ALBUMIN FREE)	2	PA, SP, P
DOPTELET	2	QL (2 EA PER DAY), SP
EPOGEN	2	PA, SP, P
GRANIX 300 MCG/ML SOLUTION, 480 MCG/1.6ML SOLUTION	2	SP
JESDUVROQ	2	PA, SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
LEUKINE	2	SP
NEULASTA	2	SP
NEULASTA ONPRO	2	SP
NIVESTYM 300 MCG/0.5ML SOLN PRSYR, 480 MCG/0.8ML SOLN PRSYR	2	SP
PROCRIT 2000 UNIT/ML SOLUTION, 3000 UNIT/ML SOLUTION, 4000 UNIT/ML SOLUTION, 10000 UNIT/ML SOLUTION, 20000 UNIT/ML SOLUTION	2	PA, SP, P
PROCRIT 40000 UNIT/ML SOLUTION	2	PA, SP, NP
PROMACTA	2	PA, SP
REBLOZYL	2	PA, LA, NP
RETACRIT	2	PA, SP, P
UDENYCA	2	SP
ZARXIO	2	SP
ZIEXTENZO	2	SP

## **HEMATOPOIETIC MIXTURES**

<i>ferraplus 90</i>	2	
FERREX	2	OTC
FERREX 150 FORTE	2	OTC
<i>ferrex 150 forte plus</i>	2	OTC
<i>ferrex 28</i>	2	OTC
<i>ferrous fumarate / folic acid</i>	2	
<i>ferrous fumarate / vitamin b12 / vitamin c</i>	1	
<i>ferrous fumarate / vitamin c / vitamin b12 / folic acid</i>	1	OTC, EDS
FERROUS FUMARATE POLYSACCHARIDE COMPLEX	2	
<i>ferrous fumarate polysaccharide complex</i>	1	
<i>folic acid / vitamin b6 / vitamin b12 / omega-3</i>	2	
<i>folic acid / vitamin d</i>	2	
FOLIVANE-F	2	
FOLIVANE-PLUS	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
HEMATOGEN FA	2	
<i>hemetab</i>	2	
INTEGRA F	2	
INTEGRA PLUS	2	
<i>iron / folic acid / vitamin c / vitamin b6 / vitamin b12 / zinc</i>	1	
<i>iron / vitamin c / vitamin b12 / folic acid</i>	1	OTC, EDS
<i>iron combinations</i>	1	EDS
IRON FOLATE PLUS	2	
<i>iron polysaccharide complex</i>	2	OTC
<i>k-tan plus</i>	1	
<i>multigen folic</i>	2	
<i>multigen plus</i>	2	
MULTIGEN TABLET	2	
<i>multivitamin</i>	1	OTC
<i>purevit dualfe plus</i>	1	
<i>se-tan plus</i>	1	
<i>tandem plus</i>	1	
<i>taron forte</i>	2	
VIRT-FEFA PLUS	2	
VITRON-C	2	OTC, EDS
<b>IRON</b>		
<i>ferrous gluconate</i>	1	OTC, EDS
FERROUS GLUCONATE	2	OTC, EDS
<i>ferrous sulfate</i>	1	OTC, EDS
FERROUS SULFATE	1	OTC
<i>polysaccharide iron complex</i>	1	OTC, EDS
<b>STEM CELL MOBILIZERS</b>		
<i>plerixafor</i>	1	SP

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>HEMOSTATICS</b>		
<b>HEMOSTATICS - SYSTEMIC</b>		
<i>tranexamic acid 650 mg tab</i>	1	EDS
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
<b>ANTI-HISTAMINE HYPNOTICS</b>		
<i>acetaminophen / diphenhydramine</i>	1	OTC
DIPHENHYDRAMINE (SLEEP)	2	OTC
<i>doxylamine (sleep)</i>	1	OTC
DOXYLAMINE (SLEEP)	2	OTC
<b>BARBITURATE HYPNOTICS</b>		
<i>phenobarbital 15 mg tab, 16.2 mg tab, 20 mg/5ml elixir, 30 mg tab, 32.4 mg tab, 60 mg tab, 64.8 mg tab, 97.2 mg tab, 100 mg tab</i>	1	
<b>NON-BARBITURATE HYPNOTICS</b>		
AMBIEN	2	PA, QL (1 EA PER DAY), NP
AMBIEN CR	2	PA, QL (1 EA PER DAY), NP
EDLUAR	2	PA, QL (1 EA PER DAY), NP
<i>eszopiclone</i>	1	QL (1 EA PER DAY), P
LUNESTA	2	PA, QL (1 EA PER DAY), NP
<i>temazepam</i>	1	
<i>triazolam</i>	1	
<i>zaleplon</i>	1	QL (2 EA PER DAY), P
ZOLPIDEM TARTRATE 1.75 MG SL TAB, 3.5 MG SL TAB	2	PA, QL (1 EA PER DAY), NP
<i>zolpidem tartrate 5 mg tab, 10 mg tab</i>	1	QL (1 EA PER DAY), P
<i>zolpidem tartrate er</i>	1	PA, QL (1 EA PER DAY), NP
<i>zolpidem tartrate zolpidem tartrate 1.75 mg sl tab, zolpidem tartrate 7.5 mg cap, zolpidem tartrate 3.5 mg sl tab</i>	1	PA, QL (1 EA PER DAY), NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>OREXIN RECEPTOR ANTAGONISTS</b>		
BELSOMRA	2	PA, QL (1 EA PER DAY), NP
DAYVIGO	2	PA, QL (1 EA PER DAY), NP
QUVIVIQ	2	PA, QL (1 EA PER DAY), NP
<b>SELECTIVE MELATONIN RECEPTOR AGONISTS</b>		
HETLIOZ	2	PA, LA, QL (1 EA PER DAY), NP
HETLIOZ LQ	2	PA, LA, QL (5 ML PER DAY), NP
<i>ramelteon</i>	1	PA, QL (1 EA PER DAY), NP
ROZEREM	1	QL (1 EA PER DAY), P
<i>tasimelteon</i>	1	PA, QL (1 EA PER DAY), SP, NP
<b>LAXATIVES</b>		
<b>BULK LAXATIVES</b>		
<i>calcium polycarbophil (fiber laxative)</i>	1	OTC, EDS
<i>cellulose (unifiber)</i>	2	OTC
<i>corn dextrin powder</i>	1	OTC, EDS
METAMUCIL	2	OTC
<i>methylcellulose (citrucel)</i>	2	OTC, EDS
<i>psyllium (metamucil)</i>	1	OTC, EDS
<i>wheat dextrin powder</i>	1	OTC, EDS
<b>LAXATIVE COMBINATIONS</b>		
GAVILYTE-C	\$0	QL (8000 ML PER 365 DAYS)
<i>gavilyte-g</i>	\$0	
<i>gavilyte-n with flavor pack</i>	\$0	QL (8000 ML PER 365 DAYS)
<i>peg 3350-kcl-na bicarb-nacl</i>	\$0	QL (8000 ML PER 365 DAYS)
<i>peg-3350/electrolytes</i>	\$0	
PEG-PREP	\$0	
<i>senna / docusate sodium (peri-colace)</i>	1	OTC, EDS
<i>trilyte</i>	\$0	QL (8000 ML PER 365 DAYS)

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>LAXATIVES - MISCELLANEOUS</b>		
<i>constulose</i>	1	EDS
<i>glycerin suppository</i>	1	OTC
<i>lactulose 10 gm/15ml, 20 gm/30ml</i>	1	EDS
<i>polyethylene glycol</i>	\$0	OTC, EDS
<i>polyethylene glycol packets</i>	1	OTC, EDS
<i>sorbitol solution</i>	2	OTC
<b>LUBRICANT LAXATIVES</b>		
<i>cvs mineral oil enema</i>	1	
<i>enema mineral oil</i>	1	
<i>ft enema mineral oil</i>	1	
<i>hm enema mineral oil</i>	1	
<i>mineral oil</i>	1	OTC, EDS
<i>sm mineral oil enema</i>	1	
<b>SALINE LAXATIVES</b>		
<i>enema</i>	1	OTC
ENEMA	2	OTC
<i>magnesium citrate</i>	\$0	OTC
<i>milk of magnesia</i>	\$0	OTC
<b>STIMULANT LAXATIVES</b>		
<i>bisacodyl</i>	\$0	OTC, EDS
<i>bisacodyl 10 mg suppository</i>	1	OTC, EDS
<i>sennosides</i>	1	OTC, EDS
<b>SURFACTANT LAXATIVES</b>		
<i>docusate calcium (surfak)</i>	1	OTC, EDS
<i>docusate sodium (colace)</i>	1	OTC, EDS
<b>LOCAL ANESTHETICS-PARENTERAL</b>		
<b>LOCAL ANESTHETIC COMBINATIONS</b>		
<i>lidocaine-epinephrine (pf) -1.5 %-1:200000 solution</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>LOCAL ANESTHETICS - AMIDES</b>		
<i>lidocaine hcl (pf) 1 %, 1.5 %, 2 %, 4 %</i>	1	
<i>lidocaine hcl 0.5 %, 1 %, 2 %</i>	1	
<b>LOCAL ANESTHETICS - ESTERS</b>		
<i>chloroprocaine hcl (pf)</i>	1	
PROCAINE HCL CRYSTALS	2	
<b>MACROLIDES</b>		
<b>AZITHROMYCIN</b>		
<i>azithromycin 500 mg recon soln</i>	1	
<i>azithromycin azithromycin 100 mg/5ml recon susp, azithromycin 200 mg/5ml recon susp, azithromycin 250 mg tab, azithromycin 600 mg tab, azithromycin 1 gm packet, azithromycin 500 mg tab</i>	1	P
ZITHROMAX 1 GM PACKET, 100 MG/5ML RECON SUSP, 200 MG/5ML RECON SUSP, 250 MG TAB, 500 MG TAB	2	PA, NP
ZITHROMAX TRI-PAK	2	PA, NP
ZITHROMAX Z-PAK	2	PA, NP
<b>CLARITHROMYCIN</b>		
CLARITHROMYCIN 125 MG/5ML RECON SUSP, 250 MG/5ML RECON SUSP	2	PA, NP
<i>clarithromycin 250 mg tab, 500 mg tab</i>	1	P
<i>clarithromycin er</i>	1	PA, NP
<b>ERYTHROMYCINS</b>		
E.E.S. GRANULES	2	PA, NP
<i>ery-tab</i>	1	PA, NP
ERYPED 200	2	PA, NP
ERYPED 400	2	PA, NP
ERYTHROCIN STEARATE	2	PA, NP
<i>erythromycin 250 mg tab dr, 333 mg tab dr, 500 mg tab dr</i>	1	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
ERYTHROMYCIN BASE 250 MG CP DR PART	1	P
<i>erythromycin base 250 mg tab, 250 mg tab dr, 333 mg tab dr, 500 mg tab, 500 mg tab dr</i>	1	PA, NP
<i>erythromycin ethylsuccinate 200 mg/5ml, 400 mg/5ml</i>	1	PA, NP
<b>FIDAXOMICIN</b>		
DIFICID 200 MG TAB	2	QL (2 EA PER DAY)
DIFICID 40 MG/ML RECON SUSP	2	QL (10 ML PER DAY)
<b>MEDICAL DEVICES AND SUPPLIES</b>		
<b>AUDITORY SUPPLIES</b>		
<i>hearing aid batteries</i>	2	OTC
<b>BANDAGES-DRESSINGS-TAPE</b>		
<i>adhesive tape</i>	2	
<i>bandages</i>	2	
CVS EYE	2	
<i>gauze pads and dressings</i>	2	
GELOCAST 3"X10YD	2	
J & J EYE PADS OVAL SMALL	2	
J & J OVAL EYE PADS	2	
J & J STERILE EYE PADS	2	
JOHNSONS STERILE EYE PADS	2	
PROFORE	2	
PROFORE LITE	2	
PROFORE WCL 5-1/2"X8"	2	
RA HOT/COLD GEL SLEEVE	2	
SM DELUXE REUSABLE COMPRESS	2	
SUREPRESS HI COMPRESS BANDAGE	2	
<b>BLOOD PRESSURE DEVICES</b>		
BLOOD PRESSURE MONITORING DEVICE	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>CONTRACEPTIVES</b>		
CAYA	\$0	
<i>female condoms</i>	\$0	OTC
FEMCAP	\$0	
<i>male condoms</i>	\$0	OTC
WIDE-SEAL DIAPHRAGM	\$0	
<b>DIABETIC SUPPLIES</b>		
<i>blood glucose calibration liquid</i>	\$0	OTC, CDS
CONTOUR BLOOD GLUCOSE METER	\$0	OTC, CDS, P
CONTOUR MONITOR DEVICE	\$0	OTC, CDS, P
DEXCOM G4 PLAT PED RCV/SHARE	\$0	QL (1 UNIT PER 365 DAYS), CDS
DEXCOM G4 PLAT PED RECEIVER	\$0	QL (1 UNIT PER 365 DAYS), CDS
DEXCOM G4 PLATINUM RCV/SHARE	\$0	QL (1 UNIT PER 365 DAYS), CDS
DEXCOM G4 PLATINUM RECEIVER	\$0	QL (1 UNIT PER 365 DAYS), CDS
DEXCOM G4 PLATINUM TRANSMITTER	\$0	QL (1 EA PER 90 DAYS), EDS, CDS
DEXCOM G5 MOB/G4 PLAT SENSOR	\$0	PA, QL (3 EA PER FILL), CDS, NP
DEXCOM G5 MOBILE RECEIVER	\$0	PA, QL (1 UNIT PER 365 DAYS), CDS, NP
DEXCOM G5 MOBILE TRANSMITTER	\$0	PA, QL (1 EA PER 90 DAYS), EDS, CDS, NP
DEXCOM G5 RECEIVER KIT	\$0	PA, QL (1 UNIT PER 365 DAYS), CDS, NP
DEXCOM G6 RECEIVER	\$0	QL (1 UNIT PER 365 DAYS), CDS, P
DEXCOM G6 SENSOR	\$0	QL (3 EA PER FILL), CDS, P
DEXCOM G6 TRANSMITTER	\$0	QL (1 EA PER 90 DAYS), EDS, CDS, NP
DEXCOM G7 RECEIVER	\$0	QL (1 UNIT PER 365 DAYS), CDS, P
DEXCOM G7 SENSOR	\$0	QL (3 EA PER FILL), CDS, P
FREESTYLE LIBRE 14 DAY READER	\$0	QL (1 UNIT PER 365 DAYS), CDS, P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
FREESTYLE LIBRE 14 DAY SENSOR	\$0	QL (2 EA PER FILL), CDS, P
FREESTYLE LIBRE 2 PLUS SENSOR	\$0	QL (2 EA PER 1 FILL), CDS
FREESTYLE LIBRE 2 READER	\$0	QL (1 UNIT PER 365 DAYS), CDS, P
FREESTYLE LIBRE 2 SENSOR	\$0	QL (2 EA PER FILL), CDS, P
FREESTYLE LIBRE 3 PLUS SENSOR	\$0	QL (2 EA PER FILL), CDS, P
FREESTYLE LIBRE 3 READER	\$0	QL (1 UNIT PER 365 DAYS), CDS, P
FREESTYLE LIBRE 3 SENSOR	\$0	QL (2 EA PER FILL), CDS, P
FREESTYLE LIBRE READER	\$0	QL (1 UNIT PER 365 DAYS), CDS
<i>lancet device</i>	\$0	OTC, CDS
<i>lancets</i>	\$0	OTC, CDS
NON-PREFERRED BLOOD GLUCOSE METER	\$0	PA, OTC, CDS, NP
OMNIPOD 5 DEXG7G6 PODS GEN 5	\$0	QL (0.5 EA PER DAY), CDS
OMNIPOD 5 G6 INTRO (GEN 5)	\$0	QL (1 EA PER 365 DAYS), CDS
OMNIPOD 5 G6 PODS (GEN 5)	\$0	QL (0.5 EA PER DAY), CDS
OMNIPOD 5 G7 INTRO (GEN 5)	\$0	QL (1 EA PER 365 DAYS), CDS
OMNIPOD 5 G7 PODS (GEN 5)	\$0	QL (0.5 EA PER DAY), CDS
OMNIPOD 5 LIBRE2 PLUS G6	\$0	QL (1 EA PER 365 DAYS), CDS
OMNIPOD 5 LIBRE2 PLUS G6 PODS	\$0	QL (0.5 EA PER DAY), CDS
OMNIPOD CLASSIC PDM (GEN 3)	\$0	QL (1 EA PER 365 DAYS), CDS
OMNIPOD CLASSIC PODS (GEN 3)	\$0	QL (0.5 EA PER DAY), CDS
OMNIPOD DASH INTRO (GEN 4)	\$0	QL (1 EA PER 365 DAYS), CDS
OMNIPOD DASH PDM (GEN 4)	\$0	QL (1 EA PER 365 DAYS), CDS
OMNIPOD DASH PODS (GEN 4)	\$0	QL (0.5 EA PER DAY), CDS
<b>GI-GU OSTOMY &amp; IRRIGATION SUPPLIES</b>		
<i>incontinence supplies</i>	2	OTC
<i>ostomy supplies</i>	2	OTC
<b>INFANT CARE PRODUCTS</b>		
<i>diapers</i>	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>MISC. DEVICES</b>		
<i>alcohol swabs</i>	\$0	OTC, CDS
<i>miscellaneous medical devices</i>	2	OTC
<b>PARENTERAL THERAPY SUPPLIES</b>		
BD INSULIN SYRINGE U-500	\$0	CDS
<i>insulin injection device</i>	\$0	OTC, CDS
MULTI-DRAW NEEDLE -21G MISC, - 22G MISC	2	CDS
<i>needles and syringes</i>	\$0	OTC, CDS
NEEDLES AND SYRINGES	2	OTC, CDS
<i>sharps container</i>	2	OTC, CDS
<b>RESPIRATORY THERAPY SUPPLIES</b>		
PEAK FLOW METER	2	OTC, CDS
<i>respirtatory therapy supplies</i>	2	OTC, CDS
<b>MIGRAINE PRODUCTS</b>		
<b>CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG</b>		
AIMOVIG IMOVIG 140 MG/ML SOLN - INJ	2	PA, QL (1 EA PER 28 DAYS), P
AIMOVIG IMOVIG 70 MG/ML SOLN - INJ	2	PA, QL (1 ML PER 28 DAYS), P
AJOVY	2	PA, QL (1.5 ML PER 28 DAYS), P
EMGALITY (300 MG DOSE)	2	PA, QL (3 ML PER 28 DAYS)
EMGALITY 120 MG/ML SOLN PRSYR	2	PA, QL (1 ML PER 28 DAYS), P
EMGALITY EMGLITY 120 MG/ML SOLN -INJ	2	PA, QL (1 ML PER 28 DAYS), P
NURTEC	2	PA, QL (16 EA PER 28 DAYS), NP
QULIPTA	2	PA, QL (1 EA PER DAY), NP
UBRELVY	2	PA, QL (20 EA PER 30 DAYS), P
VYEPTI	2	PA, LA, NP
ZAVZPRET	2	PA, QL (6 EA PER 28 DAYS), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>MIGRAINE COMBINATIONS</b>		
MIGERGOT	2	
<i>sumatriptan-naproxen sodium</i>	1	PA, QL (18 EA PER 30 DAYS), NP
TREXIMET	2	PA, QL (18 EA PER 30 DAYS), NP
<b>MIGRAINE PRODUCTS</b>		
TRUDHESA	2	PA, QL (8 EA PER 28 DAYS), NP
<b>MIGRAINE PRODUCTS - NSAIDS</b>		
ELYXYB	2	PA, QL (28.8 ML PER 30 DAYS), NP
<b>SEROTONIN AGONISTS</b>		
<i>almotriptan malate</i>	1	PA, QL (18 EA PER 30 DAYS), NP
AMERGE	2	PA, QL (18 EA PER 30 DAYS), NP
<i>eletriptan hydrobromide</i>	1	PA, QL (18 EA PER 30 DAYS), NP
FROVA	2	PA, QL (18 EA PER 30 DAYS), NP
<i>frovatriptan succinate</i>	1	PA, QL (18 EA PER 30 DAYS), NP
IMITREX 25 MG TAB, 50 MG TAB, 100 MG TAB	2	PA, QL (18 EA PER 30 DAYS), NP
IMITREX 6 MG/0.5ML SOLUTION	1	QL (8 EA PER 30 DAYS), P
IMITREX STATDOSE REFILL	1	QL (8 ML PER 30 DAYS), P
IMITREX STATDOSE SYSTEM	1	QL (8 EA PER 30 DAYS), P
MAXALT	2	PA, QL (36 EA PER 30 DAYS), NP
MAXALT-MLT	2	PA, QL (36 EA PER 30 DAYS), NP
<i>naratriptan hcl</i>	1	PA, QL (18 EA PER 30 DAYS), NP
RELPAX	1	QL (18 EA PER 30 DAYS), P
REYVOW 100 MG TAB	2	PA, QL (16 EA PER 30 DAYS), NP



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
REYVOW 50 MG TAB	2	PA, QL (8 EA PER 30 DAYS), NP
<i>rizatriptan benzoate</i>	1	QL (36 EA PER 30 DAYS), P
<i>sumatriptan 20 mg/act solution</i>	1	PA, QL (18 EA PER 30 DAYS), NP
<i>sumatriptan 5 mg/act solution</i>	1	PA, QL (36 EA PER 30 DAYS), NP
<i>sumatriptan succinate 25 mg tab, 50 mg tab, 100 mg tab</i>	1	QL (18 EA PER 30 DAYS), P
<i>sumatriptan succinate refill sumatriptan succinate refill, sumatriptan succinate refill</i>	1	PA, QL (8 ML PER 30 DAYS), NP
<i>sumatriptan succinate sumatriptan succinate 4 mg/0.5ml soln a-inj, sumatriptan succinate 6 mg/0.5ml soln a-inj, sumatriptan succinate 6 mg/0.5ml solution, sumatriptan succinate 6 mg/0.5ml soln prsy</i>	1	PA, QL (8 ML PER 30 DAYS), NP
TOSYMRA	2	PA, QL (6 UNITS PER FILL; 2 FILLS PER 30 DAYS), NP
ZEMBRACE SYMTOUCH	2	PA, QL (2 UNITS PER FILL; 2 FILLS PER 30 DAYS), NP
<i>zolmitriptan 2.5 mg tab, 5 mg tab</i>	1	QL (18 EA PER 30 DAYS), P
<i>zolmitriptan zolmitriptan 2.5 mg tab disp, zolmitriptan 5 mg solution, zolmitriptan 5 mg tab disp, zolmitriptan 2.5 mg solution</i>	1	PA, QL (18 EA PER 30 DAYS), NP
ZOMIG 2.5 MG SOLUTION	1	PA, QL (18 EA PER 30 DAYS), NP
ZOMIG 2.5 MG TAB, 5 MG TAB	2	PA, QL (18 EA PER 30 DAYS)
<i>zomig zomig 5 mg solution, zomig 2.5 mg tab, zomig 5 mg tab</i>	1	QL (18 EA PER 30 DAYS), P

## **MINERALS ELECTROLYTES**

### **CALCIUM**

<i>calcium / magnesium / zinc</i>	1	OTC, EDS
<i>calcium / phosphorus / vitamin d</i>	2	OTC
<i>calcium / vitamin c / vitamin d</i>	2	OTC
<i>calcium / vitamin d / vitamin k</i>	1	OTC, EDS
CALCIUM / VITAMIN D / VITAMIN K	2	OTC
CALCIUM CARBONATE	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>calcium carbonate</i>	1	OTC, EDS
<i>calcium carbonate / folic acid / vitamin d</i>	2	
<i>calcium carbonate / vitamin d</i>	1	OTC, EDS
CALCIUM CARBONATE / VITAMIN D	2	OTC
<i>calcium carbonate / vitamin d / minerals</i>	1	OTC, EDS
CALCIUM CITRATE	2	OTC
<i>calcium citrate</i>	1	OTC, EDS
CALCIUM CITRATE / VITAMIN D	2	OTC
<i>calcium citrate / vitamin d</i>	1	OTC, EDS
<b>ELECTROLYTE MIXTURES</b>		
<i>dextrose in lactated ringers</i>	1	
<i>dextrose-sodium chloride -2.5-0.45 %, -5-0.225 %, -5-0.3 %, -5-0.33 %</i>	1	
ELECTROLYTE SOLUTION	2	OTC
<i>electrolyte solution</i>	1	OTC
ISOLYTE-S	2	
KCL (0.149%) IN NACL	1	
<i>kcl in dextrose-nacl in -10-5-0.45 meq/l-%-%, in -20-5-0.2 meq/l-%-%, in -20-5-0.45 meq/l-%-%, in -20-5-0.9 meq/l-%-%, in -30-5-0.45 meq/l-%-%, in -40-5-0.45 meq/l-%-%, in -40-5-0.9 meq/l-%-%</i>	1	
KCL-LACTATED RINGERS-D5W	2	
LACTATED RINGERS LACTATED RINGERS, LACTATED RINGERS	1	
NORMOSOL-M IN D5W	2	
POTASSIUM CHLORIDE IN DEXTROSE 10-5 MEQ/L-% SOLUTION	2	
<i>potassium chloride in dextrose 20-5 meq/l-% solution</i>	1	
<i>potassium chloride in nacl 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%</i>	1	
<i>ringers</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>FLUORIDE</b>		
<i>sodium fluoride</i>	\$0	OTC, EDS
<b>MAGNESIUM</b>		
MAGNESIUM	2	OTC
<i>magnesium</i>	1	OTC, EDS
<i>magnesium chloride</i>	1	OTC, EDS
MAGNESIUM CHLORIDE	2	OTC
<i>magnesium gluconate</i>	2	OTC, EDS
MAGNESIUM GLUCONATE	2	OTC
<i>magnesium sulfate 2 gm/50ml, 4 gm/100ml, 4 gm/50ml, 20 gm/500ml, 40 gm/1000ml</i>	1	
<b>PHOSPHATE</b>		
<i>phosphorus supplement</i>	2	OTC
<i>potassium / sodium phosphate</i>	1	EDS
<b>POTASSIUM</b>		
<i>klor-con</i>	1	EDS
<i>klor-con 10</i>	1	EDS
<i>klor-con m10</i>	1	EDS
<i>klor-con m15</i>	1	EDS
<i>klor-con m20</i>	1	EDS
<i>potassium chloride 10 % solution, 20 meq packet, 20 meq/15ml (10%) solution, 40 meq/15ml (20%) solution</i>	1	EDS
<i>potassium chloride 2 meq/ml, 10 meq/100ml, 10 meq/50ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml</i>	1	
<i>potassium chloride clys er</i>	1	EDS
<i>potassium chloride er er 8 cap er, er 8 tab er, er 10 cap er, er 10 tab er, er 20 tab er</i>	1	EDS
POTASSIUM GLUCONATE	2	OTC
<i>potassium gluconate</i>	1	OTC, EDS
<b>SODIUM</b>		
<i>aquastat</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>aquastat sfr</i>	1	
<i>bd posiflush</i>	1	
<i>bd posiflush safescrub</i>	1	
<i>monoject flush syringe</i>	1	
<i>monoject sodium chloride flush</i>	1	
<i>normal saline flush</i>	1	
<i>saline flush</i>	1	
<i>saline flush zr</i>	1	
<i>sodium chloride</i>	1	OTC, EDS
<i>sodium chloride flush</i>	1	
<i>swabflush saline flush</i>	1	
<b>TRACE MINERALS</b>		
CHROMIUM	2	OTC
<i>chromium</i>	1	OTC, EDS
<i>selenium</i>	1	OTC, EDS
<b>ZINC</b>		
<i>zinc</i>	1	OTC
<i>zinc gluconate</i>	1	OTC
<i>zinc sulfate</i>	1	OTC
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
<b>CHELATING AGENTS</b>		
<i>clovique</i>	1	SP
<i>penicillamine 250 mg tab</i>	1	PA, SP
<i>trientine hcl 250 mg cap</i>	1	SP
<b>IMMUNOMODULATORS</b>		
<i>lenalidomide</i>	1	PA, QL (1 EA PER DAY), SP
REVLIMID	2	PA, LA, QL (1 EA PER DAY)
REZUROCK	2	PA, QL (1 EA PER DAY), SP, NP
THALOMID	2	LA

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>IMMUNOSUPPRESSIVE AGENTS</b>		
ASTAGRAF XL	2	PA, SP, NP
<i>azasan</i>	1	PA, NP
<i>azathioprine 50 mg tab</i>	1	EDS, P
<i>azathioprine 75 mg tab, 100 mg tab</i>	1	P
CELLCEPT 200 MG/ML RECON SUSP	1	SP, P
CELLCEPT 250 MG CAP, 500 MG TAB	2	PA, SP, NP
<i>cyclosporine 25 mg cap, 100 mg cap</i>	1	P
<i>cyclosporine modified</i>	1	P
ENSPRYNG	2	PA, SP, NP
ENVARUSUS XR	2	PA, SP, NP
<i>everolimus 0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab</i>	1	PA, NP
<i>gengraf</i>	1	P
IMURAN	2	PA, NP
<i>mycophenolate mofetil 200 mg/ml recon susp</i>	1	PA, NP
<i>mycophenolate mofetil 250 mg cap, 500 mg tab</i>	1	P
<i>mycophenolate sodium</i>	1	PA, NP
<i>mycophenolic acid</i>	1	PA, NP
MYFORTIC	2	PA, SP, NP
NEORAL	2	PA, SP, NP
PROGRAF 0.5 MG CAP, 1 MG CAP, 5 MG CAP	2	PA, SP, NP
RAPAMUNE 1 MG/ML SOLUTION	1	SP, P
SANDIMMUNE 25 MG CAP, 100 MG CAP, 100 MG/ML SOLUTION	2	PA, SP, NP
<i>sirolimus 0.5 mg tab, 1 mg tab, 1 mg/ml solution, 2 mg tab</i>	1	P
<i>tacrolimus 0.5 mg cap, 1 mg cap, 5 mg cap</i>	1	P
UPLIZNA	2	PA, SP, NP
ZORTRESS	2	PA, SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>IRRIGATION SOLUTIONS</b>		
<i>ringers irrigation</i>	1	
<i>tis-u-sol</i>	1	
<b>MISC NATURAL PRODUCTS</b>		
<i>miscellaneous natural products</i>	2	OTC
MISCELLANEOUS NATURAL PRODUCTS	2	OTC
<b>PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS</b>		
VIJOICE 200 & 50 MG TAB THPK	2	PA, QL (2 EA PER DAY), SP
VIJOICE 50 MG PACKET	2	PA, QL (1 EA PER 1 DAY), SP
VIJOICE 50 MG TAB THPK, 125 MG TAB THPK	2	PA, QL (1 EA PER DAY), SP
<b>POTASSIUM REMOVING AGENTS</b>		
LOKELMA	2	
<i>sodium polystyrene sulfonate</i>	1	
<b>PROGERIA TREATMENT AGENTS</b>		
ZOKINVY	2	PA, LA, QL (4 EA PER DAY)
<b>SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS</b>		
BENLYSTA 200 MG/ML SOLN A-INJ, 200 MG/ML SOLN PRSYR	2	PA, QL (4 EA PER 28 DAYS), SP
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
<b>ANESTHETICS TOPICAL ORAL</b>		
<i>lidocaine viscous hcl</i>	1	
<b>ANTI-INFECTIVES - THROAT</b>		
<i>clotrimazole 10 mg troche</i>	1	
<i>nystatin 100000 unit/ml suspension</i>	1	P
<b>ANTISEPTICS - MOUTH/THROAT</b>		
<i>chlorhexidine gluconate 0.12 % solution</i>	1	EDS
<i>periogard</i>	1	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>DENTAL PRODUCTS</b>		
<i>cavarest</i>	1	EDS
<i>clinpro 5000</i>	1	EDS
<i>denta 5000 plus</i>	\$0	EDS
DENTA 5000 PLUS SENSITIVE	1	
<i>dentagel</i>	1	EDS
<i>fluoridex</i>	1	EDS
<i>fluoridex enhanced whitening</i>	1	EDS
FLUORIDEX SENSITIVITY RELIEF	1	
<i>fluorimax 5000</i>	1	EDS
FLUORIMAX 5000 SENSITIVE	1	
<i>fraiche 5000 dental</i>	1	EDS
<i>fraiche rinse</i>	1	OTC, EDS
<i>just right 5000</i>	1	EDS
<i>periomed</i>	1	OTC, EDS
<i>sf</i>	1	EDS
<i>sf 5000 plus</i>	\$0	EDS
SOD FLUORIDE-POTASSIUM NITRATE	1	EDS
<i>sodium fluoride 0.2 % solution, 1.1 % gel</i>	1	EDS
<i>sodium fluoride 1.1 % cream</i>	\$0	EDS
SODIUM FLUORIDE 5000 ENAMEL	1	EDS
<i>sodium fluoride 5000 plus</i>	\$0	EDS
<i>sodium fluoride 5000 ppm 1.1 % cream</i>	\$0	EDS
<i>sodium fluoride 5000 ppm 5000 1.1 % gel, 5000 1.1 % paste</i>	1	EDS
SODIUM FLUORIDE 5000 SENSITIVE	1	EDS
<b>THROAT PRODUCTS - MISC.</b>		
<i>cevimeline hcl</i>	1	EDS
<i>pilocarpine hcl 5 mg tab, 7.5 mg tab</i>	1	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>MULTIVITAMINS</b>		
<b>B-COMPLEX VITAMINS</b>		
<i>vitamin b complex</i>	1	OTC, EDS
<b>B-COMPLEX W/ C</b>		
VITAMIN B COMPLEX	2	OTC
<i>vitamin b complex / vitamin c / calcium</i>	1	OTC, EDS
<i>vitamin b complex / vitamin c / vitamin e / zinc</i>	1	OTC, EDS
<i>vitamin b complex combinations</i>	1	OTC, EDS
<b>B-COMPLEX W/ FOLIC ACID</b>		
B COMPLEX-C-BIOTIN-E-FA	\$0	OTC
<i>vitamin b complex (\$0)</i>	\$0	OTC, EDS
<i>vitamin b complex / vitamin c / biotin / minerals / folic acid</i>	2	
<i>vitamin b complex / vitamin c / zinc / folic acid</i>	2	
VITAMIN B COMPLEX COMBINATIONS	2	
<b>BIOFLAVONOID PRODUCTS</b>		
<i>bioflavonoids</i>	1	OTC, EDS
BIOFLAVONOIDS	2	OTC
<b>MULTIPLE VITAMINS W/ CALCIUM</b>		
<i>multivitamins / calcium</i>	1	OTC, EDS
<b>MULTIPLE VITAMINS W/ MINERALS</b>		
MULTIVITAMINS / MINERALS	2	OTC
<b>PED MULTI VITAMINS W/FL &amp; FE</b>		
<i>pediatric multiple vitamins / fluoride / iron</i>	1	OTC, EDS
<i>pediatric multivitamin combinations</i>	1	OTC, EDS
<b>PED MULTIPLE VITAMINS W/ MINERALS</b>		
PEDIATRIC MULTIPLE VITAMINS / MINERALS PEDIATRIC MULTIPLE VITAMINS MINERALS, PEDIATRIC MULTIPLE VITAMINS MINERALS	2	OTC, EDS



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PEDIATRIC MULTIVITAMIN COMBINATIONS	2	OTC, EDS
<b>PED MV W/ FLUORIDE</b>		
<i>multivitamin (\$0)</i>	\$0	OTC, EDS
<i>pediatric multiple vitamins / vitamin a / vitamin c / vitamin d / fluoride</i>	\$0	
<b>PED MV W/ IRON</b>		
<i>pediatric multiple vitamins / iron</i>	2	OTC, EDS
PEDIATRIC MULTIPLE VITAMINS / IRON	2	OTC, EDS
<b>PEDIATRIC MULTIPLE VITAMINS</b>		
PEDIATRIC MULTIPLE VITAMINS	2	OTC
<i>pediatric multiple vitamins</i>	1	OTC, EDS
<b>PEDIATRIC VITAMINS</b>		
<i>pediatric vitamins</i>	2	OTC
TRI-VI-SOL A/C/D	2	OTC
VITAMIN A-C-D INFANT	2	OTC
VITAMIN A/C/D/ INFANT/TODDLER	2	OTC
<b>PRENATAL VITAMINS</b>		
INATAL GT	2	
<i>prenatal vitamin</i>	\$0	OTC, EDS
PRENATAL VITAMIN	2	OTC, EDS
<b>VITAMINS W/ LIPOTROPICS</b>		
<i>vitamins / lipotropics</i>	1	OTC, EDS
<b>MUSCULOSKELETAL THERAPY AGENTS</b>		
<b>CENTRAL MUSCLE RELAXANTS</b>		
<i>baclofen 10 mg tab, 20 mg tab</i>	1	
<i>chlorzoxazone 250 mg tab, 500 mg tab</i>	1	
<i>cyclobenzaprine hcl 5 mg tab, 10 mg tab</i>	1	
<i>metaxalone 800 mg tab</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>methocarbamol 500 mg tab, 750 mg tab</i>	1	
<i>orphenadrine citrate er</i>	1	
<i>tizanidine hcl 2 mg cap, 2 mg tab, 4 mg cap, 4 mg tab, 6 mg cap</i>	1	
<b>DIRECT MUSCLE RELAXANTS</b>		
<i>dantrolene sodium 25 mg cap, 50 mg cap, 100 mg cap</i>	1	
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL</b>		
<b>NASAL AGENT COMBINATIONS</b>		
<i>azelastine-fluticasone</i>	1	PA, NP
DYMISTA	2	PA, NP
RYALTRIS	2	PA, NP
<b>NASAL AGENTS - MISC.</b>		
SODIUM CHLORIDE NASAL SPRAY	2	OTC
<b>NASAL ANTIALLERGY</b>		
<i>azelastine hcl 0.1 %, 0.15 %, 137 mcg/spray</i>	1	EDS, P
<i>cromolyn (nasalcrom)</i>	1	OTC, EDS
<b>NASAL ANTICHOLINERGICS</b>		
<i>ipratropium bromide 0.03 % solution</i>	1	EDS, P
<i>ipratropium bromide 0.06 % solution</i>	1	QL (30 UNITS PER 30 DAYS), P
<b>NASAL STEROIDS</b>		
<i>flunisolide 25 mcg/act (0.025%) solution</i>	1	PA, QL (2 ML PER DAY), EDS, NP
<i>fluticasone propionate 50 mcg/act suspension</i>	1	QL (1.07 GM PER DAY), EDS, P
<i>mometasone furoate 50 mcg/act suspension</i>	1	QL (0.57 GM PER DAY), P
NASONEX	2	PA, NP
OMNARIS	2	PA, QL (0.42 GM PER DAY), NP
QNASL	2	PA, QL (0.36 ML PER DAY), NP
QNASL CHILDRENS	2	PA, QL (0.23 GM PER DAY), NP
<i>triamcinolone acetonide (nasacort)</i>	1	QL (0.57 ML PER DAY), OTC, EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
XHANCE	2	PA, QL (1.07 ML PER DAY), NP
ZETONNA	2	PA, QL (0.21 GM PER DAY), NP

## **SYMPATHOMIMETIC DECONGESTANTS**

<i>oxymetazoline (afrin)</i>	1	OTC
<i>phenylephrine (neo-synephrine)</i>	1	OTC
<i>phenylephrine (sudafed pe)</i>	1	OTC
<i>pseudoephedrine (sudafed)</i>	1	OTC

## **NEUROMUSCULAR AGENTS**

### **ALS AGENTS**

<i>riluzole</i>	1	EDS
-----------------	---	-----

### **SPINAL MUSCULAR ATROPHY AGENTS (SMA)**

EVRYSDI	2	PA, LA, QL (6.67 ML PER DAY)
---------	---	------------------------------

## **NUTRIENTS**

### **CARBOHYDRATES**

DEXTROSE 250 MG/ML SOLUTION	2	
DEXTROSE DEXTROSE 50 % SOLUTION, DEXTROSE 5 % SOLUTION, DEXTROSE 5 % SOLUTION	1	

### **LIPIDS**

INTRALIPID	2	
------------	---	--

### **MISC. NUTRITIONAL SUBSTANCES**

<i>omega-3 fatty acids (fish oil)</i>	1	OTC, EDS
---------------------------------------	---	----------

### **PROTEINS**

CLINIMIX E/DEXTROSE	2	
CLINIMIX/DEXTROSE (4.25/10)	2	
CLINIMIX/DEXTROSE (4.25/5)	2	
CLINIMIX/DEXTROSE (5/15)	2	
CLINIMIX/DEXTROSE (5/20)	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
CLINIMIX/DEXTROSE (6/5)	2	
CLINIMIX/DEXTROSE (8/10)	2	
CLINIMIX/DEXTROSE (8/14)	2	
NEPHRAMINE	2	
PROCALAMINE	2	

## **OPHTHALMIC AGENTS**

### **ARTIFICIAL TEARS AND LUBRICANTS**

ALCON TEARS	2	OTC
<i>artificial tear drops</i>	1	OTC, EDS
<i>dextran 70/he-cell drops (genteal tears)</i>	1	OTC, EDS
GENTEAL SEVERE	2	OTC
ISOPTO TEARS	2	OTC
LUBRICANT EYE DROPS	2	OTC
<i>lubricant eye drops</i>	1	OTC, EDS
<i>lubricant eye ointment</i>	1	OTC
<i>polyethylene glycol drops</i>	1	
<i>polyvinyl alcohol / povidone drops (refresh)</i>	1	OTC, EDS
<i>polyvinyl alcohol drops (hypotears)</i>	1	OTC, EDS
PURE & GENTLE LUBRICANT	2	OTC
REFRESH 1.4-0.6 % SOLUTION	2	OTC
REFRESH DIGITAL	2	OTC
REFRESH OPTIVE 0.5-0.9 % SOLUTION	2	OTC
REFRESH OPTIVE 1-0.9 % GEL	1	OTC
REFRESH OPTIVE ADVANCED	2	OTC
REFRESH OPTIVE PF	2	OTC
REFRESH RELIEVA	2	OTC
REFRESH RELIEVA PF 0.5-0.9 % SOLUTION	2	OTC
REFRESH TEARS PF	2	OTC
SYSTANE BALANCE	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
SYSTANE COMPLETE	2	OTC
VISTA GEL DRY EYE RELIEF	2	OTC
<b>BETA-BLOCKERS - OPHTHALMIC</b>		
BETAXOLOL HCL 0.5 % SOLUTION	2	PA, NP
<i>betaxolol hcl 0.5 % solution</i>	1	PA, EDS, NP
BETIMOL	2	PA, NP
BETOPTIC-S	2	PA, NP
<i>brimonidine tartrate-timolol</i>	1	PA, EDS, NP
CARTEOLOL HCL	2	PA, NP
COMBIGAN	1	P
COSOPT	2	PA, NP
COSOPT PF	2	PA, NP
<i>dorzolamide hcl-timolol mal</i>	1	EDS, P
<i>dorzolamide hcl-timolol mal pf</i>	1	PA, EDS, NP
ISTALOL	2	PA, NP
LEVOBUNOLOL HCL	2	PA, NP
<i>timolol hemihydrate</i>	1	P
<i>timolol maleate (once-daily)</i>	1	PA, EDS, NP
<i>timolol maleate 0.25 % gel f soln, 0.25 % solution, 0.5 % gel f soln, 0.5 % solution</i>	1	EDS, P
<i>timolol maleate 0.5 % (daily) solution</i>	1	PA, EDS, NP
<i>timolol maleate ocudose</i>	1	PA, EDS, NP
<i>timolol maleate pf</i>	1	PA, EDS, NP
TIMOPTIC	2	PA, NP
TIMOPTIC OCUDOSE	2	PA, NP
TIMOPTIC-XE	2	PA, NP
<b>CHOLINERGIC AGONISTS</b>		
TYRVAYA	2	PA, QL (0.14 ML PER DAY), NP
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>atropine sulfate 1 % solution</i>	1	EDS
HOMATROPAIRE	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>MIOTICS</b>		
PHOSPHOLINE IODIDE	2	
<i>pilocarpine hcl 1 %, 2 %, 4 %</i>	1	EDS
<b>OPHTHALMIC ADRENERGIC AGENTS</b>		
ALPHAGAN P	1	P
APRACLONIDINE HCL	2	PA, NP
<i>apraclonidine hcl</i>	1	PA, EDS, NP
<i>brimonidine tartrate 0.1 %, 0.2 %</i>	1	EDS, P
<i>brimonidine tartrate 0.15 % solution</i>	1	PA, EDS, NP
IOPIDINE	2	PA, NP
SIMBRINZA	2	PA, NP
<b>OPHTHALMIC ANTI-INFECTIVES</b>		
<i>ak-poly-bac</i>	1	
AZASITE	2	PA, NP
BACITRACIN 500 UNIT/GM OINTMENT	2	PA, NP
<i>bacitracin-polymyxin b</i>	1	
BESIVANCE	2	PA, NP
CILOXAN 0.3 % OINTMENT	2	PA, NP
<i>ciprofloxacin hcl 0.3 % solution</i>	1	P
<i>erythromycin 5 mg/gm ointment</i>	1	
<i>gatifloxacin 0.5 % solution</i>	1	PA, NP
<i>gentamicin sulfate 0.3 % solution</i>	1	
KLARITY-A	2	PA, NP
MOXIFLOXACIN HCL (2X DAY)	2	PA, NP
<i>moxifloxacin hcl 0.5 % solution</i>	1	P
NATACYN	2	PA, QL (15 ML PER FILL), NP
<i>neo-polycin</i>	1	
<i>neomycin-bacitracin zn-polymyx</i>	1	
NEOMYCIN-POLYMYXIN- GRAMICIDIN	2	
OCUFLOX	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>ofloxacin 0.3 % solution</i>	1	P
<i>polycin</i>	1	
<i>polymyxin b-trimethoprim</i>	1	
SULFACETAMIDE SODIUM 10 % OINTMENT	2	PA, NP
<i>sulfacetamide sodium 10 % solution</i>	1	
<i>tobramycin 0.3 % solution</i>	1	
VIGAMOX	2	PA, NP
XDEMVY	2	PA, LA, QL (10 ML PER FILL)
ZIRGAN	2	
<b>OPHTHALMIC DECONGESTANTS</b>		
<i>advanced lubricant</i>	1	OTC, EDS
<i>ft eye drops advanced relief</i>	1	OTC, EDS
<i>glitch advanced relief</i>	1	OTC, EDS
<i>naphazoline /pheniramine drops (naphcon-a)</i>	1	OTC, EDS
<i>tetrahydrazoline drops (visine)</i>	1	OTC, EDS
<i>visine red eye hydrating comf</i>	1	OTC, EDS
<b>OPHTHALMIC IMMUNOMODULATORS</b>		
CEQUA	2	PA, QL (2 EA PER DAY), NP
<i>cyclosporine 0.05 % emulsion</i>	1	PA, QL (2 EA PER DAY), EDS, NP
RESTASIS	1	QL (2 EA PER DAY), P
RESTASIS MULTIDOSE	1	QL (2 EA PER DAY), P
VERKAZIA	2	PA, NP
VEVYE	2	PA, QL (0.07 ML PER DAY), NP
<b>OPHTHALMIC INTEGRIN ANTAGONISTS</b>		
XIIDRA	2	QL (2 EA PER DAY), P
<b>OPHTHALMIC KINASE INHIBITORS</b>		
RHOPRESSA	2	PA, NP
ROCKLATAN	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>OPHTHALMIC LOCAL ANESTHETICS</b>		
<i>altacaine</i>	1	
<i>proparacaine hcl 0.5 % solution</i>	1	
<i>tetracaine hcl 0.5 % solution</i>	1	
<b>OPHTHALMIC NERVE GROWTH FACTORS</b>		
OXERVATE	2	PA, LA, QL (7 UNITS PER FILL; 8 FILLS PER LIFETIME)
<b>OPHTHALMIC STEROIDS</b>		
ALREX	1	P
<i>bacitra-neomycin-polymyxin-hc</i>	1	
BLEPHAMIDE	2	
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	2	
DEXTENZA	2	PA, NP
DEXYCU	2	PA, NP
<i>difluprednate</i>	1	PA, NP
DUREZOL	2	PA, NP
EYSUVIS	2	PA, QL (0.6 ML PER DAY), NP
<i>fluorometholone</i>	1	P
INVELTYS	2	PA, NP
LOTEMAX	2	PA, NP
LOTEMAX SM	2	PA, NP
<i>loteprednol etabonate</i>	1	PA, NP
<i>neo-polycin hc</i>	1	
<i>neomycin-polymyxin-dexameth</i>	1	
NEOMYCIN-POLYMYXIN-HC --3.5-10000-1 SUSPENSION	2	
OZURDEX	2	PA, LA, NP
PRED FORTE	2	
<i>prednisolone acetate 1 % suspension</i>	1	P
PREDNISOLONE ACETATE P-F	2	
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	2	



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
RETISERT	2	PA, LA, NP
SULFACETAMIDE-PREDNISOLONE	2	
<i>tobramycin-dexamethasone</i>	1	
TRIESENCE	2	LA, P
XIPERE	2	PA, LA, NP
YUTIQ	2	PA, LA, NP
<b>OPHTHALMICS - MISC.</b>		
ACULAR	2	PA, NP
ACULAR LS	2	PA, NP
ACUVAIL	2	PA, NP
ALOMIDE	2	PA, NP
<i>azelastine hcl 0.05 % solution</i>	1	PA, EDS, NP
AZOPT	2	PA, NP
<i>balanced salt</i>	1	
<i>bepotastine besilate</i>	1	PA, NP
BEPREVE	1	P
<i>brinzolamide</i>	1	PA, EDS, NP
<i>bromfenac sodium (once-daily)</i>	1	PA, NP
<i>bromfenac sodium 0.075 % solution</i>	1	PA, NP
BROMSITE	2	PA, NP
CROMOLYN SODIUM CROMOLYN SODIUM 4 % SOLUTION, CROMOLYN SODIUM 4 % SOLUTION	1	P
CYSTARAN	2	LA, QL (60 ML PER 28 DAYS)
<i>diclofenac sodium 0.1 % solution</i>	1	P
<i>dorzolamide hcl 2 % solution</i>	1	EDS, P
<i>epinastine hcl</i>	1	PA, NP
FLURBIPROFEN SODIUM	2	PA, NP
ILEVRO	2	PA, NP
<i>ketorolac tromethamine 0.4 %, 0.5 %</i>	1	P
<i>ketotifen drops (zaditor)</i>	1	PA, OTC, NP
MIEBO	2	PA, QL (0.1 ML PER DAY), NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
NEVANAC	2	PA, NP
<i>olopatadine</i>	1	QL (0.085 ML PER DAY), OTC, EDS, P
PROLENSA	2	PA, NP
<i>sodium chloride eye products (muro 128)</i>	1	OTC
TRUSOPT	2	PA, NP
ZADITOR	2	PA, OTC, NP
ZERVIATE	2	PA, NP

## **PROSTAGLANDINS - OPHTHALMIC**

<i>bimatoprost 0.03 % solution</i>	1	PA, QL (0.085 ML PER DAY), EDS, NP
DURYSTA	2	PA, NP
IYUZEH	2	PA, NP
<i>latanoprost 0.005 % solution</i>	1	QL (0.085 ML PER DAY), EDS, P
LUMIGAN	2	PA, QL (0.09 ML PER DAY), NP
<i>tafluprost (pf)</i>	1	PA, QL (1 EA PER DAY), NP
TRAVATAN Z	1	QL (0.085 ML PER DAY), P
<i>travoprost (bak free)</i>	1	PA, QL (0.085 ML PER DAY), EDS, NP
VYZULTA	2	PA, QL (0.084 ML PER DAY), NP
XALATAN	2	PA, QL (0.085 ML PER DAY), NP
XELPROS	2	PA, QL (0.084 ML PER DAY), NP
ZIOPTAN	2	PA, QL (1 EA PER DAY), NP

## **OTIC AGENTS**

### **OTIC AGENTS - MISCELLANEOUS**

<i>acetic acid 2 % solution</i>	1	
<i>carbamide peroxide (debrox)</i>	1	OTC

### **OTIC ANTI-INFECTIVES**

<i>ciprofloxacin hcl 0.2 % solution</i>	1	PA, NP
<i>ofloxacin otic soln 0.3%</i>	1	P

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>OTIC COMBINATIONS</b>		
CIPRO HC	2	P
<i>ciprofloxacin-dexamethasone</i>	1	P
CIPROFLOXACIN-FLUOCINOLONE PF	1	PA, NP
CORTISPORIN-TC	2	PA, NP
<i>neomycin-polymyxin-hc</i>	1	P
<b>OTIC STEROIDS</b>		
<i>flac</i>	1	
<i>fluocinolone acetonide 0.01 % oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<b>OXYTOCICS</b>		
<b>OXYTOCICS</b>		
<i>methergine</i>	1	QL (4 EA PER DAY), QL (28 UNITS PER FILL; 1 FILL PER 365 DAYS)
<i>methylergonovine maleate 0.2 mg tab</i>	1	QL (4 EA PER DAY), QL (28 UNITS PER FILL; 1 FILL PER 365 DAYS)
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS</b>		
<b>IMMUNE SERUMS</b>		
CUVITRU	2	SP
GAMMAGARD	2	SP
GAMUNEX-C	2	SP
HIZENTRA	2	SP
HYPERTET	2	
PRIVIGEN 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION, 40 GM/400ML SOLUTION	2	SP
<b>MONOCLONAL ANTIBODIES</b>		
BEYFORTUS	\$0	LA
SYNAGIS	2	LA

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
<b>PASSIVE IMMUNIZING AGENTS - COMBINATIONS</b>		
HYQVIA	2	SP
<b>PENICILLINS</b>		
<b>AMINOPENICILLINS</b>		
AMOXICILLIN 125 MG CHEW TAB, 250 MG CHEW TAB	2	
<i>amoxicillin 125 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg cap, 250 mg/5ml recon susp, 400 mg/5ml recon susp, 500 mg cap, 500 mg tab, 875 mg tab</i>	1	
<i>ampicillin</i>	1	
AMPICILLIN SODIUM 1 GM RECON SOLN	2	
<i>ampicillin sodium 1 gm soln, 2 gm soln, 10 gm soln, 250 mg soln, 500 mg soln</i>	1	
<b>NATURAL PENICILLINS</b>		
<i>penicillin g potassium</i>	1	
PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN, 250 MG/5ML RECON SOLN	2	
<i>penicillin v potassium 250 mg tab, 500 mg tab</i>	1	
<b>PENICILLIN COMBINATIONS</b>		
AMOXICILLIN-POT CLAVULANATE - 200-28.5 MG CHEW TAB, -400-57 MG CHEW TAB	2	PA, NP
<i>amoxicillin-pot clavulanate -200-28.5 mg/5ml recon susp, -250-125 mg tab, -250-62.5 mg/5ml recon susp, -400-57 mg/5ml recon susp, -500-125 mg tab, -600-42.9 mg/5ml recon susp, -875-125 mg tab</i>	1	P
AMOXICILLIN-POT CLAVULANATE ER	2	PA, NP
<i>ampicillin-sulbactam sodium</i>	1	
<i>piperacillin sod-tazobactam so -3-0.375 gm ln, -4-0.5 gm ln, -40.5 (36-4.5) gm ln, -2.25 (2-0.25) gm ln, -3.375 (3-0.375) gm ln, -4.5 (4-0.5) gm ln</i>	1	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin sodium</i>	1	
<i>nafcillin sodium</i>	1	
NAFCILLIN SODIUM 1 GM RECON SOLN, 2 GM RECON SOLN	2	
NAFCILLIN SODIUM IN DEXTROSE	2	
<i>oxacillin sodium</i>	1	

## **PHARMACEUTICAL ADJUVANTS**

### **ANTIMICROBIAL AGENTS**

BENZYL ALCOHOL	2	OTC
----------------	---	-----

### **FLAVORING AGENTS**

ALFALFA FLAVOR	2	OTC
ALMOND OIL BITTER FLAVOR	2	OTC
ANISE EXTRACT	2	OTC
ANISE FLAVOR	2	OTC
APPLE FLAVOR	2	OTC
APPLE FLAVOR WATER MISCIBLE	2	OTC
APRICOT FLAVOR	2	OTC
BACON FLAVOR	2	OTC
BANANA CONCENTRATE	2	OTC
BANANA CREAM FLAVOR	2	OTC
BANANA CREME FLAVOR	2	OTC
BANANA FLAVOR	2	OTC
BEEF (GRILLED) FLAVOR OIL SOL	2	OTC
BEEF BRAISED NATURAL FLAVOR	2	OTC
BEEF FLAVOR	2	OTC
BEEF TYPE FLAVOR NATURAL	2	OTC
BEEF TYPE FLAVOR OS	2	OTC
BEEF-ADE	2	OTC
BITTER STOP FLAVOR	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
BITTER-BLOC PURE	2	OTC
BITTER-BLOC WS	2	OTC
BITTER-BLOC WS CONCENTRATE	2	OTC
BITTER-BLOC WS/OS LIQUID	2	OTC
BITTERNESS MASK FLAVOR	2	OTC
BITTERNESS REDUCING AGENT	2	OTC
BITTERNESS SUPPRESSOR FLAVOR LIQUID	2	OTC
BLACKBERRY FLAVOR	2	OTC
BLOOD ORANGE OS	2	OTC
BLUEBERRY FLAVOR	2	OTC
BUBBLE GUM CONCENTRATE	2	OTC
BUBBLE GUM FLAVOR	2	OTC
BUBBLE GUM OS	2	OTC
BUBBLE GUM WS	2	OTC
BUTTER FLAVOR	2	OTC
BUTTER RUM FLAVOR	2	OTC
BUTTERSCOTCH FLAVOR	2	OTC
CARAMEL FLAVOR	2	OTC
CARAMEL OS	2	OTC
CHEESE-ADE FLAVOR	2	OTC
CHEESECAKE FLAVOR	2	OTC
CHERRY FLAVOR	2	OTC
CHERRY-ADE FLAVOR	2	OTC
CHICKEN (GRILLED) FLAVOR	2	OTC
CHICKEN BROTH FLAVOR	2	OTC
CHICKEN CONC FLAVOR	2	OTC
CHICKEN FLAVOR	2	OTC
CHICKEN FLAVOR OIL MISCIBLE	2	OTC
CHICKEN FLAVOR OIL SOLUBLE	2	OTC
CHICKEN FLAVOR WATER MISCIBLE	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
CHICKEN ROASTED CONCENTRATE	2	OTC
CHOCOLATE CONCENTRATE	2	OTC
CHOCOLATE FLAVOR	2	OTC
CHOCOLATE HAZELNUT FLAVOR	2	OTC
CHOCOLATE NATURAL & ARTIFICIAL	2	OTC
CINNAMON FLAVOR	2	OTC
COCONUT FLAVOR	2	OTC
COFFEE FLAVOR	2	OTC
COLA FLAVOR	2	OTC
COTTON CANDY FLAVOR	2	OTC
CRAN-RASPBERRY FLAVOR	2	OTC
CREME DE MENTHE FLAVOR	2	OTC
CREME DEMENTHE FLAVOR	2	OTC
CREME OS	2	OTC
ENGLISH TOFFEE FLAVOR	2	OTC
EUCALYPTUS FLAVOR	2	OTC
EUGENOL FLAVOR	2	OTC
FISH FLAVOR	2	OTC
FLAVOR CONC-CHLORHEXIDINE	2	OTC
FLAVORX	2	OTC
GRAPE CONCORD OS	2	OTC
GRAPE FLAVOR	2	OTC
GRAPEFRUIT FLAVOR	2	OTC
GREEN APPLE OS	2	OTC
GUAVA FLAVOR	2	OTC
HAM FLAVOR	2	OTC
HONEY FLAVOR	2	OTC
KAHLUA FLAVOR	2	OTC
LEMON EXTRACT	2	OTC
LEMON FLAVOR	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
LEMON-LIME SD	2	OTC
LEMONADE FLAVOR	2	OTC
LICORICE FLAVOR	2	OTC
LIME FLAVOR	2	OTC
LIVER CONCENTRATE	2	OTC
LIVER FLAVOR	2	OTC
MANGO FLAVOR	2	OTC
MANGO FLAVOR SWEETENED	2	OTC
MANGO PASSION FRUIT OS	2	OTC
MAPLE FLAVOR	2	OTC
MARSHMALLOW ARTIFICIAL FLAVOR	2	OTC
MARSHMALLOW FLAVOR	2	OTC
MARSHMALLOW OS	2	OTC
MARSHMALLOW WS	2	OTC
MINT CHOCOLATE CHIP FLAVOR	2	OTC
MOLASSES FLAVOR	2	OTC
NATURAL CARAMEL	2	OTC
ORANGE CONCENTRATE	2	OTC
ORANGE CREAM FLAVOR	2	OTC
ORANGE FLAVOR	2	OTC
ORANGE OIL FLAVOR	2	OTC
PASSION FRUIT FLAVOR	2	OTC
PASSION FRUIT FLAVOR SWEETENED	2	OTC
PCCA SWEETNESS ENHANCER	2	OTC
PEACH FLAVOR	2	OTC
PEANUT BUTTER FLAVOR	2	OTC
PEANUT BUTTER OS	2	OTC
PEPPERMINT BURST OS	2	OTC
PEPPERMINT FLAVOR	2	OTC
PINA COLADA FLAVOR	2	OTC



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PINEAPPLE FLAVOR	2	OTC
PRALINES AND CREAM FLAVOR	2	OTC
PUMPKIN FLAVOR	2	OTC
RASPBERRY CONCENTRATE	2	OTC
RASPBERRY FLAVOR	2	OTC
RASPBERRY FLAVOR ARTIFICIAL	2	OTC
RASPBERRY OS	2	OTC
ROOT BEER FLAVOR	2	OTC
SARDINE FLAVOR	2	OTC
SHRIMP FLAVOR	2	OTC
SPEARMINT FLAVOR	2	OTC
SPEARMINT OS	2	OTC
STEVIA GLYCERITE EXTRACT	2	OTC
STRAWBERRY FLAVOR	2	OTC
STRAWBERRY OS	2	OTC
SUPER SYNERSWEET FLAVOR	2	OTC
SWEET CORN FLAVOR	2	OTC
SWEET DROPS	2	OTC
SWEETENING ENHANCER	2	OTC
TANGERINE FLAVOR	2	OTC
TANGERINE FLAVOR SWEETENED	2	OTC
TEABERRY FLAVOR	2	OTC
TRITTAB PEPPERMINT ICE	2	OTC
TROPICAL FUSION OS	2	OTC
TROPICAL FUSION WS	2	OTC
TROPICAL PUNCH FLAVOR	2	OTC
TUNA FLAVOR	2	OTC
TUNA TYPE FLAVOR OS	2	OTC
TUTTI FRUTTI CONCENTRATE	2	OTC
TUTTI FRUTTI FLAVOR	2	OTC
TUTTI-FRUTTI FLAVOR	2	OTC
VANILLA BUTTERNUT FLAVOR	2	OTC

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
VANILLA FLAVOR	2	OTC
VANILLA OS	2	OTC
VANILLIN FLAVOR	2	OTC
VERY BERRY OS	2	OTC
VITAMIN/IRON MASKING AGENT	2	OTC
WATERMELON FLAVOR	2	OTC
WILD CHERRY FLAVOR	2	OTC
WILD CHERRY OS	2	OTC
WILD CHERRY SD FLAVOR	2	OTC
<b>INTERNAL VEHICLE INGREDIENTS/AGENTS</b>		
THICK-IT - POWDER	2	OTC
<b>LIQUID VEHICLES</b>		
BACTERIOSTATIC WATER(BENZ ALC)	2	
CHERRY	2	OTC
CHERRY CONCENTRATE SYRUP	2	OTC
CUSTOM POLYGLYCOL TROCHE BASE	2	
<i>flavor syrup</i>	2	OTC
<i>saline bacteriostatic</i>	1	
<i>sodium chloride bacteriostatic</i>	1	
<i>sterile water for injection</i>	1	
STERILE WATER FOR INJECTION	2	
<b>NON GELATIN CAPSULES (EMPTY)</b>		
<i>non gelatin capsules</i>	2	OTC
<b>PHARMACEUTICAL EXCIPIENTS</b>		
BITTER DRUG	2	
CAPSORAL W/DYNAMIC STATIC GRD	2	
CAPSUBLEND-H	2	
CAPSUBLEND-P	2	
CAPSUBLEND-S	2	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
COCOA BUTTER MISC	2	OTC
ECTOSEAL P2G	2	
FAGRON CAPFILL PRO	2	
FAGRON DISPERSAPRO	2	
FREEDOM SIMPLECAP	2	
LOXORAL BASE	2	
MAGNESIUM STEARATE	2	OTC
METHYLCELLULOSE POWDER	2	
NAT BITTERNESS	2	
PROCAP 90 CAPSULE EXCIPIENT	2	
STEARIC ACID POWDER	2	OTC

### **SEMI SOLID VEHICLES**

<i>petrolatum (vaseline)</i>	1	OTC
<i>petrolatum ointment petrolatum, petrolatum</i>	2	OTC

### **PROGESTINS**

#### **PROGESTINS**

<i>gallifrey</i>	1	EDS
LILETTA (52 MG)	\$0	LA
<i>medroxyprogesterone acetate 2.5 mg tab, 5 mg tab, 10 mg tab</i>	1	EDS
<i>megestrol acetate 625 mg/5ml suspension</i>	1	PA, EDS, NP
MEGESTROL ACETATE 625 MG/5ML SUSPENSION	1	PA, NP
NEXPLANON	\$0	LA
<i>norethindrone acetate 5 mg tab</i>	1	EDS
<i>progesterone 100 mg cap, 200 mg cap</i>	1	EDS

### **PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.**

#### **AGENTS FOR CHEMICAL DEPENDENCY**

<i>acamprosate calcium</i>	1	EDS
<i>disulfiram 250 mg tab</i>	1	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>ANTIDEMENTIA AGENTS</b>		
ADLARITY	2	PA, NP
ARICEPT	2	PA, NP
<i>donepezil hcl 23 mg tab</i>	1	PA, EDS, NP
<i>donepezil hcl 5 mg tab, 5 mg tab disp, 10 mg tab, 10 mg tab disp</i>	1	EDS, P
EXELON	2	PA, NP
<i>galantamine hydrobromide 4 mg tab, 8 mg tab, 12 mg tab</i>	1	PA, EDS, NP
GALANTAMINE HYDROBROMIDE 4 MG/ML SOLUTION	2	PA, NP
<i>galantamine hydrobromide er</i>	1	PA, EDS, NP
<i>memantine hcl 2 mg/ml, 10 mg/5ml</i>	1	PA, EDS, NP
<i>memantine hcl 28 x 5 mg &amp; 21 x 10 mg tab</i>	1	PA, NP
<i>memantine hcl 5 mg tab, 10 mg tab</i>	1	EDS, P
<i>memantine hcl er</i>	1	PA, EDS, NP
NAMENDA	2	PA, NP
NAMENDA TITRATION PAK	2	PA, NP
NAMENDA XR	2	PA, NP
NAMENDA XR TITRATION PACK	2	PA, NP
NAMZARIC	2	PA, NP
<i>rivastigmine</i>	1	PA, EDS, NP
<i>rivastigmine tartrate</i>	1	PA, EDS, NP
<b>COMBINATION PSYCHOTHERAPEUTICS</b>		
CHLORDIAZEPOXIDE-AMITRIPTYLINE	2	
LYBALVI	\$0	PA, NP
<i>olanzapine-fluoxetine hcl</i>	\$0	PA, NP
PERPHENAZINE-AMITRIPTYLINE	\$0	
SYMBYAX	\$0	PA, NP
<b>FIBROMYALGIA AGENTS</b>		
SAVELLA	2	QL (2 EA PER DAY), P
SAVELLA TITRATION PACK	2	QL (55 EA PER 180 DAYS), P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>MOVEMENT DISORDER DRUG THERAPY</b>		
AUSTEDO	2	PA, QL (4 EA PER DAY), SP
AUSTEDO XR 12 MG TAB ER 24H, 24 MG TAB ER 24H	2	PA, QL (2 EA PER DAY), SP
AUSTEDO XR 18 MG TAB ER 24H, 30 MG TAB ER 24H, 36 MG TAB ER 24H, 42 MG TAB ER 24H, 48 MG TAB ER 24H	2	PA, QL (1 EA PER 1 DAY), SP
AUSTEDO XR 6 MG TAB ER 24H	2	PA, QL (3 EA PER DAY), SP
AUSTEDO XR PATIENT TITRATION 12 & 18 & 24 & 30 MG TBER THPK	2	PA, QL (1 EA PER 1 DAY), SP
AUSTEDO XR PATIENT TITRATION 6 & 12 & 24 MG TBER THPK	2	PA, QL (42 EA PER 28 DAYS), SP
<i>tetrabenazine</i>	1	SP
<b>MULTIPLE SCLEROSIS AGENTS</b>		
AMPYRA	2	PA, LA, NP
AUBAGIO	2	PA, SP, NP
AVONEX PEN	2	PA, SP, P
AVONEX PREFILLED	2	PA, SP, P
BAFIERTAM	2	PA, SP, NP
BETASERON	2	PA, SP, P
BRIUMVI	2	PA, LA, NP
COPAXONE 20 MG/ML SOLN PRSYR	1	PA, SP, P
COPAXONE 40 MG/ML SOLN PRSYR	2	PA, SP, NP
<i>dalfampridine er</i>	1	PA, SP, NP
<i>dimethyl fumarate 120 mg cap dr, 240 mg cap dr</i>	1	SP, P
<i>dimethyl fumarate starter pack</i>	1	PA, SP, NP
EXTAVIA	2	PA, SP, NP
<i>fingolimod hcl</i>	1	PA, SP, P
GILENYA 0.25 MG CAP	2	PA, SP, NP
GILENYA 0.5 MG CAP	1	PA, SP, NP
<i>glatiramer acetate 20 mg/ml soln prsyr</i>	1	PA, SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<i>glatiramer acetate 40 mg/ml soln prsyr</i>	1	PA, SP, NP
<i>glatopa 20 mg/ml soln prsyr</i>	1	PA, SP, NP
<i>glatopa 40 mg/ml soln prsyr</i>	1	PA, SP, NP
KESIMPTA	2	PA, SP, NP
LEMTRADA	2	PA, LA, NP
MAVENCLAD (10 TABS)	2	PA, SP, NP
MAVENCLAD (4 TABS)	2	PA, SP, NP
MAVENCLAD (5 TABS)	2	PA, SP, NP
MAVENCLAD (6 TABS)	2	PA, SP, NP
MAVENCLAD (7 TABS)	2	PA, SP, NP
MAVENCLAD (8 TABS)	2	PA, SP, NP
MAVENCLAD (9 TABS)	2	PA, SP, NP
MAYZENT	2	PA, SP, NP
MAYZENT STARTER PACK	2	PA, SP, NP
OCREVUS	2	PA, SP, NP
PLEGRIDY	2	PA, SP, NP
PLEGRIDY STARTER PACK	2	PA, SP, NP
PONVORY	2	PA, SP, NP
PONVORY STARTER PACK	2	PA, SP, NP
REBIF	2	PA, SP, P
REBIF REBIDOSE	2	PA, SP, P
REBIF REBIDOSE TITRATION PACK	2	PA, SP, P
REBIF TITRATION PACK	2	PA, SP, P
TASCENSO ODT	2	PA, LA, NP
TECFIDERA	2	PA, SP, NP
<i>teriflunomide</i>	1	PA, SP, P
TYSABRI	2	PA, SP, NP
VUMERITY	2	PA, SP, NP
ZEPOSIA	2	PA, QL (1 EA PER DAY), SP, NP
ZEPOSIA 7-DAY STARTER PACK	2	PA, QL (1 EA PER DAY), SP, NP
ZEPOSIA STARTER KIT	2	PA, QL (1 EA PER DAY), SP, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS</b>		
GRALISE 300 MG TAB, 450 MG TAB, 600 MG TAB, 750 MG TAB, 900 MG TAB	2	PA, NP
LYRICA CR	2	PA, NP
<i>pregabalin er</i>	1	PA, NP
<b>PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS</b>		
FLUOXETINE HCL (PMDD)	2	PA, NP
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
ERGOLOID MESYLATES 1 MG TAB	2	
<b>RESTLESS LEG SYNDROME (RLS) AGENTS</b>		
HORIZANT	2	PA, NP
<b>SMOKING DETERRENTS</b>		
<i>nicotine gum</i>	\$0	OTC
<i>nicotine patch</i>	\$0	OTC
NICOTROL	\$0	
<i>varenicline tartrate</i>	\$0	
<i>varenicline tartrate (starter)</i>	\$0	
<i>varenicline tartrate(continue)</i>	\$0	
<b>VASOMOTOR SYMPTOM AGENTS</b>		
BRISDELLE	2	PA, NP
<i>paroxetine mesylate</i>	1	PA, EDS, NP
<b>RESPIRATORY AGENTS - MISC.</b>		
<b>CYSTIC FIBROSIS AGENTS</b>		
KALYDECO 13.4 MG PACKET, 25 MG PACKET, 50 MG PACKET, 75 MG PACKET, 150 MG TAB	2	PA, QL (2 EA PER DAY), SP
KALYDECO 5.8 MG PACKET	2	PA, QL (56 EA PER 28 DAYS), SP
ORKAMBI 100-125 MG TAB, 200-125 MG TAB	2	PA, QL (4 EA PER DAY), SP
ORKAMBI 75-94 MG PACKET, 100-125 MG PACKET, 150-188 MG PACKET	2	PA, QL (2 EA PER DAY), SP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PULMOZYME	2	SP
SYMDEKO	2	PA, QL (2 EA PER DAY), SP
TRIKAFTA 50-25-37.5 75 MG TAB THPK, 100-50-75 150 MG TAB THPK	2	PA, QL (3 EA PER DAY), SP
TRIKAFTA 80-40-60 59.5 MG THER PACK, 100-50-75 75 MG THER PACK	2	PA, QL (2 EA PER DAY), SP

## **PULMONARY FIBROSIS AGENTS**

ESBRIET 267 MG CAP	2	PA, QL (9 EA PER DAY), SP
OFEV	2	PA, LA, QL (2 EA PER DAY)
<i>pirfenidone 267 mg tab</i>	1	PA, QL (9 EA PER DAY), SP
<i>pirfenidone 801 mg tab</i>	1	PA, QL (3 EA PER DAY), SP

## **SULFONAMIDES**

### **SULFONAMIDES**

<i>sulfadiazine 500 mg tab</i>	1	
--------------------------------	---	--

## **TETRACYCLINES**

### **TETRACYCLINES**

<i>doxy 100</i>	1	
<i>doxycycline hyclate 20 mg tab, 50 mg cap, 100 mg cap, 100 mg recon soln, 100 mg tab</i>	1	
<i>doxycycline monohydrate 50 mg cap, 100 mg cap</i>	1	
<i>minocycline hcl 50 mg cap, 75 mg cap, 100 mg cap</i>	1	
<i>mondoxyne nl 100 mg cap</i>	1	
<i>morgidox 100 mg cap</i>	1	
<i>tetracycline hcl 250 mg cap, 500 mg cap</i>	1	

## **THYROID AGENTS**

### **ANTITHYROID AGENTS**

<i>methimazole 5 mg tab, 10 mg tab</i>	1	EDS
<i>propylthiouracil 50 mg tab</i>	1	EDS



<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>THYROID HORMONES</b>		
ADTHYZA 15 MG TAB, 16.25 MG TAB, 30 MG TAB, 32.5 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB, 130 MG TAB	2	
ARMOUR THYROID 15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB	2	
<i>euthyrox</i>	1	EDS
<i>levo-t</i>	1	EDS
<i>levothyroxine sodium 25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab</i>	1	EDS
<i>levoxyl</i>	1	EDS
<i>liothyronine sodium 5 mcg tab, 25 mcg tab, 50 mcg tab</i>	1	EDS
NIVA THYROID	2	
NP THYROID	2	
THYQUIDITY	2	
THYROID 15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB	2	
<i>unithroid</i>	1	EDS

## **TOXOIDS**

### **TOXOID COMBINATIONS**

ADACEL	\$0
BOOSTRIX	\$0
DAPTACEL	\$0
DIPHThERIA-TETANUS TOXOIDS DT	\$0
INFANRIX	\$0
KINRIX	\$0
PEDIARIX	\$0
PENTACEL	\$0

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
QUADRACEL	\$0	
TDVAX	\$0	
TENIVAC	\$0	

## **ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS**

### **ANTISPASMODICS**

ATROPINE SULFATE (PF)	2	
<i>atropine sulfate 0.4 mg/ml solution, 0.5 mg/5ml soln prsyr, 1 mg/10ml soln prsyr, 1 mg/ml solution, 8 mg/20ml solution</i>	1	
<i>dicyclomine hcl 10 mg cap, 10 mg/5ml solution, 20 mg tab</i>	1	EDS
<i>ed-spaz</i>	1	EDS
<i>glycopyrrolate 1 mg tab, 2 mg tab</i>	1	EDS
<i>hyoscyamine sulfate 0.125 mg sl tab, 0.125 mg tab, 0.125 mg tab disp, 0.125 mg/5ml elixir, 0.125 mg/ml solution</i>	1	EDS
<i>hyoscyamine sulfate er</i>	1	EDS
<i>hyosyne</i>	1	EDS
<i>methscopolamine bromide 2.5 mg tab</i>	1	
<i>methscopolamine bromide 5 mg tab</i>	1	EDS
<i>nulev</i>	1	EDS
<i>oscimin</i>	1	EDS
<i>oscimin sr</i>	1	EDS
<i>symax-sl</i>	1	EDS
<i>symax-sr</i>	1	EDS

### **H-2 ANTAGONISTS**

<i>cimetidine 200 mg tab, 300 mg tab, 400 mg tab, 800 mg tab</i>	1	EDS
<i>famotidine (pepcid)</i>	1	OTC, EDS
FAMOTIDINE PREMIXED	2	
NIZATIDINE 15 MG/ML SOLUTION, 300 MG CAP	2	
<i>nizatidine 150 mg cap</i>	1	EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>MISC. ANTI-ULCER</b>		
<i>sucralfate 1 gm tab, 1 gm/10ml suspension</i>	1	EDS
<b>PROTON PUMP INHIBITORS</b>		
<i>acid reducer 20.6 (20 base) mg cap dr</i>	1	OTC, EDS
ACIPHEX	2	PA, QL (30 EA PER FILL), NP
<i>cvs esomeprazole magnesium</i>	1	OTC, EDS, P
<i>cvs omeprazole 20.6 (20 base) mg cap dr</i>	1	OTC, EDS
<i>cvs omeprazole magnesium</i>	1	OTC, EDS
DEXILANT	2	PA, NP
<i>dexlansoprazole</i>	1	PA, NP
<i>eq esomeprazole magnesium</i>	1	OTC, EDS, P
<i>eq omeprazole magnesium</i>	1	OTC, EDS
<i>esomeprazole magnesium 10 mg packet, 20 mg packet, 40 mg packet</i>	1	PA, NP
<i>esomeprazole magnesium 2.5 mg packet, 5 mg packet</i>	1	PA, NP
<i>esomeprazole magnesium 20 mg cap dr</i>	1	OTC, EDS, P
<i>esomeprazole magnesium 40 mg cap dr</i>	1	EDS, P
<i>ft acid reducer 20 mg cap dr</i>	1	OTC, EDS, P
<i>gnp esomeprazole magnesium</i>	1	OTC, EDS, P
<i>gnp omeprazole 20.6 (20 base) mg cap dr</i>	1	OTC, EDS
<i>goodsense esomeprazole</i>	1	OTC, EDS, P
<i>hm esomeprazole magnesium dr</i>	1	OTC, EDS, P
<i>kls esomeprazole magnesium</i>	1	OTC, EDS, P
<i>kp omeprazole magnesium</i>	1	OTC, EDS
<i>lansoprazole (prevacid)</i>	1	PA, OTC, EDS, NP
LANSOPRAZOLE 15 MG CAP DR	1	OTC, EDS, P
LANSOPRAZOLE 15 MG TAB DR DISP	1	PA, OTC, NP
LANSOPRAZOLE 30 MG CAP DR	1	EDS, P
LANSOPRAZOLE 30 MG TAB DR DISP	1	PA, NP
NEXIUM 2.5 MG PACKET, 5 MG PACKET, 10 MG PACKET, 20 MG PACKET, 40 MG PACKET	1	P

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
NEXIUM 20 MG CAP DR, 40 MG CAP DR	2	PA, NP
NEXIUM I.V.	2	PA, NP
<i>omeprazole (prilosec)</i>	1	OTC, EDS, P
<i>omeprazole magnesium 20.6 (20 base) mg cap dr</i>	1	OTC, EDS
<i>pantoprazole sodium 20 mg tab dr, 40 mg tab dr</i>	1	EDS, P
<i>pantoprazole sodium 40 mg packet</i>	1	PA, NP
PREVACID 30 MG CAP DR	2	PA, NP
PREVACID SOLUTAB 15 MG TAB DR DISP	2	PA, NP
PREVACID SOLUTAB 30 MG TAB DR DISP	2	PA, NP
PRILOSEC	2	PA, NP
PROTONIX 20 MG TAB DR, 40 MG PACKET, 40 MG TAB DR	2	PA, NP
<i>qc esomeprazole magnesium</i>	1	OTC, EDS, P
<i>qc omeprazole magnesium</i>	1	OTC, EDS
<i>ra esomeprazole magnesium</i>	1	OTC, EDS, P
<i>rabeprazole sodium 20 mg tab dr</i>	1	PA, EDS, NP
<i>sm esomeprazole magnesium</i>	1	OTC, EDS, P
<b>ULCER DRUGS - PROSTAGLANDINS</b>		
<i>misoprostol 100 mcg tab, 200 mcg tab</i>	1	EDS
<b>ULCER THERAPY COMBINATIONS</b>		
<i>cvs omeprazole-sod bicarbonate</i>	1	PA, OTC, EDS, NP
<i>goodsense omeprazole/sod bicarb</i>	1	PA, OTC, EDS, NP
KONVOMEPR	2	PA, NP
<i>omeprazole-sodium bicarbonate -20-1100 mg cap</i>	1	PA, OTC, EDS, NP
<i>omeprazole-sodium bicarbonate -20-1680 mg packet, -40-1100 mg cap, -40-1680 mg packet</i>	1	PA, NP
ZEGERID 20-1100 MG CAP	2	PA, OTC, NP
ZEGERID 20-1680 MG PACKET, 40-1100 MG CAP, 40-1680 MG PACKET	2	PA, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
ZEGERID OTC	2	PA, OTC, NP
<b>URINARY ANTISPASMODICS</b>		
<b>URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)</b>		
<i>darifenacin hydrobromide er</i>	1	PA, EDS, NP
DETROL	2	PA, NP
DITROPAN XL	2	PA, NP
ENABLEX	2	PA, NP
<i>fesoterodine fumarate er</i>	1	PA, NP
<i>oxybutynin chloride 5 mg tab, 5 mg/5ml solution</i>	1	EDS, P
<i>oxybutynin chloride er</i>	1	EDS, P
OXYTROL	2	P
<i>solifenacin succinate</i>	1	EDS, P
<i>tolterodine tartrate</i>	1	EDS, P
<i>tolterodine tartrate er</i>	1	EDS, P
TOVIAZ	1	P
<i>tropium chloride</i>	1	PA, EDS, NP
<i>tropium chloride er</i>	1	PA, EDS, NP
VESICARE	2	PA, NP
VESICARE LS	2	PA, NP
<b>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</b>		
GEMTESA	2	PA, NP
<i>mirabegron er</i>	1	
MYRBETRIQ	2	PA, NP
<b>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</b>		
<i>bethanechol chloride 5 mg tab, 10 mg tab, 25 mg tab, 50 mg tab</i>	1	EDS
<b>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</b>		
<i>flavoxate hcl</i>	1	PA, EDS, NP

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
<b>VACCINES</b>		
<b>BACTERIAL VACCINES</b>		
ACTHIB	\$0	
BCG VACCINE	\$0	
BEXSERO	\$0	
CAPVAXIVE	\$0	
HIBERIX	\$0	
MENACTRA	\$0	
MENQUADFI	\$0	
MENVEO	\$0	
PEDVAX HIB	\$0	
PENBRAYA	\$0	
PNEUMOVAX 23	\$0	
PREVNAR 13	\$0	
PREVNAR 20	\$0	
TRUMENBA	\$0	
TYPHIM VI	\$0	
VAXCHORA	\$0	
VAXNEUVANCE	\$0	
<b>VIRAL VACCINES</b>		
ABRYSVO	\$0	
AFLURIA PRESERVATIVE FREE	\$0	
AREXVY	\$0	
COMIRNATY	\$0	
DENGVAXIA	\$0	
ENGERIX-B	\$0	
ERVEBO	\$0	
FLUAD	\$0	
FLUARIX	\$0	
FLUARIX QUADRIVALENT	\$0	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
FLUBLOK	\$0	
FLUBLOK QUADRIVALENT	\$0	
FLUCELVAX	\$0	
FLULAVAL	\$0	
FLULAVAL QUADRIVALENT	\$0	
FLUMIST	\$0	
FLUZONE 0.5 ML SUSP PRSYR	\$0	
FLUZONE HIGH-DOSE	\$0	
FLUZONE HIGH-DOSE QUADRIVALENT	\$0	
FLUZONE QUADRIVALENT	\$0	
GARDASIL 9	\$0	
HAVRIX	\$0	
HEPLISAV-B	\$0	
IMOVAX RABIES	\$0	
IPOL	\$0	
IXCHIQ	\$0	
IXIARO	\$0	
JANSSEN COVID-19 VACCINE	\$0	
JYNNEOS	\$0	
M-M-R II	\$0	
MODERNA COVID-19 BIVAL 6M-5Y	\$0	
MODERNA COVID-19 BIVAL BOOSTER	\$0	
MODERNA COVID-19 BIVALENT	\$0	
MODERNA COVID-19 VAC (BOOSTER)	\$0	
MODERNA COVID-19 VAC 6M-11Y	\$0	
MODERNA COVID-19 VACC 6-11Y	\$0	
MODERNA COVID-19 VACC 6M-5Y	\$0	
MODERNA COVID-19 VACCINE	\$0	
MRESVIA	\$0	
NOVAVAX COVID-19 VACCINE	\$0	

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
PFIZER COVID-19 BIVAL 6MO-4YR	\$0	
PFIZER COVID-19 VAC BIVAL 5-11	\$0	
PFIZER COVID-19 VAC BIVALENT	\$0	
PFIZER COVID-19 VAC-TRIS 5-11Y	\$0	
PFIZER COVID-19 VAC-TRIS 6M-4Y	\$0	
PFIZER-BIONT COVID-19 VAC-TRIS	\$0	
PFIZER-BIONTECH COVID-19 VACC	\$0	
PREHEVBRIO	\$0	
PRIORIX	\$0	
PROQUAD	\$0	
RABAVERT	\$0	
RECOMBIVAX HB	\$0	
ROTARIX	\$0	
ROTATEQ	\$0	
SHINGRIX	\$0	
SPIKEVAX	\$0	
SPIKEVAX COVID-19 VACCINE	\$0	
STAMARIL	\$0	
TICOVAC	\$0	
TWINRIX	\$0	
VAQTA	\$0	
VARIVAX	\$0	
YF-VAX	\$0	

## **VAGINAL AND RELATED PRODUCTS**

### **SPERMICIDES**

<i>vaginal contraceptive foam</i>	\$0	OTC
-----------------------------------	-----	-----

### **VAGINAL ANTI-INFECTIVES**

<i>clindamycin phosphate 2 % cream</i>	1	
<i>clotrimazole (gyne-lotrimin)</i>	1	OTC, P
<i>miconazole (monistat)</i>	1	OTC



DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
MICONAZOLE 3 200 MG SUPPOSITORY	2	
<i>terconazole</i>	1	
<i>tioconazole (vagistat)</i>	1	OTC

## VAGINAL ESTROGENS

<i>estradiol 0.1 mg/gm cream</i>	1	EDS
<i>estradiol 10 mcg tab</i>	1	QL (0.7 EA PER DAY), EDS
<i>yuvafem</i>	1	QL (0.7 EA PER DAY), EDS

## VASOPRESSORS

### ANAPHYLAXIS THERAPY AGENTS

AUVI-Q	2	PA, QL (2 EA PER FILL), CDS, NP
<i>epinephrine (anaphylaxis)</i>	1	CDS
<i>epinephrine 0.15 mg/0.3ml soln, 0.3 mg/0.3ml soln</i>	1	PA, QL (2 EA PER FILL), MFG, CDS, NP
EPINEPHRINE 0.3 MG/0.3ML SOLN A-INJ	1	PA, QL (2 EA PER FILL), MFG, CDS, NP
<i>epinephrine 0.3 mg/0.3ml soln a-inj (mylan)</i>	1	QL (2 EA PER FILL), MFG, CDS, P
EPIPEN 2-PAK	1	QL (2 EA PER FILL), CDS, P
EPIPEN JR 2-PAK	1	QL (2 EA PER FILL), CDS, P
NEFFY	2	QL (2 EA PER FILL)
SYMJEPI	1	QL (2 EA PER FILL), CDS, P
<i>midodrine hcl</i>	1	

## VITAMINS

### OIL SOLUBLE VITAMINS

<i>beta-carotene</i>	1	OTC, EDS
BETA-CAROTENE	2	OTC
<i>phytonadione 5 mg tab</i>	1	
<i>vitamin a</i>	1	OTC, EDS
<i>vitamin d</i>	1	OTC, EDS

<b>DRUG NAME</b>	<b>DRUG TIER</b>	<b>REQUIREMENTS/LIMITS</b>
VITAMIN D	2	OTC
<i>vitamin e</i>	1	OTC, EDS
<b>WATER SOLUBLE VITAMINS</b>		
<i>biotin</i>	1	OTC, EDS
<i>calcium ascorbate</i>	1	OTC
<i>calcium panthothenate</i>	1	OTC, EDS
NIACIN	2	OTC, P
<i>niacin</i>	1	OTC, EDS, P
<i>niacinamide</i>	1	OTC, EDS
<i>pyridoxine (vitamin b6)</i>	1	OTC, EDS
<i>riboflavin (vitamin b2)</i>	1	OTC, EDS
<i>thiamine (vitamin b1)</i>	1	OTC, EDS
<i>vitamin c</i>	1	OTC, EDS
VITAMIN C	2	OTC

# Index

<b>A</b>	acid reducer.....	179	ADDERALL XR.....	15	
a+d first aid.....	117	ACIPHEX.....	179	adefovir dipivoxil.....	87
A+D FIRST AID.....	117	acitretin.....	112	ADEMPAS.....	94
a+d prevent original.....	117	ACTEMRA.....	25	adhesive tape.....	140
abacavir sulfate.....	85	ACTEMRA ACTPEN.....	25	ADLARITY.....	172
abacavir sulfate-lamivudine.....	85	ACTHIB.....	182	ADMELOG.....	57
abacavir-lamivudine- zidovudine.....	85	ACTIVATED CHARCOAL.....	20	ADMELOG SOLOSTAR.....	57
ABILIFY.....	84	activated charcoal.....	61	ADTHYZA.....	177
ABILIFY ASIMTUFII.....	84	ACTONEL.....	121	ADVAIR DISKUS.....	43
ABILIFY MAINTENA.....	84	ACULAR.....	161	ADVAIR HFA.....	43
ABILIFY MYCITE.....	84	ACULAR LS.....	161	advanced lubricant.....	159
abiraterone acetate.....	74	ACUVAIL.....	161	ADVATE.....	130
ABRILADA (1 PEN).....	21	acyclovir.....	89,114	ADYNOVATE.....	130
ABRILADA (2 PEN).....	21	acyclovir sodium.....	89	ADZENYS ER.....	15
ABRILADA (2 SYRINGE).....	21	ADACEL.....	177	ADZENYS XR-ODT.....	15
ABRYSVO.....	182	ADAKVEO.....	133	afirmelle.....	98
acamprosate calcium.....	171	ADALIMUMAB-AATY (1 PEN).....	21	AFLURIA PRESERVATIVE FREE.....	182
ACANYA.....	107	ADALIMUMAB-AATY (2 SYRINGE).....	21	AFREZZA.....	57
acarbose.....	54	ADALIMUMAB-ADAZ.....	21	AFSTYLA.....	130
ACCOLATE.....	42	ADALIMUMAB-ADBM (2 PEN).....	21	AIMOVIK.....	143
Accu-Chek Blood Glucose Meter.....	118	ADALIMUMAB-ADBM (2 SYRINGE).....	21	AIRDUO RESPICLICK 113/14.....	43
ACCU-CHEK SMARTVIEW.....	118	ADALIMUMAB-ADBM (2 SYRINGE).....	21	AIRDUO RESPICLICK 232/14.....	43
ACCUPRIL.....	67	ADALIMUMAB-ADBM (2 SYRINGE).....	21	AIRDUO RESPICLICK 55/14.....	43
accutane.....	107	ADALIMUMAB-ADBM (2 SYRINGE).....	21	AIRSUPRA.....	43
acebutolol hcl.....	90	ADALIMUMAB-ADBM (2 SYRINGE).....	21	AJOVY.....	143
acetaminophen (tylenol).....	28	ADALIMUMAB-ADBM (2 SYRINGE).....	21,22	ak-poly-bac.....	158
acetaminophen / caffeine / pyrilamine (MIDOL).....	28	ADALIMUMAB-ADBM (2 SYRINGE).....	21,22	AKEEGA.....	74
acetaminophen / diphenhydramine.....	136	ADALIMUMAB-FKJP (2 PEN).....	22	AKYNZEO.....	62
ACETAMINOPHEN- CODEINE.....	33	ADALIMUMAB-FKJP (2 SYRINGE).....	22	albendazole.....	37
acetaminophen-codeine.....	33	ADALIMUMAB-FKJP (2 SYRINGE).....	22	ALBUSTIX.....	118
acetazolamide.....	120	ADALIMUMAB-RYVK (2 PEN).....	22	ALBUTEROL SULFATE.....	43
acetazolamide er.....	120	ADALIMUMAB-RYVK (2 SYRINGE).....	22	albuterol sulfate.....	43
acetazolamide sodium.....	120	ADALIMUMAB-RYVK (2 SYRINGE).....	22	ALBUTEROL SULFATE ER.....	43
acetic acid.....	129,162	ADALIMUMAB-RYVK (2 SYRINGE).....	22	ALBUTEROL SULFATE HFA.....	43
acetylcysteine.....	107	adapalene.....	107	albuterol sulfate hfa.....	43
		adapalene treatment.....	107	alcohol swabs.....	143
		adapalene-benzoyl peroxide.....	107	ALCON TEARS.....	156
		ADBRY.....	115	ALECENSA.....	75
		ADCIRCA.....	94	alendronate sodium.....	121
				ALFALFA FLAVOR.....	165

alfuzosin hcl er.....	129	amethyst.....	98	AMPICILLIN SODIUM.....	164
aliskiren fumarate.....	70	amikacin sulfate.....	20	ampicillin sodium.....	164
allopurinol.....	130	amiloride hcl.....	121	ampicillin-sulbactam sodium.....	164
allopurinol sodium.....	130	amiloride- hydrochlorothiazide.....	120	AMPYRA.....	173
ALMOND OIL BITTER FLAVOR.....	165	AMILORIDE- HYDROCHLOROTHIAZIDE.....	120	AMZEEQ.....	108
almotriptan malate.....	144	aminoacetic acid.....	129	anagrelide hcl.....	132
ALOGLIPTIN BENZOATE.....	56	amiodarone hcl.....	40	anastrozole.....	74
ALOGLIPTIN-METFORMIN HCL.....	54	amitriptyline hcl.....	54	ANCOBON.....	62
ALOGLIPTIN- PIOGLITAZONE.....	54	AMJEVITA.....	22	ANISE EXTRACT.....	165
ALOMIDE.....	161	AMJEVITA-PED 15KG TO <30KG.....	22	ANISE FLAVOR.....	165
alosepron hcl.....	128	amlodipine besy-benazepril hcl.....	69	ANORO ELLIPTA.....	43
ALPHAGAN P.....	158	amlodipine besylate.....	91	ANTACID.....	36
ALPHANATE.....	130	amlodipine besylate-valsartan.....	69	ANTARA.....	65
ALPHANINE SD.....	130	amlodipine-atorvastatin.....	93	anti-dandruff shampoo.....	113
alprazolam.....	40	amlodipine-olmesartan.....	69	anti-itch lotion.....	112
ALPROLIX.....	130	amlodipine-valsartan-hctz.....	69	anucort-hc.....	36
ALREX.....	160	ammonium lactate (AMLACTIN).....	116	anusol-hc.....	36
altacaine.....	160	amnestem.....	108	ANZEMET.....	61
ALTACE.....	67	amoxapine.....	54	APIDRA.....	57
altavera.....	98	AMOXICILLIN.....	164	APIDRA SOLOSTAR.....	57
ALTOPREV.....	66	amoxicillin.....	164	ALENZIN.....	51
ALTRENO.....	108	AMOXICILLIN-POT CLAVULANATE.....	164	APLICARE POVIDONE-IODINE 10 % GEL.....	85
ALTUVIIIO.....	130	AMOXICILLIN-POT CLAVULANATE ER.....	164	APPLE FLAVOR.....	165
aluminum hydroxide (ALTERNAGEL).....	36	amoxicillin-pot clavulanate.....	164	APPLE FLAVOR WATER MISCIBLE.....	165
ALUNBRIG.....	75	AMOXICILLIN-POT CLAVULANATE ER.....	164	APRACLONIDINE HCL.....	158
ALVESCO.....	42	amphet-dextroamphet 3-bead er.....	15	apraclonidine hcl.....	158
alyacen 1/35.....	98	AMPHETAMINE ER.....	15	aprepitant.....	62
alyacen 7/7/7.....	98	amphetamine sulfate.....	15	APRETUDE.....	85
alyq.....	94	amphetamine-dextroamphet er.....	15	apri.....	98
amabelz.....	124	amphetamine- dextroamphetamine.....	15	APRICOT FLAVOR.....	165
amantadine hcl.....	80	AMPHOTERICIN B.....	62	APRISO.....	126
AMBIEN.....	136	ampicillin.....	164	APTENSIO XR.....	17
AMBIEN CR.....	136			APTIOM.....	47
ambrisentan.....	94			APTIVUS.....	85
AMERGE.....	144			aquastat.....	147
amethia.....	98			aquastat sfr.....	148
amethia lo.....	98			aranelle.....	98

ARCALYST.....	25	atenolol-chlorthalidone.....	69	AZASITE.....	158
AREXVY.....	182	atomoxetine hcl.....	17	azathioprine.....	149
arformoterol tartrate.....	43	ATORVALIQ.....	66	azelaic acid.....	118
argyle sterile saline.....	129	atorvastatin calcium.....	66	azelastine hcl.....	154,161
ARICEPT.....	172	atovaquone.....	38	azelastine-fluticasone.....	154
ARIKAYCE.....	20	atovaquone-proguanil hcl.....	71	azithromycin.....	139
aripiprazole.....	84	ATRALIN.....	108	AZOPT.....	161
ARISTADA.....	84	atropine sulfate.....	157,178	AZOR.....	69
ARISTADA INITIO.....	84	ATROPINE SULFATE (PF).....	178	AZSTARYS.....	18
ARIXTRA.....	45	ATROVENT HFA.....	41	aztreonam.....	38
armodafinil.....	17	AUBAGIO.....	173	AZULFIDINE.....	126
ARMOUR THYROID.....	177	aubra.....	98	AZULFIDINE EN-TABS.....	126
ARNUIITY ELLIPTA.....	42	aubra eq.....	98	azurette.....	98
ARTHROTEC.....	25	AUGTYRO.....	76	<b>B</b>	
artificial tear drops.....	156	aurovela 1.5/30.....	98	B COMPLEX-C-BIOTIN-E-FA.....	152
ASACOL HD.....	126	aurovela 1/20.....	98	b-12 (methylcobalamin).....	133
ascomp-codeine.....	33	aurovela 24 fe.....	98	bac.....	28
asenapine maleate.....	83	aurovela fe 1.5/30.....	98	bacim.....	37
ashlyna.....	98	aurovela fe 1/20.....	98	bacitra-neomycin-polymyxin- hc.....	160
ASMANEX HFA.....	42	AURYXIA.....	128	bacitracin.....	37,110
ASMANEX INHALATION POWDER.....	42	AUSTEDO.....	173	BACITRACIN.....	158
aspirin.....	28	AUSTEDO XR.....	173	bacitracin / polymyxin b (POLYSPORIN).....	110
aspirin (81 mg chew tab).....	28	AUSTEDO XR PATIENT TITRATION.....	173	BACITRACIN MICRONIZED.....	96
aspirin (81 mg tab dr).....	28	AUVELITY.....	51	bacitracin zinc.....	110
aspirin / acetaminophen / caffeine (EXCEDRIN).....	28	AUVI-Q.....	185	bacitracin-polymyxin b.....	158
aspirin / buffers (BUFFERIN).....	28	AVALIDE.....	69	baclofen.....	153
aspirin / sodium bicarb / citric acid (ALKA-SELTZER).....	28	AVAPRO.....	68	BACON FLAVOR.....	165
aspirin 325 mg delayed release.....	28	avar cleanser.....	108	BACTERIOSTATIC WATER(BENZ ALC).....	170
aspirin 500 mg.....	28	avar-e emollient.....	108	BAFIERTAM.....	173
aspirin suppository.....	28	avar-e green.....	108	balanced salt.....	161
aspirin-dipyridamole er.....	132	AVAR-E LS.....	108	balsalazide disodium.....	126
ASTAGRAF XL.....	149	aviane.....	98	BALVERSA.....	76
ATACAND.....	68	avita.....	108	balziva.....	98
ATACAND HCT.....	69	AVODART.....	129	BANANA CONCENTRATE.....	165
atazanavir sulfate.....	85	AVONEX PEN.....	173	BANANA CREAM FLAVOR.....	165
ATELVIA.....	121	AVONEX PREFILLED.....	173	BANANA CREME FLAVOR.....	165
atenolol.....	90	AVSOLA.....	126	BANANA FLAVOR.....	165
		ayuna.....	98		
		AYVAKIT.....	75		
		azasan.....	149		

bandages.....	140	benzoyl peroxide cleanser	BIOTIN-D.....	96
BANZEL.....	47	6%.....	bisacodyl.....	138
BAQSIMI ONE PACK.....	56	benzoyl peroxide pad.....	bisacodyl 10 mg suppository.....	138
BAQSIMI TWO PACK.....	56	benzoyl peroxide-erythromycin.....	bismuth subsalicylate.....	60
BARACLUDGE.....	87	erythromycin.....	BISMUTH SUBSALICYLATE.....	60
BASAGLAR KWIKPEN.....	57	benztropine mesylate.....	bismuth subsalicylate (PEPTO-BISMOL).....	60
BASAGLAR TEMPO PEN.....	57	BENZYL ALCOHOL.....	bisoprolol fumarate.....	90
BAXDELA.....	125	BENZYL BENZOATE.....	bisoprolol-hydrochlorothiazide.....	69
BCG VACCINE.....	182	BENZYL BENZOATE.....	BITTER DRUG.....	170
bd heparin posiflush.....	45	bepotastine besilate.....	BITTER STOP FLAVOR.....	165
BD INSULIN SYRINGE U-500.....	143	BEPREVE.....	BITTER-BLOC PURE.....	166
bd posiflush.....	148	BERINERT.....	BITTER-BLOC WS.....	166
bd posiflush safescrub.....	148	BESIVANCE.....	BITTER-BLOC WS CONCENTRATE.....	166
BEEF (GRILLED) FLAVOR OIL SOL.....	165	BETA-CAROTENE.....	BITTER-BLOC WS/OS LIQUID.....	166
BEEF BRAISED NATURAL FLAVOR.....	165	BETA-CAROTENE.....	BITTERNESS MASK FLAVOR.....	166
BEEF FLAVOR.....	165	BETAMETHASONE dipropionate.....	BITTERNESS REDUCING AGENT.....	166
BEEF TYPE FLAVOR NATURAL.....	165	betamethasone dipropionate.....	BITTERNESS SUPPRESSOR FLAVOR.....	166
BEEF TYPE FLAVOR OS.....	165	aug.....	BLACKBERRY FLAVOR.....	166
BEEF-ADE.....	165	BETAMETHASONE DIPROPIONATE AUG.....	BLEPHAMIDE.....	160
bekyree.....	98	betamethasone valerate.....	blisovi 24 fe.....	98
BELBUCA.....	33	BETAPACE.....	blisovi fe 1.5/30.....	98
BELSOMRA.....	137	BETAPACE AF.....	blisovi fe 1/20.....	98
benazepril hcl.....	67	BETASERON.....	blood glucose calibration liquid.....	141
benazepril-hydrochlorothiazide.....	69	betaxolol hcl.....	BLOOD ORANGE OS.....	166
BENEFIX.....	130	BETAXOLOL HCL.....	blood pressure monitoring device.....	140
BENICAR.....	68	bethanechol chloride.....	BLUEBERRY FLAVOR.....	166
BENICAR HCT.....	69	BETHKIS.....	BONIVA.....	121
BENLYSTA.....	150	BETIMOL.....	BONJESTA.....	62
BENZAACLIN WITH PUMP.....	108	BETOPTIC-S.....	BOOSTRIX.....	177
BENZAMYCIN.....	108	BEVESPI AEROSPHERE.....	bosentan.....	94
BENZNIDAZOLE.....	37	bexarotene.....	BOSULIF.....	76
BENZOCAINE.....	96	BEXSERO.....	bp 10-1.....	108
benzoin tincture.....	117	BEYFORTUS.....	BPO gel 4%, 8%.....	108
benzonatate.....	106	bicalutamide.....		
benzoyl peroxide.....	108	BIKTARVY.....		
		bimatoprost.....		
		BIMZELX.....		
		bioflavonoids.....		
		BIOFLAVONOIDS.....		
		BIOTIN.....		
		biotin.....		

BRAFTOVI	76	bupropion hcl	51	calcium / vitamin C / vitamin D	145	
BREO ELLIPTA	43	bupropion hcl er (smoking det)	51	calcium / vitamin D / vitamin K	145	
breyana	43	bupropion hcl er (sr)	51	CALCIUM / VITAMIN D / VITAMIN K	145	
BREZTRI AEROSPHERE	43	BUPROPION HCL ER (XL)	51	calcium acetate	128	
briellyn	98	bupropion hcl er (xl)	51	calcium acetate (phos binder)	128	
BRILINTA	132	buspirone hcl	39	calcium ascorbate	186	
brimonidine tartrate	158	butalbital-acetaminophen	28	CALCIUM CARBONATE	145	
brimonidine tartrate-timolol	157	butalbital-apap-caff-cod	33	calcium carbonate	146	
brinzolamide	161	butalbital-apap-caffeine	28	calcium carbonate (TUMS)	37	
BRISDELLE	175	butalbital-asa-caff-codeine	33	calcium carbonate / folic acid / vitamin D	146	
BRIUMVI	173	butalbital-aspirin-caffeine	28	calcium carbonate / magnesium hydroxide (MYLANTA SUPREME)	36	
BRIVIACT	47	BUTALBITAL-ASPIRIN-CAFFEINE	28	calcium carbonate / vitamin D	146	
BRIXADI	34	BUTTER FLAVOR	166	CALCIUM CARBONATE / VITAMIN D	146	
BRIXADI (WEEKLY)	33,34	BUTTER RUM FLAVOR	166	calcium carbonate / vitamin D / minerals	146	
bromfed dm	106	BUTTERSCOTCH FLAVOR	166	CALCIUM CITRATE	146	
bromfenac sodium	161	BYDUREON BCISE	56	calcium citrate	146	
bromfenac sodium (once-daily)	161	BYETTA 10 MCG PEN	56	CALCIUM CITRATE / VITAMIN D	146	
bromocriptine mesylate	80	BYETTA 5 MCG PEN	56	calcium citrate / vitamin D	146	
bromphen-pseudoeph-dm	106	<b>C</b>			calcium carbonate / vitamin D / minerals	146
brompheniramine / phenylephrine	106	CABENUVA	85	CALCIUM CITRATE	146	
brompheniramine / pseudoephedrine	106	cabergoline	124	calcium citrate / vitamin D	146	
BROMSITE	161	CABLIVI	132	calcium panthothenate	186	
BROVANA	43	CABOMETYX	76	calcium polycarbophil (fiber laxative)	137	
BRUKINSA	76	CABTREO	108	CALQUENCE	76	
BUBBLE GUM CONCENTRATE	166	CADUET	93	camila	104	
BUBBLE GUM FLAVOR	166	CAFFEINE-SODIUM BENZOATE	16	camphor / menthol / methyl salicylate (SALONPAS)	116	
BUBBLE GUM OS	166	calamine	117	camrese	98	
BUBBLE GUM WS	166	calamine / zinc oxide	117	camrese lo	98	
budesonide	35,42,104	CALAN SR	91	CAMZYOS	93	
budesonide er	105	calcipotriene	112	CANASA	126	
budesonide-formoterol fumarate	43	CALCIPOTRIENE	112	candesartan cilexetil	68	
bumetanide	121	calcitonin (salmon)	121	candesartan cilexetil-hctz	69	
buprenorphine	34	calcitriol	123	capecitabine	72	
buprenorphine hcl	34	calcium / magnesium / zinc	145	CAPLYTA	81	
buprenorphine hcl-naloxone hcl	34	calcium / phosphorus / vitamin D	145			

CAPRELSA.....	76	CAYA.....	141	CHEESE-ADE FLAVOR.....	166
capsaicin (ZOSTRIX).....	116	CAYSTON.....	38	CHEESECAKE FLAVOR.....	166
CAPSORAL W/DYNAMIC STATIC GRD.....	170	caziant.....	98	CHEMET.....	60
CAPSUBLEND-H.....	170	CEFACLOR.....	95	CHEMSTRIP 10 MD.....	118
CAPSUBLEND-P.....	170	CEFACLOR ER.....	95	CHEMSTRIP 10/SG.....	118
CAPSUBLEND-S.....	170	CEFADROXIL.....	95	CHEMSTRIP 2 GP.....	118
captopril.....	67	cefadroxil.....	95	CHEMSTRIP 5 OB.....	118
CAPTOPRIL- HYDROCHLOROTHIAZIDE.....	69	cefazolin sodium.....	95	CHEMSTRIP 7.....	119
CAPVAXIVE.....	182	CEFAZOLIN SODIUM- DEXTROSE.....	95	CHEMSTRIP 9.....	119
CARAMEL FLAVOR.....	166	cefdinir.....	95	CHEMSTRIP K.....	119
CARAMEL OS.....	166	cefepime hcl.....	96	CHEMSTRIP MICRAL.....	119
carbamazepine.....	47	CEFEPIME HCL.....	96	CHERRY.....	170
CARBAMAZEPINE.....	47	cefixime.....	95	CHERRY CONCENTRATE...	170
carbamazepine er.....	47	cefoxitin sodium.....	95	CHERRY FLAVOR.....	166
carbamide peroxide (DEBROX).....	162	cefpodoxime proxetil.....	95	CHERRY-ADE FLAVOR.....	166
carbidopa-levodopa.....	80	cefprozil.....	95	CHICKEN (GRILLED) FLAVOR.....	166
CARBIDOPA-LEVODOPA...	80	ceftazidime.....	95	CHICKEN BROTH FLAVOR..	166
carbidopa-levodopa er.....	80	ceftriaxone sodium.....	95	CHICKEN CONC FLAVOR...	166
carbidopa-levodopa- entacapone.....	80	cefuroxime axetil.....	95	CHICKEN FLAVOR.....	166
CARBIDOPA-LEVODOPA- ENTACAPONE.....	80	cefuroxime sodium.....	95	CHICKEN FLAVOR OIL MISCIBLE.....	166
carbinoxamine maleate.....	63	CELEBREX.....	25	CHICKEN FLAVOR OIL SOLUBLE.....	166
CARBINOXAMINE MALEATE.....	63	celecoxib.....	25	CHICKEN FLAVOR WATER MISCIBLE.....	166
CARDIZEM.....	91	CELEXA.....	52	CHICKEN ROASTED CONCENTRATE.....	167
CARDIZEM CD.....	91	CELLCEPT.....	149	CHILDRENS COLD- ALLERGY.....	106
CARDIZEM LA.....	91	CELLULOSE.....	96	CHLORDIAZEPOXIDE- AMITRIPTYLINE.....	172
CARDURA.....	68	cellulose (UNIFIBER).....	137	chlorhexidine gluconate...	84,150
CARDURA XL.....	129	CELONTIN.....	50	chlorprocaine hcl (pf).....	139
carglumic acid.....	123	CENTANY.....	110	chloroquine phosphate.....	71
CARTEOLOL HCL.....	157	CENTANY AT.....	110	chlorpheniramine.....	63
cartia xt.....	91	cephalexin.....	95	chlorpheniramine / phenylephrine.....	106
carvedilol.....	89	CEQUA.....	159	chlorpheniramine / phenylephrine / acetaminophen.....	106
carvedilol phosphate er.....	89	CERDELGA.....	133		
cataflam.....	25	cetirizine (ZYRTEC).....	64		
CATHFLO ACTIVASE.....	133	cetirizine / pseudoephedrine (ZYRTEC – D).....	106		
cavarest.....	151	cetirizine chew tab (ZYRTEC).....	64		
		cevimeline hcl.....	151		
		charlotte 24 fe.....	99		
		chateal.....	99		
		chateal eq.....	99		



chlorpheniramine / phenylephrine / aspirin.....	106	citalopram hydrobromide.....	52	clobazam.....	46
chlorpheniramine / pseudoephedrine.....	106	CITALOPRAM HYDROBROMIDE.....	52	clobetasol prop emollient base.....	114
chlorpromazine hcl.....	83	CITRIC ACID.....	97	clobetasol propionate.....	114
chlorthalidone.....	121	CITRIC ACID ANHYDROUS.....	97	clobetasol propionate e.....	114
chlorzoxazone.....	153	CITRIC ACID MONOHYDRATE.....	97	clomipramine hcl.....	54
CHOCOLATE CONCENTRATE.....	167	claravis.....	108	clonazepam.....	46
CHOCOLATE FLAVOR.....	167	CLARINEX.....	64	clonidine.....	68
CHOCOLATE HAZELNUT FLAVOR.....	167	CLARINEX-D 12 HOUR.....	106	clonidine hcl.....	68
CHOCOLATE NATURAL & ARTIFICIAL.....	167	CLARITHROMYCIN.....	139	clonidine hcl er.....	17
cholestyramine.....	65	clarithromycin.....	139	clopidogrel bisulfate.....	132
cholestyramine light.....	65	clarithromycin er.....	139	clorazepate dipotassium.....	40
CHROMIUM.....	148	clemastine fumarate.....	63	clotrimazole.....	150
chromium.....	148	CLEMASTINE FUMARATE.....	63	clotrimazole (GYNE-LOTRIMIN).....	184
ciclodan.....	110	CLENIA PLUS.....	108	clotrimazole (LOTRIMIN).....	110
ciclopirox.....	110	clindacin.....	108	clotrimazole-betamethasone.....	110
ciclopirox olamine.....	110	clindacin etz.....	108	CLOTRIMAZOLE-BETAMETHASONE.....	110
cilostazol.....	132	clindacin-p.....	108	clovique.....	148
CILOXAN.....	158	clindamycin hcl.....	38	CLOZAPINE.....	83
CIMDUO.....	85	clindamycin palmitate hcl.....	38	clozapine.....	83
cimetidine.....	178	clindamycin phos-benzoyl perox.....	108	CLOZARIL.....	83
CIMZIA.....	126	clindamycin.....	38,108,184	COAGADEX.....	130
CIMZIA (2 SYRINGE).....	126	clindamycin-tretinoin.....	108	coal tar.....	118
CIMZIA-STARTER.....	126	CLINIMIX E/DEXTROSE.....	155	COARTEM.....	71
cinacalcet hcl.....	123	CLINIMIX/DEXTROSE (4.25/10).....	155	COCOA BUTTER.....	171
CINNAMON FLAVOR.....	167	CLINIMIX/DEXTROSE (4.25/5).....	155	COCONUT FLAVOR.....	167
CINQAIR.....	41	CLINIMIX/DEXTROSE (5/15).....	155	COFFEE FLAVOR.....	167
CINRYZE.....	132	CLINIMIX/DEXTROSE (5/20).....	155	COLA FLAVOR.....	167
CIPRO.....	125	CLINIMIX/DEXTROSE (6/5).....	156	COLAZAL.....	127
CIPRO HC.....	163	CLINIMIX/DEXTROSE (8/10).....	156	colchicine.....	130
ciprofloxacin.....	125	CLINIMIX/DEXTROSE (8/14).....	156	colchicine-probenecid.....	130
CIPROFLOXACIN HCL.....	125	clinpro 5000.....	151	colesevelam hcl.....	65
ciprofloxacin hcl.....	125,158,162			COLESTID.....	65
ciprofloxacin-dexamethasone.....	163			colestipol hcl.....	65
CIPROFLOXACIN-FLUOCINOLONE PF.....	163			colistimethate sodium (cba).....	39
				COMBIGAN.....	157
				COMBIVENT RESPIMAT.....	43
				COMETRIQ (100 MG DAILY DOSE).....	76

COMETRIQ (140 MG DAILY DOSE).....	76	CRANBERRY SUPPLEMENT 20	CYLTEZO.....	22
COMETRIQ (60 MG DAILY DOSE).....	76	cranberry supplement.....	CYLTEZO (2 PEN).....	22
COMIRNATY.....	182	CREME DE MENTHE FLAVOR.....	CYLTEZO (2 SYRINGE).....	22
COMPLERA.....	85	CREME DEMENTHE FLAVOR.....	CYLTEZO-CD/UC/HS STARTER.....	22
compro.....	83	CREME OS.....	CYLTEZO-PSORIASIS STARTER.....	22
CONCERTA.....	18	CREON.....	CYLTEZO-PSORIASIS/UV STARTER.....	22
constulose.....	138	CRESEMBA.....	CYMBALTA.....	53
Contour Blood Glucose Meter.....	141	CRESTOR.....	cyproheptadine hcl.....	64
CONTOUR MONITOR DEVICE.....	141	CRIXIVAN.....	cyred.....	99
CONTOUR NEXT TEST.....	119	cromolyn (NASALCROM).....	cyred eq.....	99
CONTOUR PLUS TEST.....	119	cromolyn sodium.....	CYSTAGON.....	129
CONTOUR TEST.....	119	CROMOLYN SODIUM.....	CYSTARAN.....	161
CONZIP.....	29	CROTAN.....	cytra-2.....	129
COPAXONE.....	173	cryselle-28.....		
COPIKTRA.....	76	CRYSVITA.....	<b>D</b>	
COREG.....	89	curity sterile saline.....	dabigatran etexilate mesylate..	46
CORGARD.....	90	CUSTOM POLYGLYCOL TROCHE BASE.....	dalfampridine er.....	173
CORIFACT.....	131	CUVITRU.....	DALIRESP.....	42
corn dextrin powder.....	137	cvs adapalene.....	danazol.....	35
CORTISONE ACETATE.....	105	cvs esomeprazole magnesium.....	dantrolene sodium.....	154
CORTISPORIN-TC.....	163	CVS EYE.....	DAPAGLIFLOZIN PRO-METFORMIN ER.....	54
COSENTYX.....	112	cvs glucosamine.....	DAPAGLIFLOZIN PROPANEDIOL.....	59
COSENTYX (300 MG DOSE).....	112	CVS KETONE CARE.....	dapsone.....	38,109
COSENTYX SENSOREADY (300 MG).....	112	cvs mineral oil enema.....	DAPTACEL.....	177
COSENTYX SENSOREADY PEN.....	112	cvs multi-purpose.....	daptomycin.....	38
COSENTYX UNOREADY.....	112	cvs omeprazole.....	darifenacin hydrobromide er..	181
COSOPT.....	157	cvs omeprazole magnesium.....	dasatinib.....	76
COSOPT PF.....	157	cvs omeprazole-sod bicarbonate.....	dasetta 1/35.....	99
COTELLIC.....	76	cvs pinworm treatment.....	dasetta 7/7/7.....	99
COTEMPLA XR-ODT.....	18	cyclafem 1/35.....	DAURISMO.....	73
COTTON CANDY FLAVOR.....	167	cyclafem 7/7/7.....	DAYPRO.....	25
COZAAR.....	68	cyclobenzaprine hcl.....	daysee.....	99
CRAN-RASPBERRY FLAVOR.....	167	cyclophosphamide.....	DAYTRANA.....	18
		CYCLOPHOSPHAMIDE.....	DAYVIGO.....	137
		cyclosporine.....	deblitane.....	104
		cyclosporine modified.....	decadron.....	105

deferasirox.....	60	DEXCOM G4 PLAT PED	DEXYCU.....	160
deferasirox granules.....	60	RCV/SHARE.....	DHIVY.....	81
DELSTRIGO.....	85	DEXCOM G4 PLAT PED	DIACOMIT.....	47
delyla.....	99	RECEIVER.....	diaper rash products.....	115
DENAVIR.....	114	DEXCOM G4 PLATINUM	diapers.....	142
DENGVAXIA.....	182	RCV/SHARE.....	diazepam.....	40
denta 5000 plus.....	151	DEXCOM G4 PLATINUM	DIAZEPAM.....	46
DENTA 5000 PLUS		RECEIVER.....	diazepam intensol.....	40
SENSITIVE.....	151	DEXCOM G4 PLATINUM	diazoxide.....	56
dentagel.....	151	TRANSMITTER.....	DICLEGIS.....	62
DEPAKOTE.....	50	DEXCOM G5 MOB/G4 PLAT	DICLOFENAC EPOLAMINE..	110
DEPAKOTE ER.....	51	SENSOR.....	diclofenac potassium.....	26
DEPAKOTE SPRINKLES....	51	DEXCOM G5 MOBILE	diclofenac sodium....	26,112,161
depo-testosterone.....	35	RECEIVER.....	diclofenac sodium 1 % gel....	110
dermamed.....	117	DEXCOM G5 MOBILE	diclofenac sodium er.....	26
DESCOVY.....	85	TRANSMITTER.....	diclofenac-misoprostol.....	26
desipramine hcl.....	54	DEXCOM G5 RECEIVER	dicloxacillin sodium.....	165
DESLORATADINE.....	64	KIT.....	dicyclomine hcl.....	178
desloratadine.....	64	DEXCOM G6 RECEIVER...	DIDANOSINE.....	85
desmopressin ace spray		DEXCOM G6 SENSOR.....	DIFICID.....	140
refrig.....	123	DEXCOM G6	DIFLUCAN.....	63
desmopressin acetate.....	124	TRANSMITTER.....	diflunisal.....	28
desmopressin acetate pf....	124	DEXCOM G7 RECEIVER...	difluprednate.....	160
desmopressin acetate		DEXCOM G7 SENSOR.....	digitek.....	92
spray.....	124	DEXILANT.....	digox.....	92
desogestrel-ethinyl estradiol.	99	dexlansoprazole.....	digoxin.....	92,93
desonide.....	114	dexmethylphenidate hcl.....	DILANTIN.....	50
desvenlafaxine succinate er..	53	dexmethylphenidate hcl er....	DILANTIN INFATABS.....	50
DETROL.....	181	DEXTENZA.....	DILANTIN-125.....	50
dexamethasone.....	105	dextran 70/he-cell drops	dilt-xr.....	91
DEXAMETHASONE.....	105	(GENTEAL TEARS).....	diltiazem hcl.....	91
DEXAMETHASONE		dextroamphetamine sulfate15,16	diltiazem hcl er.....	91
INTENSOL.....	105	dextroamphetamine sulfate er.16	diltiazem hcl er beads.....	91
DEXAMETHASONE SOD		dextromethorphan	diltiazem hcl er coated beads..	91
PHOS +RFID.....	105	(ROBITUSSIN).....	dimenhydrinate (DRAMAMINE)62	
dexamethasone sod phosphate		dextromethorphan /	dimethicone.....	117
pf.....	105	phenylephrine /	DIMETHICONE CREAM.....	117
dexamethasone sodium		acetaminophen.....	dimethyl fumarate.....	173
phosphate.....	105	DEXTROSE.....	dimethyl fumarate starter	
DEXAMETHASONE SODIUM		dextrose in lactated ringers..	pack.....	173
PHOSPHATE.....	160	dextrose-sodium chloride....	DIOVAN.....	68

DIOVAN HCT.....	69	doxylamine /	EFFEXOR XR.....	53
DIPENTUM.....	127	dextromethorphan.....	EFFIENT.....	132
diphenhydramine		doxylamine-pyridoxine.....	ELECTROLYTE SOLUTION.....	146
(BENADRYL).....	63	DRIZALMA SPRINKLE.....	electrolyte solution.....	146
diphenhydramine (sleep).....	63	dronabinol.....	eletriptan hydrobromide.....	144
DIPHENHYDRAMINE		drosipren-eth estrad-	elinest.....	99
(SLEEP).....	136	levomefol.....	ELIQUIS.....	45
diphenhydramine / zinc.....	112	drosiprenone-ethinyl estradiol.....	ELIQUIS DVT/PE STARTER	
diphenoxylate-atropine.....	60	DROXIA.....	PACK.....	45
DIPHENOXYLATE-		DRYSOL.....	ELLA.....	104
ATROPINE.....	60	DUAKLIR PRESSAIR.....	ELOCTATE.....	131
diphenhydramine.....	63	DUETACT.....	eluryng.....	104
DIPHThERIA-TETANUS		DULERA.....	ELYXYB.....	144
TOXOIDS DT.....	177	duloxetine hcl.....	EMCYT.....	74
dipyridamole.....	132	DUPIXENT.....	EMGALITY.....	143
disopyramide phosphate.....	40	DURAGESIC-100.....	EMGALITY (300 MG DOSE).....	143
disulfiram.....	171	DURAGESIC-12.....	emollient.....	114
DITROPAN XL.....	181	DURAGESIC-25.....	EMOLLIENT.....	116
divalproex sodium.....	51	DURAGESIC-50.....	emoquette.....	99
divalproex sodium er.....	51	DURAGESIC-75.....	emtricitabine.....	85
docusate calcium		DUREZOL.....	emtricitabine-tenofovir df.....	86
(SURFAK).....	138	DURYSTA.....	EMTRIVA.....	86
docusate sodium		dutasteride.....	emzahn.....	104
(COLACE).....	138	dutasteride-tamsulosin hcl.....	ENABLEX.....	181
dofetilide.....	40	DYANA VEL XR.....	enalapril maleate.....	67
dolishale.....	99	DYMISTA.....	enalapril-hydrochlorothiazide.....	69
donepezil hcl.....	172	<b>E</b>	ENBREL.....	27,28
DOPTELET.....	133	E.E.S. GRANULES.....	ENBREL MINI.....	28
dorzolamide hcl.....	161	ec-naproxen.....	ENBREL SURECLICK.....	28
dorzolamide hcl-timolol mal.....	157	econazole nitrate.....	ENDARI.....	133
dorzolamide hcl-timolol mal		ECTOSEAL P2G.....	endocet.....	33
pf.....	157	ed-spaz.....	enema.....	138
dotti.....	125	EDARBI.....	ENEMA.....	138
DOVATO.....	85	EDARBYCLOR.....	enema mineral oil.....	138
doxazosin mesylate.....	68	EDLUAR.....	ENGERIX-B.....	182
doxepin hcl.....	54	EDURANT.....	ENGLISH TOFFEE FLAVOR.....	167
doxy 100.....	176	EFAVIRENZ.....	enilloring.....	104
doxycycline hyclate.....	176	efavirenz.....	enoxaparin sodium.....	45
doxycycline monohydrate.....	176	efavirenz-emtricitab-tenofo df.....	enpresse-28.....	99
doxylamine (sleep).....	136	efavirenz-lamivudine-tenofovir.....	enskyce.....	99
DOXYLAMINE (SLEEP).....	136		ENSPRYNG.....	149

entacapone.....	80	ERYPED 400.....	139	eyelid cleansers.....	117
ENTADFI.....	129	ERYTHROCIN STEARATE..	139	EYSUVIS.....	160
entecavir.....	87	erythromycin.....	109,139,158	EZALLOR SPRINKLE.....	66
ENTOCORT EC.....	105	ERYTHROMYCIN BASE....	140	ezetimibe.....	66
ENTRESTO.....	93	erythromycin base.....	140	ezetimibe-simvastatin.....	64
ENTYVIO.....	127	erythromycin ethylsuccinate	140		
enulose.....	128	ESBRIET.....	176	<b>F</b>	
ENVARUSUS XR.....	149	escitalopram oxalate.....	52	FABIOR.....	109
EPANED.....	67	esgic.....	28	FAGRON CAPFILL PRO.....	171
EPCLUSA.....	87	esomeprazole magnesium...	179	FAGRON DISPERSAPRO....	171
EPIDIOLEX.....	47	ESPEROCT.....	131	falmina.....	99
epinastine hcl.....	161	estarylla.....	99	famciclovir.....	89
epinephrine.....	185	estradiol.....	125,185	famotidine (PEPCID).....	178
EPINEPHRINE.....	185	estradiol valerate.....	125	FAMOTIDINE PREMIXED....	178
epinephrine (anaphylaxis)..	185	estradiol-norethindrone acet	124	FANAPT.....	82
epinephrine 0.3 mg/0.3ml soln		eszopiclone.....	136	FANAPT TITRATION PACK...	82
a-inj (MYLAN).....	185	ethambutol hcl.....	71	FARXIGA.....	60
EPIPEN 2-PAK.....	185	ethosuximide.....	50	FASENRA.....	41
EPIPEN JR 2-PAK.....	185	ethynodiol diac-eth estradiol..	99	FASENRA PEN.....	41
epitol.....	47	etodolac.....	26	fayosim.....	99
EPIVIR HBV.....	88	etodolac er.....	26	febuxostat.....	130
eplerenone.....	70	etonogestrel-ethinyl estradiol	104	FEIBA.....	131
EPOGEN.....	133	ETOPOSIDE.....	80	felbamate.....	49
epoprostenol sodium.....	93	etravirine.....	86	FELBATOL.....	49
EPRONTIA.....	47	EUCALYPTUS FLAVOR.....	167	felodipine er.....	91
EPROSARTAN MESYLATE..	68	EUCRISA.....	117	female condoms.....	141
eq esomeprazole		EUGENOL FLAVOR.....	167	FEMCAP.....	141
magnesium.....	179	euthyrox.....	177	FEMLYV.....	99
eq omeprazole magnesium.	179	EVEKEO.....	16	femynor.....	99
EQUETRO.....	81	EVEKEO ODT.....	16	fenofibrate.....	65
ERGOLOID MESYLATES..	175	EVENITY.....	121	FENOFIBRATE.....	65
ERIVEDGE.....	73	everolimus.....	76,149	FENOFIBRATE MICRONIZED..	65
ERLEADA.....	74	EVISTA.....	123	fenofibrate micronized.....	65
erlotinib hcl.....	73	EVKEEZA.....	64	FENOFIBRIC ACID.....	65
errin.....	104	EVOTAZ.....	86	fenofibric acid.....	65
ERTACZO.....	111	EVRYSDI.....	155	FENOGLIDE.....	65
ertapenem sodium.....	38	EXELON.....	172	fenoprofen calcium.....	26
ERVEBO.....	182	exemestane.....	74	fentanyl.....	29
ERY.....	109	EXFORGE.....	69	FENTANYL CITRATE.....	29
ery-tab.....	139	EXFORGE HCT.....	69	fentanyl citrate.....	29
ERYPED 200.....	139	EXTAVIA.....	173	FerraPlus 90.....	134

FERREX.....	134	FLECTOR.....	110	FLUTICASONE FUROATE-
FERREX 150 FORTE.....	134	FLOMAX.....	129	VILANTEROL.....
Ferrex 150 Forte Plus.....	134	FLUAD.....	182	fluticasone propionate....
Ferrex 28.....	134	FLUARIX.....	182	FLUTICASONE PROPIONATE
ferrous fumarate / folic acid	134	FLUARIX QUADRIVALENT	182	DISKUS.....
ferrous fumarate / vitamin B12 /		FLUBLOK.....	183	FLUTICASONE PROPIONATE
vitamin C.....	134	FLUBLOK QUADRIVALENT	183	HFA.....
ferrous fumarate / vitamin C /		FLUCELVAX.....	183	fluticasone-salmeterol.....
vitamin B12 / folic acid.....	134	fluconazole.....	63	FLUTICASONE-
FERROUS FUMARATE		fluconazole in sodium chloride	63	SALMETEROL.....
POLYSACCHARIDE		flucytosine.....	62	fluvastatin sodium.....
COMPLEX.....	134	fludrocortisone acetate.....	106	fluvastatin sodium er.....
ferrous fumarate		FLULAVAL.....	183	fluvoxamine maleate.....
polysaccharide complex....	134	FLULAVAL		fluvoxamine maleate er.....
ferrous gluconate.....	135	QUADRIVALENT.....	183	FLUZONE.....
FERROUS GLUCONATE.....	135	FLUMIST.....	183	FLUZONE HIGH-DOSE.....
ferrous sulfate.....	135	flunisolide.....	154	FLUZONE HIGH-DOSE
FERROUS SULFATE.....	135	fluocinolone acetonide..	115,163	QUADRIVALENT.....
fesoterodine fumarate er....	181	fluocinolone acetonide body	115	FLUZONE QUADRIVALENT
FETZIMA.....	53	fluocinolone acetonide scalp	115	FOCALIN.....
FETZIMA TITRATION.....	53	fluocinonide.....	115	FOCALIN XR.....
fexofenadine (ALLEGRA)....	64	fluoridex.....	151	folic acid / vitamin B6 / vitamin
FIASP.....	57	fluoridex enhanced		B12 / omega-3.....
FIASP FLEXTOUCH.....	57	whitening.....	151	folic acid / vitamin D.....
FIASP PENFILL.....	57	FLUORIDEX SENSITIVITY		FOLIC ACID 1 MG.....
FIASP PUMPCART.....	57	RELIEF.....	151	folic acid 400 mcg/800 mcg...
FIBRICOR.....	65	fluorimax 5000.....	151	FOLIVANE-F.....
finasteride.....	129	FLUORIMAX 5000		FOLIVANE-PLUS.....
fingolimod hcl.....	173	SENSITIVE.....	151	fondaparinux sodium.....
FINTEPLA.....	47	fluorometholone.....	160	FORA G20 BLOOD GLUCOSE
finzala.....	99	fluorouracil.....	72,112	TEST.....
FIRAZYR.....	131	FLUOROURACIL.....	112	FORA GTEL BLOOD KETONE
FIRDAPSE.....	71	fluoxetine hcl.....	52	TEST.....
FISH FLAVOR.....	167	FLUOXETINE HCL.....	52	FORA TEST N'GO ADV-VOICE-
flac.....	163	FLUOXETINE HCL (PMDD)	175	6 CON.....
FLAVOR CONC-		fluphenazine decanoate....	83	FORFIVO XL.....
CHLORHEXIDINE.....	167	fluphenazine hcl.....	84	formoterol fumarate.....
flavor syrup.....	170	FLUPHENAZINE HCL.....	84	FORTEO.....
FLAVORX.....	167	flurbiprofen.....	26	FOSAMAX.....
flavoxate hcl.....	181	FLURBIPROFEN SODIUM..	161	FOSAMAX PLUS D.....
flecainide acetate.....	40	flutamide.....	74	fosamprenavir calcium.....

foscarnet sodium.....	87	fyavolv.....	124	glipizide.....	60
fosfomycin tromethamine....	39	FYCOMPA.....	46	glipizide er.....	60
fosinopril sodium.....	67	<b>G</b>		glipizide xl.....	60
fosinopril sodium-hctz.....	69	gabapentin.....	47	glipizide-metformin hcl.....	55
fosphenytoin sodium.....	50	galantamine hydrobromide...172		glitch advanced relief.....	159
FOSRENOL.....	128	GALANTAMINE		GLUCAGEN DIAGNOSTIC...118	
FOTIVDA.....	76	HYDROBROMIDE.....	172	GLUCAGEN HYPOKIT.....	56
FRAGMIN.....	45	galantamine hydrobromide		GLUCAGON EMERGENCY...56	
fraiche 5000 dental.....	151	er.....	172	GLUCAGON HCL	
fraiche rinse.....	151	gallifrey.....	171	(DIAGNOSTIC).....	118
FREEDOM SIMPLECAP....	171	GAMMAGARD.....	163	GLUCOCARD EXPRESSION	
FREESTYLE INSULINX		GAMUNEX-C.....	163	TEST.....	119
TEST.....	119	GARDASIL 9.....	183	GLUCOCARD SHINE TEST..119	
FREESTYLE LIBRE 14 DAY		gatifloxacin.....	158	glucosamine / chondroitin.....20	
READER.....	141	gauze pads and dressings...140		glucosamine hcl.....	20
FREESTYLE LIBRE 14 DAY		GAVILYTE-C.....	137	glucosamine sulfate.....	20
SENSOR.....	142	gavilyte-g.....	137	glucose (Dextrose).....	56
FREESTYLE LIBRE 2 PLUS		gavilyte-n with flavor pack...137		glucose urine test.....	119
SENSOR.....	142	GAVRETO.....	76	glyburide.....	60
FREESTYLE LIBRE 2		gefitinib.....	73	glyburide-metformin.....	55
READER.....	142	GELOCAST 3"X10YD.....	140	GLYCERIN.....	97
FREESTYLE LIBRE 2		gemfibrozil.....	65	glycerin suppository.....	138
SENSOR.....	142	gemmily.....	99	glycerin topical liquid.....116	
FREESTYLE LIBRE 3 PLUS		GEMTESA.....	181	glycine.....	129
SENSOR.....	142	generlac.....	128	glycine urologic.....	129
FREESTYLE LIBRE 3		gengraf.....	149	glycopyrrolate.....	178
READER.....	142	GENOTROPIN.....	122	glydo.....	116
FREESTYLE LIBRE 3		GENOTROPIN MINIQUICK..122		GLYXAMBI.....	55
SENSOR.....	142	gentamicin sulfate...20,110,158		gnp esomeprazole	
FREESTYLE LIBRE		GENTEAL SEVERE.....	156	magnesium.....	179
READER.....	142	GENVOYA.....	86	gnp omeprazole.....	179
FREESTYLE LITE TEST...119		GEODON.....	82	GOCOVRI.....	81
FREESTYLE TEST.....	119	gianvi.....	99	GOJJI BLOOD KETONE	
FROVA.....	144	GILENYA.....	173	TEST.....	119
frovatriptan succinate.....	144	GILOTRIF.....	73	goodsense esomeprazole...179	
FRUZAQLA.....	72	GIMOTI.....	126	goodsense omeprazole/sod bicarb..180	
ft acid reducer.....	179	glatiramer acetate.....173,174		GRALISE.....	175
ft enema mineral oil.....	138	glatopa.....	174	granisetron hcl.....	61
ft eye drops advanced relief.159		GLEOSTINE.....	72	GRANIX.....	133
furosemide.....	121	glimepiride.....	60	GRAPE CONCORD OS.....	167
FUROSEMIDE.....	121			GRAPE FLAVOR.....	167

GRAPEFRUIT FLAVOR.....	167	heather.....	104	HUMALOG MIX 75/25	
GREEN APPLE OS.....	167	HEMANGEOL.....	90	KWIKPEN.....	58
griseofulvin microsize.....	62	HEMATOGEN FA.....	135	HUMALOG TEMPO PEN.....	58
griseofulvin ultramicrosize.....	62	HemeTab.....	135	HUMATE-P.....	131
guaifenesin (MUCINEX).....	107	HEMLIBRA.....	131	HUMATROPE.....	122
guaifenesin / codeine.....	106	hemmorex-hc.....	36	HUMIRA.....	23
guaifenesin / dextromethorphan		HEMOFIL M.....	131	HUMIRA (2 PEN).....	23
(MUCINEX DM).....	106	hemorrhoidal cream.....	35	HUMIRA (2 SYRINGE).....	23
GUAIFENESIN /		hemorrhoidal ointment.....	35	HUMIRA-CD/UC/HS	
DEXTROMETHORPHAN /		hemorrhoidal suppository.....	36	STARTER.....	23
PHENYLEPHRINE.....	106	heparin (porcine) in nacl.....	45	HUMIRA-PED<40KG CROHNS	
guaifenesin / dextromethorphan		HEPARIN NA (PORK) LOCK		STARTER.....	23
/ pseudoephedrine.....	107	FLSH PF.....	45	HUMIRA-PED>=40KG CROHNS	
GUAIFENESIN/		heparin na (pork) lock flsh pf..	45	START.....	23
DEXTROMETHORPHAN/		heparin sod (pork) lock flush..	46	HUMIRA-PED>=40KG UC	
PHENYLEPHRINE.....	107	heparin sodium (porcine).....	46	STARTER.....	23
guanfacine hcl.....	68	heparin sodium (porcine) pf..	46	HUMIRA-PS/UV/ADOL HS	
guanfacine hcl er.....	17	HEPLISAV-B.....	183	STARTER.....	23
GUAVA FLAVOR.....	167	HEPSERA.....	88	HUMIRA-PSORIASIS/UVEIT	
GVOKE HYPOPEN 1-PACK.....	56	HETLIOZ.....	137	STARTER.....	23
GVOKE HYPOPEN 2-PACK.....	56	HETLIOZ LQ.....	137	HUMULIN 70/30.....	58
GVOKE KIT.....	56	HIBERIX.....	182	HUMULIN 70/30 KWIKPEN.....	58
GVOKE PFS.....	56	HIBICLENS 4 % LIQUID.....	85	HUMULIN N.....	58
		HIZENTRA.....	163	HUMULIN N KWIKPEN.....	58
		hm enema mineral oil.....	138	HUMULIN R.....	58
		hm esomeprazole magnesium		HUMULIN R U-500	
HADLIMA.....	22	dr.....	179	(CONCENTRATED).....	58
HADLIMA PUSH TOUCH.....	22	HOMATROPAIRE.....	157	HUMULIN R U-500 KWIKPEN.....	58
HAEGARDA.....	132	HONEY FLAVOR.....	167	hydralazine hcl.....	70
hailey 1.5/30.....	99	HORIZANT.....	175	hydrochlorothiazide.....	121
hailey 24 fe.....	99	HULIO.....	22	HYDROCODONE BITARTRATE	
hailey fe 1.5/30.....	99	HULIO (2 PEN).....	23	ER.....	29
hailey fe 1/20.....	100	HULIO (2 SYRINGE).....	23	hydrocodone bitartrate er.....	29
halobetasol propionate.....	115	HUMALOG.....	57	hydrocodone-acetaminophen..	33
haloette.....	104	HUMALOG JUNIOR		hydrocortisone.....	35,105
haloperidol.....	82	KWIKPEN.....	57	HYDROCORTISONE.....	115
haloperidol decanoate.....	82	HUMALOG KWIKPEN.....	57	hydrocortisone (perianal).....	36
haloperidol lactate.....	82	HUMALOG MIX 50/50.....	57	HYDROCORTISONE ACE-	
HAM FLAVOR.....	167	HUMALOG MIX 50/50		PRAMOXINE.....	115
HARVONI.....	88	KWIKPEN.....	57	hydrocortisone acetate.....	36
HAVRIX.....	183	HUMALOG MIX 75/25.....	57	hydrocortisone sod suc (pf)...	105
hearing aid batteries.....	140				



hydrocortisone-acetic acid	163	IDACIO FOR CROHNS	INSULIN ASPART PENFILL	58
hydrogen peroxide	84	DISEASE/UC	INSULIN ASPART PROT &	
hydromorphone hcl	29,30	IDACIO FOR PLAQUE	ASPART	58
HYDROMORPHONE HCL	30	PSORIASIS	INSULIN DEGLUDEC	58
hydromorphone hcl er	30	IDELVION	INSULIN DEGLUDEC	
hydroxychloroquine sulfate	71	IDHIFA	FLEXTOUCH	58
hydroxyurea	79	ILARIS	INSULIN GLARGINE MAX	
hydroxyzine hcl	39	ILEVRO	SOLOSTAR	58
HYDROXYZINE PAMOATE	39	ILUMYA	INSULIN GLARGINE-YFGN	58
hydroxyzine pamoate	40	imatinib mesylate	insulin injection device	143
hyoscyamine sulfate	178	IMBRUVICA	INSULIN LISPRO	58
hyoscyamine sulfate er	178	imipramine hcl	INSULIN LISPRO (1 UNIT	
hyosyne	178	imipramine pamoate	DIAL)	58
HYPERTET	163	imiquimod	INSULIN LISPRO JUNIOR	
HYQVIA	164	IMITREX	KWIKPEN	58
HYRIMOZ	23	IMITREX STATDOSE	INSULIN LISPRO PROT &	
HYRIMOZ-CROHNS/UC		REFILL	LISPRO	58
STARTER	23	IMITREX STATDOSE	INTEGRA F	135
HYRIMOZ-CROHNS/UC		SYSTEM	INTEGRA PLUS	135
STARTER PACK	23	IMOVAX RABIES	INTELENCE	86
HYRIMOZ-PED CROHNS		IMURAN	INTRALIPID	155
STARTER	23	INATAL GT	introvale	100
HYRIMOZ-PLAQ PSOR/UEVIT		INBRIJA	INTUNIV	17
START	24	incassia	INVEGA	82
HYRIMOZ-PLAQUE		incontinence supplies	INVEGA HAFYERA	82
PSORIASIS START	24	INCRUSE ELLIPTA	INVEGA SUSTENNA	82
HYSINGLA ER	30	indapamide	INVEGA TRINZA	82
HYZAAR	69	INDERAL LA	INVELTYS	160
		INDERAL XL	INVIRASE	86
		indomethacin	INVOKAMET	55
ibandronate sodium	122	INFANRIX	INVOKAMET XR	55
IBRANCE	76	INFLECTRA	INVOKANA	60
IBSRELA	128	INFLIXIMAB	IOPIDINE	158
ibuprofen (MOTRIN)	26	INLYTA	IPOL	183
ibuprofen-famotidine	26	INNOPRAN XL	ipratropium bromide	41,154
icatibant acetate	132	INPEFA	ipratropium-albuterol	44
iclevia	100	INQOVI	irbesartan	68
ICLUSIG	76	INSULIN ASP PROT & ASP	irbesartan-hydrochlorothiazide	69
icosapent ethyl	64	FLEXPEN	iron / folic acid / vitamin C /	
IDACIO	24	INSULIN ASPART	vitamin B6 / vitamin B12 / zinc	135
		INSULIN ASPART FLEXPEN		58

iron / vitamin C / vitamin B12 / folic acid	135	JANUMET	55	KCL-LACTATED RINGERS-D5W	146
iron combinations	135	JANUMET XR	55	kelnor 1/35	100
IRON FOLATE PLUS	135	JANUVIA	56	kelnor 1/50	100
iron polysaccharide complex	135	JARDIANCE	60	KEPPRA	47
ISENTRESS	86	jasmiel	100	KEPPRA XR	47
ISENTRESS HD	86	JAYPIRCA	77	KERYDIN	111
isibloom	100	jencycla	104	KESIMPTA	174
ISOLYTE-S	146	JENTADUETO	55	KETO-DIASTIX	119
isoniazid	71	JENTADUETO XR	55	ketoconazole	63,111
isopropyl alcohol (skin cleanser)	117	JESDUVROQ	133	ketodan	111
ISOPTO TEARS	156	jinteli	124	KETONE TEST	119
isosorbide dinitrate	39	JIVI	131	KETOPROFEN	26
isosorbide mononitrate	39	JOHNSONS STERILE EYE PADS	140	KETOPROFEN ER	26
isosorbide mononitrate er	39	jolessa	100	ketorolac tromethamine	26,161
isotretinoin	109	JORNAY PM	18	KETOROLAC TROMETHAMINE	26
isradipine	91	joyeaux	100	KETOSTIX	119
ISTALOL	157	JUBLIA	111	ketotifen drops (ZADITOR)	161
ISTURISA	121	juleber	100	KEVZARA	25
itraconazole	63	JULUCA	86	KINERET	25
ivabradine hcl	95	junel 1.5/30	100	KINRIX	177
ivermectin	37	junel 1/20	100	KIPROFEN	26
IWILFIN	79	junel fe 1.5/30	100	KISQALI (200 MG DOSE)	77
IXCHIQ	183	junel fe 1/20	100	KISQALI (400 MG DOSE)	77
IXIARO	183	junel fe 24	100	KISQALI (600 MG DOSE)	77
IXINITY	131	just right 5000	151	KISQALI FEMARA (200 MG DOSE)	75
IYUZEH	162	JYNARQUE	124	KISQALI FEMARA (400 MG DOSE)	75
		JYNNEOS	183	KISQALI FEMARA (600 MG DOSE)	75
		<b>K</b>		KITABIS PAK	20
J		k-tan plus	135	KLARITY-A	158
J & J EYE PADS OVAL SMALL	140	KAHLUA FLAVOR	167	klayesta	111
J & J OVAL EYE PADS	140	kaitlib fe	100	klor-con	147
J & J STERILE EYE PADS	140	KALBITOR	132	klor-con 10	147
jaimiess	100	kalliga	100	klor-con m10	147
JAKAFI	77	KALYDECO	175	klor-con m15	147
JALYN	129	KAPSPARGO SPRINKLE	90	klor-con m20	147
JANSSEN COVID-19 VACCINE	183	kariva	100	KLOXXADO	61
jantoven	45	KATERZIA	91		
		KCL (0.149%) IN NACL	146		
		kcl in dextrose-nacl	146		

klis esomeprazole	lansoprazole (PREVACID)...	179	LENVIMA (20 MG DAILY DOSE).....	73
magnesium.....	179	LANSOPRAZOLE 15 MG CAP DR.....	179	LENVIMA (24 MG DAILY DOSE).....
KOATE.....	131	LANSOPRAZOLE 15 MG TAB DR DISP.....	179	LENVIMA (4 MG DAILY DOSE).....
KOATE-DVI.....	131	LANSOPRAZOLE 30 MG CAP DR.....	179	LENVIMA (8 MG DAILY DOSE).....
KOGENATE FS.....	131	LANSOPRAZOLE 30 MG TAB DR DISP.....	179	LEQVIO.....
KONVOMEPI.....	180	lanthanum carbonate.....	128	LESCOL XL.....
KOSELUGO.....	77	LANTUS.....	58	lessina.....
KOVALTRY.....	131	LANTUS SOLOSTAR.....	58	LETAIRIS.....
kp omeprazole magnesium	179	lapatinib ditosylate.....	77	letrozole.....
KRAZATI.....	77	larin 1.5/30.....	100	leucovorin calcium.....
kurvelo.....	100	larin 1/20.....	100	LEUKINE.....
KYNMOBI.....	81	larin 24 fe.....	100	leuprolide acetate.....
<b>L</b>		larin fe 1.5/30.....	100	LEUPROLIDE ACETATE (3 MONTH).....
l-glutamine.....	133	larin fe 1/20.....	100	levabuterol hcl.....
L-methylfolate.....	120	larissia.....	100	LEVALBUTEROL TARTRATE.....
L-methylfolate combinations	120	latanoprost.....	162	LEVAMLODIPINE MALEATE.....
labetalol hcl.....	89	LATUDA.....	82	levetiracetam.....
LABETALOL HCL.....	90	layolis fe.....	100	levetiracetam er.....
lacosamide.....	47	LAZCLUZE.....	73	levo-t.....
lactase (LACTAID).....	120	LEDIPASVIR-SOFOSBUVIR.....	88	LEVOBUNOLOL HCL.....
LACTATED RINGERS.....	146	leena.....	100	levocarnitine.....
lactulose.....	138	leflunomide.....	27	levocarnitine sf.....
lactulose encephalopathy.....	128	LEMON EXTRACT.....	167	levocetirizine (XYZAL).....
LAGEVRIO.....	89	LEMON FLAVOR.....	167	levofloxacin.....
LAMICTAL.....	47	LEMON-LIME SD.....	168	levonest.....
LAMICTAL ODT.....	47	LEMONADE FLAVOR.....	168	levonorg-eth estrad triphasic.....
LAMICTAL STARTER.....	47	LEMTRADA.....	174	levonorgest-eth est & eth est.....
LAMICTAL XR.....	48	lenalidomide.....	148	levonorgest-eth estrad 91-day.....
lamivudine.....	86,88	LENVIMA (10 MG DAILY DOSE).....	73	levonorgest-eth estradiol-iron.....
lamivudine-zidovudine.....	86	LENVIMA (12 MG DAILY DOSE).....	73	levonorgestrel (plan B).....
lamotrigine.....	48	LENVIMA (14 MG DAILY DOSE).....	73	levonorgestrel-ethinyl estrad.....
lamotrigine er.....	48	LENVIMA (18 MG DAILY DOSE).....	73	levora 0.15/30 (28).....
lamotrigine starter kit-blue.....	48	lanolin/mineral oil/white petrolatum (EUCERIN).....	117	levothyroxine sodium.....
lamotrigine starter kit-green.....	48			levoxy.....
lamotrigine starter kit-orange.....	48			LEXAPRO.....
LAMPIT.....	38			LEXIVA.....
lancet device.....	142			
lancets.....	142			

LIALDA.....	127	LIVALO.....	66	lubricant eye drops.....	156
LIBERVANT.....	46	LIVER CONCENTRATE.....	168	lubricant eye ointment.....	156
LICART.....	110	LIVER FLAVOR.....	168	LUGOLS STRONG IODINE.....	85
LICORICE FLAVOR.....	168	lo-zumandimine.....	101	LULICONAZOLE.....	111
LIDOCAINE.....	96	loestrin 1.5/30 (21).....	101	LUMAKRAS.....	77
LIDOCAINE 5 %		loestrin 1/20 (21).....	101	LUMIGAN.....	162
OINTMENT.....	116	loestrin fe 1.5/30.....	101	LUNESTA.....	136
LIDOCAINE 5 % PATCH.....	116	loestrin fe 1/20.....	101	LUPRON DEPOT-PED (1-	
LIDOCAINE BASE.....	96	lojaimiess.....	101	MONTH).....	123
LIDOCAINE HCL.....	96	LOKELMA.....	150	LUPRON DEPOT-PED (3-	
lidocaine hcl.....	117,139	LONSURF.....	75	MONTH).....	123
lidocaine hcl (pf).....	139	LOPERAMIDE.....	60	LUPRON DEPOT-PED (6-	
LIDOCAINE HCL		loperamide.....	60	MONTH).....	123
MONOHYDRATE.....	96	LOPID.....	65	lurasidone hcl.....	82
lidocaine hcl		lopinavir-ritonavir.....	86	lutera.....	101
urethral/mucosal.....	117	LOPRESSOR.....	90	LUZU.....	111
LIDOCAINE PATCH 4%.....	117	LOPROX.....	111	LYBALVI.....	172
lidocaine viscous hcl.....	150	loratadine (CLARITIN).....	64	lyleq.....	104
lidocaine-epinephrine (pf).....	138	loratadine / pseudoephedrine		lyllana.....	125
lidocaine-prilocaine.....	117	(CLARITIN – D).....	107	LYNPARZA.....	77
lidocaine-prilocaine cream		lorazepam.....	40	LYRICA.....	48
kit.....	117	lorazepam intensol.....	40	LYRICA CR.....	175
LILETTA (52 MG).....	171	LORBRENA.....	77	LYTGOBI (12 MG DAILY	
lillow.....	101	loryna.....	101	DOSE).....	77
LIME FLAVOR.....	168	losartan potassium.....	68	LYTGOBI (16 MG DAILY	
LINDANE.....	118	losartan potassium-hctz.....	69	DOSE).....	77
linezolid.....	38	LOTEMAX.....	160	LYTGOBI (20 MG DAILY	
LINEZOLID IN SODIUM		LOTEMAX SM.....	160	DOSE).....	77
CHLORIDE.....	38	LOTENSIN.....	67	LYUMJEV.....	58
LINZESS.....	128	LOTENSIN HCT.....	69	LYUMJEV KWIKPEN.....	58
liothyronine sodium.....	177	loteprednol etabonate.....	160	lyza.....	104
LIPITOR.....	66	LOTREL.....	69	<b>M</b>	
LIPOFEN.....	65	LOTRONEX.....	128	M-M-R II.....	183
LIQREV.....	94	lovastatin.....	66	MAGNASWEET 110.....	96
liraglutide.....	57	LOVAZA.....	64	MAGNASWEET 135.....	96
lisdexamfetamine dimesylate.....	16	LOVENOX.....	46	MAGNESIUM.....	147
lisinopril.....	67	low-ogestrel.....	101	magnesium.....	147
lisinopril-hydrochlorothiazide.....	69	loxapine succinate.....	83	magnesium carbonate /	
lithium.....	81	LOXORAL BASE.....	171	aluminum hydroxide	
lithium carbonate.....	81	lubiprostone.....	126	(GAVISCON).....	36
lithium carbonate er.....	81	LUBRICANT EYE DROPS.....	156		

magnesium chloride	147	MAYZENT	174	methocarbamol	154
MAGNESIUM CHLORIDE	147	MAYZENT STARTER PACK	174	methotrexate sodium	72
magnesium citrate	138	meclizine	62	METHOTREXATE SODIUM	72
magnesium gluconate	147	MECLOFENAMATE SODIUM	26	methotrexate sodium (pf)	72
MAGNESIUM		medroxyprogesterone		methoxsalen rapid	113
GLUCONATE	147	acetate	104,171	METHOXSALEN RAPID	113
magnesium hydroxide /		mefenamic acid	26	methscopolamine bromide	178
aluminum hydroxide /		mefloquine hcl	71	methsuximide	50
simethicone (MYLANTA)	36	megestrol acetate	74,171	methyl salicylate / menthol	116
magnesium oxide	37	MEGESTROL ACETATE	171	METHYLCELLULOSE	171
MAGNESIUM OXIDE		MEKINIST	77	methylcellulose (CITRUCEL)	137
(antacid)	37	MEKTOVI	77	methyldopa	68
magnesium oxide (antacid)	37	MELATONIN	20	methylergonovine maleate	163
MAGNESIUM STEARATE	171	melatonin	20	METHYLIN	18
magnesium sulfate	147	melatonin / pyridoxine	20	methylphenidate	18
malathion	118	MELATONIN / PYRIDOXINE	20	methylphenidate hcl	18
male condoms	141	melodetta 24 fe	101	methylphenidate hcl er	19
MANGO FLAVOR	168	meloxicam	26	METHYLPHENIDATE HCL ER	19
MANGO FLAVOR		memantine hcl	172	methylphenidate hcl er (cd)	18
SWEETENED	168	memantine hcl er	172	methylphenidate hcl er (la)	18,19
MANGO PASSION FRUIT		MENACTRA	182	methylphenidate hcl er (osm)	19
OS	168	MENQUADFI	182	methylphenidate hcl er (xr)	19
MAPLE FLAVOR	168	MENTHOL / ZINC OXIDE	117	methylprednisolone	105
maraviroc	86	menthol / zinc oxide	117	methylprednisolone acetate	105
marlissa	101	MENVEO	182	methylprednisolone sodium	
MARSHMALLOW ARTIFICIAL		mercaptopurine	72	succ	105
FLAVOR	168	meropenem	38	METOCLOPRAMIDE HCL	126
MARSHMALLOW FLAVOR	168	merzee	101	metoclopramide hcl	126
MARSHMALLOW OS	168	mesalamine	127	metolazone	121
MARSHMALLOW WS	168	mesalamine er	127	metoprolol succinate er	90
matzim la	91	mesalamine-cleanser	127	metoprolol tartrate	90
MAVENCLAD (10 TABS)	174	mesna	80	metoprolol-hydrochlorothiazide	69
MAVENCLAD (4 TABS)	174	METAMUCIL	137	metronidazole	37,118
MAVENCLAD (5 TABS)	174	metaxalone	153	mexiletine hcl	40
MAVENCLAD (6 TABS)	174	metformin hcl	56	mibelas 24 fe	101
MAVENCLAD (7 TABS)	174	metformin hcl er	56	micafungin sodium	62
MAVENCLAD (8 TABS)	174	methadone hcl	30	MICARDIS	68
MAVENCLAD (9 TABS)	174	methadone hcl intensol	30	MICARDIS HCT	69
MAVYRET	88	methenamine hippurate	39	MICATIN	111
MAXALT	144	methergine	163	miconazole (MICATIN)	111
MAXALT-MLT	144	methimazole	176	miconazole (MONISTAT)	184

MICONAZOLE 3 200 MG SUPPOSITORY.....	185	MODERNA COVID-19 BIVAL BOOSTER.....	183	moxifloxacin hcl.....	125,158
MICONAZOLE-ZINC OXIDE-PETROLAT.....	111	MODERNA COVID-19 BIVALENT.....	183	MOXIFLOXACIN HCL (2X DAY).....	158
microgestin 1.5/30.....	101	MODERNA COVID-19 VAC (BOOSTER).....	183	MRESVIA.....	183
microgestin 1/20.....	101	MODERNA COVID-19 VAC 6M-11Y.....	183	MS CONTIN.....	31
microgestin 24 fe.....	101	MODERNA COVID-19 VACC 6-11Y.....	183	MUCINEX DM.....	107
microgestin fe 1.5/30.....	101	MODERNA COVID-19 VACC 6M-5Y.....	183	MULTI-DRAW NEEDLE.....	143
microgestin fe 1/20.....	101	MODERNA COVID-19 VACCINE.....	183	Multigen Folic.....	135
midodrine hcl.....	185	moexipril hcl.....	67	Multigen Plus.....	135
MIEBO.....	161	MOISTURIZING CREAM (VANICREAM).....	114	MULTIGEN TABLET.....	135
mifepristone.....	124	MOLASSES FLAVOR.....	168	MULTISTIX 10 SG.....	119
MIGERGOT.....	144	mometasone furoate.....	115,154	multivitamin.....	135
miglitol.....	54	mondoxyne nl.....	176	multivitamin (\$0).....	153
MIGLITOL.....	54	mono-lynyah.....	101	multivitamins / calcium.....	152
miglustat.....	133	monoject flush syringe.....	148	multivitamins / minerals.....	37
mili.....	101	monoject sodium chloride flush.....	148	MULTIVITAMINS / MINERALS.....	152
milk of magnesia.....	138	MONONINE.....	131	mupirocin.....	110
mimvey.....	124	montelukast sodium.....	42	mupirocin calcium.....	110
MINERAL OIL.....	117	morgidox.....	176	MYALEPT.....	123
mineral oil.....	138	MORPHINE SULFATE.....	30	mycophenolate mofetil.....	149
minitran.....	39	morphine sulfate.....	30	mycophenolate sodium.....	149
minocycline hcl.....	176	morphine sulfate (concentrate).....	30	mycophenolic acid.....	149
minoxidil.....	70	MORPHINE SULFATE (CONCENTRATE).....	30	MYDAYIS.....	16
MINT CHOCOLATE CHIP FLAVOR.....	168	morphine sulfate er.....	30,31	MYFORTIC.....	149
mirabegron er.....	181	MORPHINE SULFATE ER BEADS.....	31	MYLERAN.....	72
MIRAPEX ER.....	81	MOTEGRITY.....	125	myorisan.....	109
mirtazapine.....	51	MOTPOLY XR.....	48	MYRBETRIQ.....	181
miscellaneous medical devices.....	143	MOUNJARO.....	57	MYSOLINE.....	48
miscellaneous natural products.....	150	MOVANTIK.....	128		
MISCELLANEOUS NATURAL PRODUCTS.....	150			<b>N</b>	
misoprostol.....	180			nabumetone.....	26
MOBIC.....	26			nadolol.....	90
modafinil.....	19			nafcillin sodium.....	165
MODERNA COVID-19 BIVAL 6M-5Y.....	183			NAFCILLIN SODIUM.....	165
				NAFCILLIN SODIUM IN DEXTROSE.....	165
				naftifine hcl.....	111
				NAFTIN.....	111
				nalbuphine hcl.....	34
				NALFON.....	26

NALMEFENE HCL.....	61	neomycin / bacitracin / polymixin	niacinamide.....	186
NALOXONE HCL.....	61	/ pramoxine (NEOSPORIN	NIACOR.....	66
naloxone hcl.....	61	PLUS).....	NIASPAN.....	66
naltrexone hcl.....	61	neomycin sulfate.....	nicardipine hcl.....	91
NAMENDA.....	172	neomycin-bacitracin zn-	NICE PURE BAKING SODA... 97	
NAMENDA TITRATION		polymyx.....	nicotine gum.....	175
PAK.....	172	NEOMYCIN-POLYMYXIN B	nicotine patch.....	175
NAMENDA XR.....	172	GU.....	Nicotrol.....	175
NAMENDA XR TITRATION		neomycin-polymyxin-	nifedipine.....	91
PACK.....	172	dexameth.....	nifedipine er.....	92
NAMZARIC.....	172	NEOMYCIN-POLYMYXIN-	nifedipine er osmotic release... 92	
naphazoline /pheniramine		GRAMICIDIN.....	nikki.....	101
drops (NAPHCN-A).....	159	NEOMYCIN-POLYMYXIN-	nilutamide.....	74
NAPRELAN.....	26	HC.....	nimodipine.....	92
naproxen.....	26,27	neomycin-polymyxin-hc.....	NIMODIPINE.....	92
naproxen (ALEVE).....	26	NEORAL.....	NINLARO.....	78
naproxen dr.....	27	NEOSTIGMINE	NISOLDIPINE ER.....	92
NAPROXEN SODIUM.....	27	METHYLSULFATE.....	nisoldipine er.....	92
NAPROXEN SODIUM ER... 27		neostigmine methylsulfate... 71	NITRO-BID.....	39
naproxen-esomeprazole mg. 27		NEPHRAMINE.....	nitrofurantoin macrocrystal... 39	
naratriptan hcl.....	144	NERLYNX.....	nitrofurantoin monohyd macro. 39	
NARCAN.....	61	neuac.....	nitroglycerin.....	39
NARDIL.....	51	NEUAC.....	NIVA THYROID.....	177
NASONEX.....	154	NEULASTA.....	NIVESTYM.....	134
NAT BITTERNESS.....	171	NEULASTA ONPRO.....	NIZATIDINE.....	178
NATACYN.....	158	NEUPRO.....	nizatidine.....	178
NATAPRES.....	96	NEURONTIN.....	non gelatin capsules.....	170
nateglinide.....	59	NEVANAC.....	Non-Preferred Blood Glucose	
NATROBA.....	118	nevirapine.....	Meter.....	142
NATURAL CAMEL.....	168	NEVIRAPINE.....	nora-be.....	104
NAYZILAM.....	46	NEXIUM.....	NORDITROPIN FLEXPRO... 122	
nebivolol hcl.....	90	NEXIUM I.V.....	norelgestromin-eth estradiol... 103	
necon 0.5/35 (28).....	101	NEXLETOL.....	norethin ace-eth estrad-fe... 101	
needles and syringes.....	143	NEXLIZET.....	norethin-eth estradiol-fe..... 101	
NEEDLES AND SYRINGES	143	NEXPLANON.....	norethindron-ethinyl estrad-fe. 101	
NEFAZODONE HCL.....	53	NGENLA.....	norethindrone.....	104
NEFFY.....	185	NIACIN.....	norethindrone acet-ethinyl est 101	
neo-polycin.....	158	niacin.....	norethindrone acetate.....	171
neo-polycin hc.....	160	NIACIN	norethindrone-eth estradiol... 124	
neomycin / bacitracin /		(ANTIHYPERTENSIVE).....	norgestim-eth estrad triphasic 101	
polymixin (NEOSPORIN)... 110		niacin er (antihyperlipidemic). 66	norgestimate-eth estradiol... 102	

NORLIQVA.....	92	NOVOLOG MIX 70/30	ofloxacin otic soln 0.3%.....	162
norlyda.....	104	FLEXPEN.....	OGSIVEO.....	78
norlyroc.....	104	NOVOLOG MIX 70/30	OJEMDA.....	78
normal saline flush.....	148	RELION.....	OJJAARA.....	78
NORMOSOL-M IN D5W.....	146	NOVOLOG PENFILL.....	olanzapine.....	83
nortrel 0.5/35 (28).....	102	NOVOLOG RELION.....	olanzapine-fluoxetine hcl.....	172
nortrel 1/35 (21).....	102	NOVOSEVEN RT.....	olmesartan medoxomil.....	68
nortrel 1/35 (28).....	102	NOXAFIL.....	olmesartan medoxomil-hctz.....	70
nortrel 7/7/7.....	102	NP THYROID.....	olmesartan-amlodipine-hctz.....	70
nortriptyline hcl.....	54	NUBEQA.....	olopatadine.....	162
NORVASC.....	92	NUCALA.....	OLUMIANT.....	24
NORVIR.....	86	NUCYNTA ER.....	omega-3 fatty acids (Fish oil).....	155
NOURIANZ.....	80	nulev.....	omega-3-acid ethyl esters.....	64
NOVA MAX PLUS KETONE		NUPLAZID.....	omeprazole (PRILOSEC).....	180
TEST.....	119	NURTEC.....	omeprazole magnesium.....	180
NOVAVAX COVID-19		NUTROPIN AQ NUSPIN 10.....	omeprazole-sodium	
VACCINE.....	183	NUTROPIN AQ NUSPIN 20.....	bicarbonate.....	180
NOVOEIGHT.....	131	NUTROPIN AQ NUSPIN 5.....	OMNARIS.....	154
NOVOLIN 70/30.....	58	NUWIQ.....	OMNIPOD 5 DEXG7G6 PODS	
NOVOLIN 70/30 FLEXPEN.....	58	nyamyc.....	GEN 5.....	142
NOVOLIN 70/30 FLEXPEN		nylia 1/35.....	OMNIPOD 5 G6 INTRO (GEN	
RELION.....	58	nylia 7/7/7.....	5).....	142
NOVOLIN 70/30 RELION.....	58	NYMALIZE.....	OMNIPOD 5 G6 PODS (GEN	
NOVOLIN N.....	59	nymyo.....	5).....	142
NOVOLIN N FLEXPEN.....	59	nystatin.....	OMNIPOD 5 G7 INTRO (GEN	
NOVOLIN N FLEXPEN		NYSTATIN.....	5).....	142
RELION.....	59	nystatin-triamcinolone.....	OMNIPOD 5 G7 PODS (GEN	
NOVOLIN N RELION.....	59	nystop.....	5).....	142
NOVOLIN R.....	59	<b>O</b>	OMNIPOD 5 LIBRE2 PLUS	
NOVOLIN R FLEXPEN.....	59	OBIZUR.....	G6.....	142
NOVOLIN R FLEXPEN		OCALIVA.....	OMNIPOD 5 LIBRE2 PLUS G6	
RELION.....	59	ocella.....	PODS.....	142
NOVOLIN R RELION.....	59	OCREVUS.....	OMNIPOD CLASSIC PDM (GEN	
NOVOLOG.....	59	OCTREOTIDE ACETATE.....	3).....	142
NOVOLOG 70/30 FLEXPEN		octreotide acetate.....	OMNIPOD CLASSIC PODS	
RELION.....	59	OCUFLOX.....	(GEN 3).....	142
NOVOLOG FLEXPEN.....	59	ODEFSEY.....	OMNIPOD DASH INTRO (GEN	
NOVOLOG FLEXPEN		OFEV.....	4).....	142
RELION.....	59	OFLOXACIN.....	OMNIPOD DASH PDM (GEN	
NOVOLOG MIX 70/30.....	59	ofloxacin.....	4).....	142
				125,159



OMNIPOD DASH PODS (GEN 4)	142	oscimin sr	178	PASSION FRUIT FLAVOR SWEETENED	168
OMNITROPE	122	oseltamivir phosphate	89	PAXIL	52
OMVOH	127	ostomy supplies	142	PAXIL CR	53
ondansetron	61	OTEZLA	27	PAXLOVID (150/100)	87
ondansetron hcl	61	OVACE PLUS	113	PAXLOVID (300/100)	87
ONETOUCH ULTRA	119	OVIDE	118	pazopanib hcl	78
ONETOUCH ULTRA BLUE TEST	119	oxacillin sodium	165	PCCA SWEETNESS ENHANCER	168
ONETOUCH ULTRA TEST	119	oxaprozin	27	PEACH FLAVOR	168
ONETOUCH VERIO	119	oxazepam	40	PEAK FLOW METER	143
ONEXTON	109	OXBRYTA	133	PEANUT BUTTER FLAVOR	168
ONFI	46	oxcarbazepine	48	PEANUT BUTTER OS	168
ONGENTYS	80	OXERVATE	160	PEDIARIX	177
ONUREG	72	oxiconazole nitrate	111	PEDIATRIC MULTIPLE VITAMINS	153
OPFOLDA	123	OXISTAT	111	pediatric multiple vitamins	153
opium	60	OXTELLAR XR	48	pediatric multiple vitamins / fluoride / iron	152
OPSUMIT	94	oxybutynin chloride	181	pediatric multiple vitamins / iron	153
OPSYNVI	93	oxybutynin chloride er	181	PEDIATRIC MULTIPLE VITAMINS / MINERALS	152
OPVEE	61	oxycodone hcl	31,32	pediatric multiple vitamins / vitamin A / vitamin C / vitamin D / fluoride	153
OPZELURA	115	OXYCODONE HCL	32	pediatric multivitamin combinations	152
ORANGE CONCENTRATE	168	OXYCODONE HCL ER	32	PEDIATRIC MULTIVITAMIN COMBINATIONS	153
ORANGE CREAM FLAVOR	168	oxycodone-acetaminophen	33	PEDIATRIC MULTIPLE VITAMINS / IRON	153
ORANGE FLAVOR	168	OXYCONTIN	32	pediatric vitamins	153
ORANGE OIL FLAVOR	168	oxymetazoline (AFRIN)	155	PEDVAX HIB	182
ORENCIA	27	OXYTROL	181	peg 3350-kcl-na bicarb-nacl	137
ORENCIA CLICKJECT	27	OZEMPIC (0.25 OR 0.5 MG/DOSE)	57	peg-3350/electrolytes	137
ORENITRAM	93	OZEMPIC (1 MG/DOSE)	57	PEG-PREP	137
ORENITRAM MONTH 1	93	OZEMPIC (2 MG/DOSE)	57	PEGASYS	88
ORENITRAM MONTH 2	93	OZURDEX	160	PEMAZYRE	78
ORENITRAM MONTH 3	93	<b>P</b>		PENBRAYA	182
ORGOVYX	74	pacerone	41	penciclovir	114
ORIAHNN	124	paliperidone er	82		
ORILISSA	122	PALYNZIQ	123		
ORKAMBI	175	pantoprazole sodium	180		
ORLADEYO	132	paromomycin sulfate	20		
ORLISTAT	17	paroxetine hcl	52		
orphenadrine citrate er	154	paroxetine hcl er	52		
ORSERDU	74	paroxetine mesylate	175		
orsythia	102	PASSION FRUIT FLAVOR	168		
oscimin	178				

penicillamine.....	148	phenelzine sulfate.....	52	pioglitazone hcl-glimepiride....	55
penicillin g potassium.....	164	phenobarbital.....	136	pioglitazone hcl-metformin hcl.	55
PENICILLIN V		phentermine hcl.....	17	piperacillin sod-tazobactam	
POTASSIUM.....	164	phenylephrine (NEO-		so.....	164
penicillin v potassium.....	164	SYNEPHRINE).....	155	piperonyl / pyrethrins (RID)...	118
PENTACEL.....	177	phenylephrine (SUDAFED		PIQRAY (200 MG DAILY	
pentamidine isethionate.....	37	PE).....	155	DOSE).....	78
PENTASA.....	127	phenylephrine /		PIQRAY (250 MG DAILY	
pentoxifylline er.....	132	acetaminophen.....	107	DOSE).....	78
PEPPERMINT BURST OS.	168	phenylephrine / bropheniramine		PIQRAY (300 MG DAILY	
PEPPERMINT FLAVOR....	168	/ dextromethorphan.....	107	DOSE).....	78
PERFOROMIST.....	44	phenylephrine /		pirfenidone.....	176
perindopril erbumine.....	67	chlorpheniramine /		pirmella 1/35.....	102
PERINDOPRIL ERBUMINE.	67	dextromethorphan /		pirmella 7/7/7.....	102
periogard.....	150	acetaminophen.....	107	piroxicam.....	27
periomed.....	151	phenylephrine /		PLAVIX.....	132
permethrin (NIX).....	118	dextromethorphan.....	107	PLEGRIDY.....	174
perphenazine.....	84	phenylephrine / guaifenesin.	107	PLEGRIDY STARTER PACK.	174
PERPHENAZINE-		PHENYLEPHRINE /		plerixafor.....	135
AMITRIPTYLINE.....	172	GUAIFENESIN.....	107	PNEUMOVAX 23.....	182
PERSERIS.....	82	phenylephrine / shark liver /		PODOFILOX.....	116
PERTZYE.....	120	petrolatum (PREPARATION		podofilox.....	116
petrolatum (VASELINE)....	171	H).....	36	polycin.....	159
Petrolatum ointment.....	171	phenytek.....	50	polyethylene glycol.....	138
PEXEVA.....	53	phenytoin.....	50	POLYETHYLENE GLYCOL 600	
PFIZER COVID-19 BIVAL		phenytoin infatabs.....	50	(BULK).....	96
6MO-4YR.....	184	phenytoin sodium extended... 50		polyethylene glycol drops....	156
PFIZER COVID-19 VAC BIVAL		philith.....	102	polyethylene glycol packets... 138	
5-11.....	184	PHOSPHOLINE IODIDE.....	158	polymyxin b sulfate.....	39
PFIZER COVID-19 VAC		phosphorus supplement....	147	polymyxin b-trimethoprim....	159
BIVALENT.....	184	phytonadione.....	185	polysaccharide iron complex.. 135	
PFIZER COVID-19 VAC-TRIS		PIFELTRO.....	86	polyvinyl alcohol / povidone drops	
5-11Y.....	184	pilocarpine hcl.....	151,158	(REFRESH).....	156
PFIZER COVID-19 VAC-TRIS		pimecrolimus.....	116	polyvinyl alcohol drops	
6M-4Y.....	184	pimtrea.....	102	(HYPOTEAR).....	156
PFIZER-BIONT COVID-19		pin-away.....	37	POMALYST.....	74
VAC-TRIS.....	184	PINA COLADA FLAVOR....	168	PONVORY.....	174
PFIZER-BIONTECH COVID-19		pindolol.....	90	PONVORY STARTER PACK.	174
VACC.....	184	PINEAPPLE FLAVOR.....	169	portia-28.....	102
phenazopyridine (AZO)....	130	pinworm medicine.....	37	posaconazole.....	63
PHENELZINE SULFATE.....	52	pioglitazone hcl.....	59		

potassium / sodium phosphate.....	147	prednisolone sodium phosphate.....	105	PROCALAMINE.....	156
potassium chloride.....	147	PREDNISOLONE SODIUM PHOSPHATE.....	160	PROCAP 90 CAPSULE EXCIPIENT.....	171
potassium chloride crys er..	147	prednisone.....	105	PROCARDIA.....	92
potassium chloride er.....	147	PREDNISONE.....	105	PROCARDIA XL.....	92
POTASSIUM CHLORIDE IN DEXTROSE.....	146	pregabalin.....	48	procentra.....	16
potassium chloride in dextrose.....	146	pregabalin er.....	175	prochlorperazine.....	84
potassium chloride in nacl..	146	PREHEVBRIO.....	184	prochlorperazine edisylate.....	84
potassium citrate.....	129	PREMPHASE.....	124	prochlorperazine maleate.....	84
potassium citrate / sodium citrate (CYTRA-3).....	129	PRENATAL VITAMIN.....	153	PROCRIT.....	134
potassium citrate er.....	129	prenatal vitamin.....	153	procto-med hc.....	36
POTASSIUM GLUCONATE.....	147	PRETOMANID.....	71	PROCTOFOAM HC.....	36
potassium gluconate.....	147	PREVACID 30 MG CAP DR. TAB DR DISP.....	180	proctosol hc.....	36
povidone-iodine (BETADINE).....	85	PREVACID SOLUTAB 15 MG TAB DR DISP.....	180	proctozone-hc.....	36
PRADAXA.....	46	PREVACID SOLUTAB 30 MG TAB DR DISP.....	180	PRODIGY NO CODING BLOOD GLUC.....	120
PRALINES AND CREAM FLAVOR.....	169	prevalite.....	65	PROFILNINE.....	131
PRALUENT.....	67	previfem.....	102	PROFORE.....	140
pramipexole dihydrochloride.....	81	PREVNAR 13.....	182	PROFORE LITE.....	140
pramipexole dihydrochloride er.....	81	PREVNAR 20.....	182	PROFORE WCL 5-1/2"X8".....	140
pramoxine (PROCTO-FOAM).....	36	PREVYMIS.....	87	PROGESTERONE.....	97
pramoxine / calamine.....	117	PREZCOBIX.....	86	progesterone.....	171
prasugrel hcl.....	132	PREZISTA.....	86	PROGESTERONE MICRONIZED.....	97
pravastatin sodium.....	66	PRIFTIN.....	71	PROGESTERONE MILLED.....	97
praziquantel.....	37	PRILOCAINE.....	97	PROGESTERONE ULTRA MICRONIZED.....	97
prazosin hcl.....	68	PRILOCAINE HCL.....	97	PROGESTERONE WETTABLE.....	97
PRECISION XTRA BLOOD GLUCOSE.....	119	PRILOSEC.....	180	PROGESTERONE WETTABLE (SOY).....	97
PRECISION XTRA KETONE.....	119	PRIMIDONE.....	48	PROGRAF.....	149
PRECOSE.....	54	PRINIVIL.....	67	PROLENSA.....	162
PRED FORTE.....	160	PRIORIX.....	184	PROLIA.....	122
prednisolone.....	105	PRISTIQ.....	53	PROMACTA.....	134
prednisolone acetate.....	160	PRIVIGEN.....	163	promethazine hcl.....	64
PREDNISOLONE ACETATE P-F.....	160	PROAIR DIGIHALER.....	44	promethegan.....	64
		PROAIR RESPICLICK.....	44	propafenone hcl.....	40
		probenecid.....	130	proparacaine hcl.....	160
		procainamide hcl.....	40	propranolol hcl.....	90
		PROCAINAMIDE HCL.....	40	PROPRANOLOL HCL.....	90
		PROCAINE HCL.....	139		

propranolol hcl er.....	90	QUDEXY XR.....	49	REBIF REBIDOSE TITRATION	
PROPRANOLOL-HCTZ.....	70	QUESTRAN.....	65	PACK.....	174
propylthiouracil.....	176	QUESTRAN LIGHT.....	65	REBIF TITRATION PACK.....	174
PROQUAD.....	184	quetiapine fumarate.....	83	REBINYN.....	131
PROSCAR.....	129	quetiapine fumarate er.....	83	REBLOZYL.....	134
PROTONIX.....	180	QUILLICHEW ER.....	19	reclipsen.....	102
protriptyline hcl.....	54	QUILLIVANT XR.....	19	RECOMBINATE.....	131
PROZAC.....	53	quinapril hcl.....	67	RECOMBIVAX HB.....	184
pseudoeph-bromphen-dm ..	107	quinapril-hydrochlorothiazide ..	70	RECTIV.....	36
pseudoephedrine		QUINAPRIL-		reeses pinworm medicine.....	37
(SUDAFED).....	155	HYDROCHLOROTHIAZIDE ..	70	REFRESH 1.4-0.6 %	
pseudoephedrine /		quinidine gluconate er.....	40	SOLUTION.....	156
guaifenesin.....	107	QUINIDINE SULFATE.....	40	REFRESH DIGITAL.....	156
pseudoephedrine /		quinidine sulfate.....	40	REFRESH OPTIVE.....	156
ibuprofen.....	107	quinine sulfate.....	71	REFRESH OPTIVE	
psyllium (METAMUCIL).....	137	QULIPTA.....	143	ADVANCED.....	156
PTS PANELS KETONE		QUVIVIQ.....	137	REFRESH OPTIVE PF.....	156
TEST.....	120	QVAR REDIHALER.....	42	REFRESH RELIEVA.....	156
PULMICORT.....	42			REFRESH RELIEVA PF.....	156
PULMICORT FLEXHALER.....	42	<b>R</b>		REFRESH TEARS PF.....	156
PULMOZYME.....	176	ra esomeprazole magnesium.....	180	relafen.....	27
PUMPKIN FLAVOR.....	169	RA HOT/COLD GEL		RELAFEN DS.....	27
PURE & GENTLE		SLEEVE.....	140	RELENZA DISKHALER.....	89
LUBRICANT.....	156	RABAVERT.....	184	RELEXXII.....	19
purevit dualfe plus.....	135	rabeprazole sodium.....	180	RELION KETONE TEST.....	120
pyrazinamide.....	71	raloxifene hcl.....	123	RELISTOR.....	128
pyridostigmine bromide.....	71	ramelteon.....	137	RELPAK.....	144
pyridoxine (vitamin B6).....	186	ramipril.....	67	REMERON.....	51
pyrimethamine.....	71	ranolazine er.....	39	REMERON SOLTAB.....	51
		RAPAFLO.....	129	REMICADE.....	127
		RAPAMUNE.....	149	RENFLEXIS.....	127
<b>Q</b>		RASPBERRY		REVELA.....	128
QBRELIS.....	67	CONCENTRATE.....	169	repaglinide.....	59
qc esomeprazole		RASPBERRY FLAVOR.....	169	REPATHA.....	67
magnesium.....	180	RASPBERRY FLAVOR		REPATHA PUSHTRONEX	
qc omeprazole magnesium.....	180	ARTIFICIAL.....	169	SYSTEM.....	67
QELBREE.....	17	RASPBERRY OS.....	169	REPATHA SURECLICK.....	67
QINLOCK.....	78	RAVICTI.....	123	respirtatory therapy supplies.....	143
QNASL.....	154	REBIF.....	174	RESTASIS.....	159
QNASL CHILDRENS.....	154	REBIF REBIDOSE.....	174	RESTASIS MULTIDOSE.....	159
QTERN.....	55			RETACRIT.....	134
QUADRACEL.....	178				

RETEVMO	78	ROOT BEER FLAVOR	169	saxagliptin-metformin er	55
RETIN-A	109	ropinirole hcl	81	SAXENDA	17
RETIN-A MICRO	109	ropinirole hcl er	81	SCSEMBLIX	78
RETIN-A MICRO PUMP	109	rosadan	118	scopolamine	62
RETISERT	161	rosuvastatin calcium	66	se-tan plus	135
REVATIO	94	ROTARIX	184	SECUADO	83
REVCIVI	123	ROTATEQ	184	SEGLUROMET	55
REVLIMID	148	ROWASA	127	selegiline hcl	81
REXULTI	84	roweepra	49	selenium	148
REYVOW	144,145	roweepra xr	49	SELZENTRY	86
REZDIFFRA	126	ROZEREM	137	SEMGLEE	59
REZLIDHIA	78	ROZLYTREK	78	SEMGLEE (YFGN)	59
REZUROCK	148	RUBRACA	78	senna / docusate sodium (PERI-	
REZVOGLAR KWIKPEN	59	RUCONEST	132	COLACE)	137
RHOPRESSA	159	rufinamide	49	sennosides	138
RIBAVIRIN	88	RUKOBIA	86	SEREVENT DISKUS	44
ribavirin	88	RYALTRIS	154	SEROQUEL	83
riboflavin (vitamin B2)	186	RYBELSUS	57	SEROQUEL XR	83
rifabutin	71	RYDAPT	78	SEROSTIM	122
rifampin	71	RYKINDO	82	SERTRALINE HCL	53
riluzole	155	RYTARY	81	sertraline hcl	53
RIMANTADINE HCL	89	<b>S</b>		setlakin	102
ringers	146	SABRIL	50	sevelamer carbonate	128
ringers irrigation	150	SAIZEN	122	sevelamer hcl	128
RINVOQ	24	SAIZENPREP	122	SEVENFACT	131
RINVOQ LQ	24	SALICYLIC ACID	116	sf	151
risedronate sodium	122	salicylic acid	116	sf 5000 plus	151
RISPERDAL	82	saline bacteriostatic	170	SFROWASA	127
RISPERDAL CONSTA	82	saline flush	148	sharobel	104
risperidone	82	saline flush zr	148	sharps container	143
risperidone microspheres er	82	salsalate	28	SHINGRIX	184
RITALIN	19	SANCUSO	61	SHRIMP FLAVOR	169
RITALIN LA	19	SANDIMMUNE	149	SIGNIFOR	124
ritonavir	86	SAPHRIS	83	SIKLOS	133
rivastigmine	172	SARDINE FLAVOR	169	sildenafil citrate	94
rivastigmine tartrate	172	SAVAYSA	45	SILIQ	113
rivelsa	102	SAVELLA	172	silodosin	130
RIXUBIS	131	SAVELLA TITRATION		silver sulfadiazine	114
rizatriptan benzoate	145	PACK	172	SIMBRINZA	158
ROCKLATAN	159	saxagliptin hcl	56	simethicone (MYLICON)	126
roflumilast	42			SIMLANDI (1 PEN)	24

SIMLANDI (2 PEN).....	24	sodium fluoride 5000 ppm... 151	SPRITAM.....	49
SIMLANDI (2 SYRINGE).....	24	SODIUM FLUORIDE 5000	sronyx.....	102
simliya.....	102	SENSITIVE.....	ssd.....	114
simpesse.....	102	sodium phenylbutyrate.....	sss 10-5.....	109
SIMPONI.....	24	sodium polystyrene	STALEVO 100.....	81
SIMPONI ARIA.....	24	sulfonate.....	STALEVO 125.....	81
simvastatin.....	66	sodium sulfacetamide wash.....	STALEVO 150.....	81
SINEMET.....	81	SODIUM SULFACETAMIDE-	STALEVO 200.....	81
SINGULAIR.....	42	BAKUCHIOL.....	STALEVO 50.....	81
sirolimus.....	149	SOFOSBUVIR-	STALEVO 75.....	81
SIRTURO.....	72	VELPATASVIR.....	STAMARIL.....	184
SITAGLIPTIN.....	56	SOGROYA.....	stavudine.....	86
SKYRIZI.....	113,127	solifenacin succinate.....	STEARIC ACID.....	171
SKYRIZI (150 MG DOSE).....	113	SOLQUA.....	STEGLATRO.....	60
SKYRIZI PEN.....	113	SOLU-CORTEF.....	STEGLUJAN.....	55
SKYTROFA.....	122	SOLU-MEDROL.....	STELARA.....	113,127
SM DELUXE REUSABLE		SOLU-MEDROL (PF).....	sterile water for injection.....	170
COMPRESS.....	140	sorafenib tosylate.....	STERILE WATER FOR	
sm esomeprazole		sorbitol solution.....	INJECTION.....	170
magnesium.....	180	sorine.....	STEVIA EXTRACT.....	97
sm glucosamine hcl.....	20	sotalol hcl.....	STEVIA GLYCERITE	
sm mineral oil.....	138	sotalol hcl (af).....	EXTRACT.....	169
sod citrate-citric acid.....	129	SOTYKTU.....	STIOLTO RESPIMAT.....	44
SOD FLUORIDE-POTASSIUM		SOTYLIZE.....	STIVARGA.....	78
NITRATE.....	151	SOVALDI.....	STRATTERA.....	17
sodium bicarbonate.....	36	SPEARMINT FLAVOR.....	STRAWBERRY FLAVOR.....	169
SODIUM BICARBONATE.....	97	SPEARMINT OS.....	STRAWBERRY OS.....	169
SODIUM CHLORIDE.....	117	SPEVIGO.....	STRENSIQ.....	123
sodium chloride.....	129,148	SPIKEVAX.....	STRIBILD.....	86
sodium chloride		SPIKEVAX COVID-19	STRIVERDI RESPIMAT.....	44
bacteriostatic.....	170	VACCINE.....	SUBLOCADE.....	34
sodium chloride eye products		SPINOSAD.....	SUBOXONE.....	34
(MURO 128).....	162	SPIRIVA HANDIHALER.....	subvenite.....	49
sodium chloride flush.....	148	SPIRIVA RESPIMAT.....	subvenite starter kit-blue.....	49
sodium chloride nasal spray	107	spironolactone.....	subvenite starter kit-green.....	49
SODIUM CHLORIDE NASAL		spironolactone-hctz.....	subvenite starter kit-orange.....	49
SPRAY.....	154	SPORANOX.....	sucralfate.....	179
sodium fluoride.....	147,151	SPORANOX PULSEPAK.....	SULAR.....	92
SODIUM FLUORIDE 5000		SPRAVATO (56 MG DOSE).....	sulfacetamide sodium.....	114,159
ENAMEL.....	151	SPRAVATO (84 MG DOSE).....	SULFACETAMIDE SODIUM.....	159
sodium fluoride 5000 plus.....	151	sprintec 28.....	sulfacetamide sodium (acne).....	109

SULFACETAMIDE SODIUM-	SYMTUZA.....	87	taztia xt.....	92	
SULFUR.....	109	SYNAGIS.....	163	TAZVERIK.....	79
sulfacetamide sodium-sulfur	109	SYNJARDY.....	55	TDVAX.....	178
SULFACETAMIDE-		SYNJARDY XR.....	55	TEABERRY FLAVOR.....	169
PREDNISOLONE.....	161	SYSTANE BALANCE.....	156	TECFIDERA.....	174
sulfacleanse 8/4.....	109	SYSTANE COMPLETE.....	157	TEGRETOL.....	49
sulfadiazine.....	176			TEGRETOL-XR.....	49
sulfamethoxazole-		<b>T</b>		TEKTURNA.....	70
trimethoprim.....	38	TABLOID.....	72	TEKTURNA HCT.....	70
sulfamez wash.....	109	TABRECTA.....	78	telmisartan.....	68
sulfasalazine.....	127	tacrolimus.....	116,149	telmisartan-amlodipine.....	70
sulindac.....	27	tadalafil (pah).....	94	TELMISARTAN-AMLODIPINE.....	70
sumatriptan.....	145	TADLIQ.....	94	telmisartan-hctz.....	70
sumatriptan succinate.....	145	TAFINLAR.....	78,79	temazepam.....	136
sumatriptan succinate refill.....	145	tafluprost (pf).....	162	TEMIXYS.....	87
sumatriptan-naproxen		TAGRISO.....	73	temozolomide.....	72
sodium.....	144	TAKHZYRO.....	132	TENIVAC.....	178
sunitinib malate.....	78	TALTZ.....	113	tenofovir disoproxil fumarate.....	87
SUNLENCA.....	87	TALZENNA.....	79	TENORETIC 100.....	70
SUNOSI.....	17	TAMIFLU.....	89	TENORETIC 50.....	70
SUPER SYNERSWEET		tamoxifen citrate.....	74	TENORMIN.....	90
FLAVOR.....	169	tamsulosin hcl.....	130	TEPMETKO.....	79
SUPRAX.....	96	tandem plus.....	135	terazosin hcl.....	68,69
SUREPRESS HI COMPRESS		TANGERINE FLAVOR.....	169	terbinafine (LAMISIL).....	111
BANDAGE.....	140	TANGERINE FLAVOR		terbinafine hcl.....	62
swabflush saline flush.....	148	SWEETENED.....	169	terbutaline sulfate.....	44
SWEET CORN FLAVOR.....	169	tarina 24 fe.....	102	terconazole.....	185
SWEET DROPS.....	169	tarina fe 1/20.....	102	teriflunomide.....	174
SWEETENING		tarina fe 1/20 eq.....	102	teriparatide.....	122
ENHANCER.....	169	Taron Forte.....	135	teriparatide (recombinant).....	122
syeda.....	102	TARPEYO.....	106	TERIPARATIDE	
symax-sl.....	178	TASCENSO ODT.....	174	(RECOMBINANT).....	122
symax-sr.....	178	TASIGNA.....	79	TESTIM.....	35
SYMBICORT.....	44	tasimelteon.....	137	testosterone.....	35
SYMBYAX.....	172	TASMAR.....	80	TESTOSTERONE.....	35
SYMDEKO.....	176	tavaborole.....	111	testosterone cypionate.....	35
SYMJEPI.....	185	TAVNEOS.....	132	tetrabenazine.....	173
SYMLINPEN 120.....	54	taysofy.....	102	TETRACAINE.....	97
SYMLINPEN 60.....	54	TAZAROTENE.....	109	TETRACAINE HCL.....	97
SYMPAZAN.....	46	tazarotene.....	113	tetracaine hcl.....	160
SYMPROIC.....	128	tazicef.....	96	tetracycline hcl.....	176

tetrahydrazoline drops (VISINE)	159	TOFIDENCE	25	tretinoin	79,109
TEZSPIRE	41	tolcapone	80	tretinoin microsphere	109
THALOMID	148	tolnaftate (TINACTIN)	111	tretinoin microsphere pump	109
theophylline	44	TOLSURA	63	TRETTEN	131
theophylline er	44	tolterodine tartrate	181	TREXIMET	144
thiamine (vitamin B1)	186	tolterodine tartrate er	181	tri femynor	102
THICK-IT	170	tolvaptan	124	tri-estarylla	102
thioridazine hcl	84	TOPAMAX	49	tri-legest fe	102
thiotepa	72	TOPAMAX SPRINKLE	49	tri-lynyah	103
thiothixene	84	topiramate	49	tri-lo-estarylla	103
THYQUIDITY	177	TOPIRAMATE	49	tri-lo-marzia	103
THYROID	177	topiramate er	49	tri-lo-mili	103
tiadylt er	92	TOPROL XL	90	tri-lo-sprintec	103
tiagabine hcl	50	toremifene citrate	74	tri-mili	103
THIAZAC	92	torpenz	79	tri-nymyo	103
TIBSOVO	79	torse mide	121	tri-previfem	103
TICOVAC	184	TOSYMRA	145	tri-sprintec	103
tilia fe	102	TOUJEO MAX SOLOSTAR	59	TRI-VI-SOL A/C/D	153
timolol hemihydrate	157	TOUJEO SOLOSTAR	59	tri-vylibra	103
timolol maleate	91,157	TOVIAZ	181	tri-vylibra lo	103
timolol maleate (once-daily)	157	TRACLEER	94	triamcinolone acetonide	115
timolol maleate ocudose	157	TRADJENTA	56	triamcinolone acetonide (NASACORT)	154
timolol maleate pf	157	tramadol hcl	32	triamterene-hctz	120
TIMOPTIC	157	tramadol hcl (er biphasic)	32	triazolam	136
TIMOPTIC OCUDOSE	157	TRAMADOL HCL ER	32	TRIBENZOR	70
TIMOPTIC-XE	157	tramadol-acetaminophen	33	TRICOR	65
tinidazole	37	trandolapril	67	TRICOR	65
tioconazole (VAGISTAT)	185	TRANDOLAPRIL-VERAPAMIL HCL ER	70	triderm	115
tiopronin	130	tranexamic acid	136	trientine hcl	148
tiotropium bromide monohydrate	41	TRANSDERM SCOP (1.5 MG)	62	TRIESENCE	161
tis-u-sol	150	TRANSDERM-SCOP	62	trifluoperazine hcl	84
TIVICAY	87	tranylcypramine sulfate	52	trihexyphenidyl hcl	80
TIVICAY PD	87	TRAVATAN Z	162	TRIHEXYPHENIDYL HCL	80
tizanidine hcl	154	travoprost (bak free)	162	TRIJARDY XR	55
TOBI	20	trazodone hcl	53	TRIKAFTA	176
TOBI PODHALER	20	TRELEGY ELLIPTA	44	TRILEPTAL	49
tobramycin	20,21,159	TREMFYA	113	TRILIPIX	66
tobramycin sulfate	21	TRESIBA	59	trilyte	137
tobramycin-dexamethasone	161	TRESIBA FLEXTOUCH	59	trimethobenzamide hcl	62
				trimethoprim	37
				TRINTELLIX	53



TRIPTODUR.....	123	TYPHIM VI.....	182	VANILLA BUTTERNUT	
TRITTAB PEPPERMINT		TYRVAYA.....	157	FLAVOR.....	169
ICE.....	169	TYTABRI.....	174	VANILLA FLAVOR.....	170
TRIUMEQ.....	87	TYVASO.....	93	VANILLA OS.....	170
TRIUMEQ PD.....	87	TYVASO DPI INSTITUTIONAL		VANILLIN FLAVOR.....	170
trivora (28).....	103	KIT.....	93	VAQTA.....	184
TROKENDI XR.....	49	TYVASO DPI MAINTENANCE		varenicline tartrate.....	175
trolamine salicylate.....	116	KIT.....	93	varenicline tartrate (starter)...	175
trolamine salicylate		TYVASO DPI TITRATION KIT	93	varenicline tartrate(continue)...	175
(MYOFLEX).....	116	TYVASO REFILL.....	93	VARIVAX.....	184
TROLAMINE SALICYLATE		TYVASO STARTER.....	93	VASCEPA.....	65
(MYOFLEX).....	116	<b>U</b>		VASERETIC.....	70
TROPICAL FUSION OS....	169	UBRELVY.....	143	VASOTEC.....	68
TROPICAL FUSION WS....	169	UCERIS.....	35,106	VAXCHORA.....	182
TROPICAL PUNCH		UDENYCA.....	134	VAXNEUVANCE.....	182
FLAVOR.....	169	unithroid.....	177	VELPHORO.....	128
trospium chloride.....	181	UPLIZNA.....	149	VELSIPITY.....	127
trospium chloride er.....	181	UPTRAVI.....	94	VELTIN.....	109
TRUDHESA.....	144	urea 10% and 20%		VEMLIDY.....	88
TRUE METRIX BLOOD		(CARMOL).....	116	VENCLEXTA.....	73
GLUCOSE TEST.....	120	ursodiol.....	126	VENCLEXTA STARTING	
TRULANCE.....	125	UZEDY.....	82	PACK.....	73
TRULICITY.....	57	<b>V</b>		venlafaxine hcl.....	53
TRUMENBA.....	182	vaginal contraceptive foam...	184	venlafaxine hcl er.....	53
TRUQAP.....	79	valacyclovir hcl.....	89	VENTOLIN HFA.....	44
TRUSOPT.....	162	VALCHLOR.....	112	venxxiva.....	130
TUDORZA PRESSAIR.....	41	valganciclovir hcl.....	87	verapamil hcl.....	92
TUKYSA.....	73	valproic acid.....	51	VERAPAMIL HCL ER.....	92
tulana.....	104	VALSARTAN.....	68	verapamil hcl er.....	92
TUNA FLAVOR.....	169	valsartan.....	68	VERELAN PM.....	92
TUNA TYPE FLAVOR OS..	169	valsartan-hydrochlorothiazide	70	VERKAZIA.....	159
TURALIO.....	79	VALTOCO 10 MG DOSE....	46	VERSACLOZ.....	83
turqoz.....	103	VALTOCO 15 MG DOSE....	46	VERY BERRY OS.....	170
TUTTI FRUTTI		VALTOCO 20 MG DOSE....	46	VERZENIO.....	79
CONCENTRATE.....	169	VALTOCO 5 MG DOSE....	47	VESICARE.....	181
TUTTI FRUTTI FLAVOR...	169	VALTRESX.....	89	VESICARE LS.....	181
TUTTI-FRUTTI FLAVOR...	169	VANCOCIN.....	38	vestura.....	103
TWINRIX.....	184	vancomycin hcl.....	38	VEVYE.....	159
tydemy.....	103	VANFLYTA.....	79	VIBERZI.....	128
TYENNE.....	25			VICTOZA.....	57
TYMLOS.....	122			vienna.....	103

vigabatrin.....	50	vitamin C.....	186	WELLBUTRIN XL.....	51
vigadrone.....	50	VITAMIN C.....	186	wera.....	103
VIGAMOX.....	159	vitamin D.....	185	wheat dextrin powder.....	137
vigpoder.....	50	VITAMIN D.....	186	WIDE-SEAL DIAPHRAGM.....	141
VIIBRYD.....	53	vitamin E.....	186	WILATE.....	131
VIJOICE.....	150	VITAMIN/IRON MASKING		WILD CHERRY FLAVOR.....	170
vilazodone hcl.....	53	AGENT.....	170	WILD CHERRY OS.....	170
VIMPAT.....	49	vitamins / lipotropics.....	153	WILD CHERRY SD FLAVOR.....	170
VIOKACE.....	120	VITRAKVI.....	79	WINLEVI.....	110
violele.....	103	VITRON-C.....	135	WINREVAIR.....	94
VIRACEPT.....	87	VIVJOA.....	63	witch hazel.....	117
VIREAD.....	87	VIZIMPRO.....	73	wixela inhub.....	44
VIRT-FEFA PLUS.....	135	VOGELXO.....	35	wymzya fe.....	103
visine red eye hydrating		VOGELXO PUMP.....	35		
comf.....	159	volnea.....	103	<b>X</b>	
VISTA GEL DRY EYE		VONJO.....	79	X-SEB T 10 % SHAMPOO.....	118
RELIEF.....	157	VONVENDI.....	131	XADAGO.....	81
VISTOGARD.....	61	voriconazole.....	63	XALATAN.....	162
VITAMIN A.....	116	VOSEVI.....	88	XALKORI.....	79
vitamin A.....	185	VOXZOGO.....	123	XARELTO.....	45
vitamin A / vitamin D.....	116	VRAYLAR.....	82	XARELTO STARTER PACK.....	45
VITAMIN A-C-D INFANT.....	153	VUMERITY.....	174	XCOPRI.....	50
VITAMIN A/C/D/		VUSION.....	111	XCOPRI (250 MG DAILY	
INFANT/TODDLER.....	153	VYEPTI.....	143	DOSE).....	49
vitamin B complex.....	152	vyfemla.....	103	XCOPRI (350 MG DAILY	
VITAMIN B COMPLEX.....	152	vylibra.....	103	DOSE).....	49
vitamin B complex (\$0).....	152	VYNDAMAX.....	95	XDEMVY.....	159
vitamin B complex / vitamin C /		VYNDAQEL.....	95	XELJANZ.....	25
biotin / minerals / folic acid.....	152	VYTORIN.....	64	XELJANZ XR.....	25
vitamin B complex / vitamin C /		VYVANSE.....	16	XELPROS.....	162
calcium.....	152	VYZULTA.....	162	XELSTRYM.....	16
vitamin B complex / vitamin C /				XENICAL.....	17
vitamin E / zinc.....	152	<b>W</b>		XENLETA.....	38
vitamin B complex / vitamin C /		WAL-TUSSIN COUGH		XEPI.....	110
zinc / folic acid.....	152	RELIEF.....	106	XERESE.....	114
vitamin B complex		warfarin sodium.....	45	XHANCE.....	155
combinations.....	152	WATERMELON FLAVOR.....	170	XIFAXAN.....	37
VITAMIN B COMPLEX		WEGOVI.....	17	XIGDUO XR.....	55
COMBINATIONS.....	152	WELCHOL.....	65	XIIDRA.....	159
vitamin B12.....	133	WELIREG.....	74	XIPERE.....	161
VITAMIN B12.....	133	WELLBUTRIN SR.....	51	XOFLUZA (40 MG DOSE).....	89

XOFLUZA (80 MG DOSE)...	89	zafirlukast.....	42	ZIPSOR.....	27
XOLAIR.....	41	zaleplon.....	136	ZIRGAN.....	159
XOPENEX HFA.....	44	zarah.....	103	ZITHROMAX.....	139
XOSPATA.....	79	ZARONTIN.....	50	ZITHROMAX TRI-PAK.....	139
XPOVIO (100 MG ONCE		ZARXIO.....	134	ZITHROMAX Z-PAK.....	139
WEEKLY).....	75	ZAVZPRET.....	143	ZITUVIMET.....	56
XPOVIO (40 MG ONCE		zebutal.....	28	ZITUVIO.....	56
WEEKLY).....	75	ZEGALOGUE.....	56	ZOCOR.....	66
XPOVIO (40 MG TWICE		ZEGERID.....	180	ZOFRAN.....	61
WEEKLY).....	75	ZEGERID OTC.....	181	ZOHYDRO ER.....	32
XPOVIO (60 MG ONCE		ZEJULA.....	79	ZOKINVY.....	150
WEEKLY).....	75	ZELBORAF.....	79	ZOLINZA.....	79
XPOVIO (60 MG TWICE		ZEMBRACE SYMTOUCH... 145		zolmitriptan.....	145
WEEKLY).....	75	zenatane.....	110	ZOLOFT.....	53
XPOVIO (80 MG ONCE		ZENPEP.....	120	ZOLPIDEM TARTRATE.....	136
WEEKLY).....	75	zenzedi.....	16	zolpidem tartrate.....	136
XPOVIO (80 MG TWICE		ZEPATIER.....	88	zolpidem tartrate er.....	136
WEEKLY).....	75	ZEPBOUND.....	17	ZOMACTON.....	122
XTAMPZA ER.....	32	ZEPOSIA.....	174	ZOMACTON (FOR ZOMA-JET	
XTANDI.....	74	ZEPOSIA 7-DAY STARTER		10).....	122
xulane.....	103	PACK.....	174	ZOMIG.....	145
XULTOPHY.....	56	ZEPOSIA STARTER KIT... 174		zomig.....	145
XYNTHA.....	131	ZERVIAE.....	162	ZONISADE.....	49
XYNTHA SOLOFUSE.....	131	ZESTORETIC.....	70	zonisamide.....	49
		ZESTRIL.....	68	ZORBTIVE.....	122
		ZETIA.....	66	ZORTRESS.....	149
		ZETONNA.....	155	ZORVOLEX.....	27
<b>Y</b>		ZIAC.....	70	ZORYVE.....	117
yargesa.....	133	ZIANA.....	110	zovia 1/35 (28).....	103
YF-VAX.....	184	zidovudine.....	87	zovia 1/35e (28).....	103
YUFLYMA (1 PEN).....	24	ZIEXTENZO.....	134	ZOVIRAX.....	114
YUFLYMA (2 PEN).....	24	zileuton er.....	42	ZTALMY.....	49
YUFLYMA 2-SYRINGE KIT... 24		ZIMHI.....	61	ZTLIDO 1.8 % PATCH.....	117
YUFLYMA-CD/UC/HS		zinc.....	148	ZUBSOLV.....	34
STARTER.....	24	zinc gluconate.....	148	zumandimine.....	103
YUPELRI.....	41	ZINC OXIDE.....	97	ZURZUVAE.....	51
YUSIMRY.....	24	zinc oxide (DESITIN).....	117	ZYDELIG.....	79
YUTIQ.....	161	zinc sulfate.....	148	ZYFLO.....	42
yuvafem.....	185	ZIOPTAN.....	162	ZYKADIA.....	79
		ziprasidone hcl.....	82	ZYMFENTRA (1 PEN).....	127
<b>Z</b>		ziprasidone mesylate.....	82	ZYMFENTRA (2 PEN).....	128
ZADITOR.....	162				
zafemy.....	103				

ZYMFENTRA (2 SYRINGE)	128
ZYPITAMAG.....	66
ZYPREXA.....	83
ZYPREXA RELPREVV.....	83
ZYPREXA ZYDIS.....	83



PO Box 52  
Minneapolis, MN 55440-0052

612-676-3200 أو 1-800-203-7225 (هذه المكالمة مجانية).

يمكن لمستخدمي الهواتف النصية/لضعاف السمع الاتصال على الرقم  
612-676-6810 أو 1-800-688-2534 (هذه المكالمة مجانية)

8 صباحًا – 5 مساءً, الاثنين – الجمعة

[ucare.org](http://ucare.org)

U3984 (01/2025) U12487 Arabic