



Neighborhood **INTEGRITY** (plan de Medicare-Medicaid) **2020 Formulario: Lista de medicamentos cubiertos**

POR FAVOR LEA: ESTE DOCUMENTO CONTIENE INFORMACIÓN SOBRE LOS MEDICAMENTOS QUE CUBRIMOS EN ESTE PLAN Si tiene preguntas, llame a Neighborhood INTEGRITY al 1-844-812-6896, de 8am a 8pm, de lunes a viernes; 8am a 12pm el sábado. Los sábados por la tarde, domingos y días festivos federales, se le puede pedir que deje un mensaje. Su llamada será devuelta dentro del siguiente día laborable. La llamada es gratuita. TTY: 711. Para obtener más información, visite www.nhpri.org/INTEGRITY. HPMS Approved Formulary File Submission ID: H9576, Version 1. No hemos hecho cambios en este formulario desde el 09/24/2019.

Neighborhood INTEGRITY | *Lista de medicamentos cubiertos 2020 (Formulario)*

Introducción

Este documento se denomina *Lista de medicamentos cubiertos* (también conocido como la Lista de medicamentos). Aquí se le informa qué medicamentos recetados y de venta libre están cubiertos por Neighborhood INTEGRITY. La Lista de medicamentos también le informa si algún medicamento cubierto por Neighborhood INTEGRITY tiene reglas o restricciones especiales. Las palabras importantes y sus definiciones se encuentran en el último capítulo del *Manual del miembro*.

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A. Renuncias de garantías

Esta es la lista de medicamentos que los miembros pueden obtener en Neighborhood INTEGRITY.

- ❖ Neighborhood Health Plan of Rhode Island es un plan de salud que contrata con Medicare y Rhode Island Medicaid para ofrecer beneficios de ambos programas a los inscritos.
- ❖ Tanto los beneficios como la Lista de medicamentos cubiertos y/o de redes de farmacias y proveedores pueden cambiar durante el año. Le enviaremos un aviso antes de realizar un cambio que lo afecte.
- ❖ Se pueden aplicar limitaciones y restricciones. Para obtener más información, comuníquese con el Servicio de atención a los miembros de Neighborhood INTEGRITY o lea el Manual del miembro de Neighborhood INTEGRITY.
- ❖ Usted siempre puede consultar la *Lista de medicamentos cubiertos* actualizada de Neighborhood INTEGRITY en línea en www.nhpri.org/INTEGRITY.
- ❖ ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services at 1-844-812-6896 (TTY 711), 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays and holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- ❖ ATENCIÓN: Si usted habla Español, servicios de asistencia con el idioma, de forma gratuita, están disponibles para usted. Llame a Servicios a los Miembros al 1-844-812-6896 (TTY 711), de 8 am a 8 pm, de lunes a viernes, de 8 am a 12 pm los Sábados. En las tardes de los Sábados, domingos y feriados, se le pedirá que deje un mensaje. Su llamada será devuelta dentro del siguiente día hábil. La llamada es gratuita.
- ❖ ATENÇÃO: Se você fala Português, o idioma, os serviços de assistência gratuita, estão disponíveis para você. Os serviços de chamada em 1-844-812-6896 (TTY 711), 8 am a 8 pm, de segunda a sexta-feira; 8 am a 12 pm no sábado. Nas tardes de sábado, domingos e feriados, você pode ser convidado a deixar uma mensagem. A sua chamada será devolvido no próximo dia útil. A ligação é gratuita.
- ❖ Puede obtener este documento gratis en otros formatos, por ejemplo, letras grandes, Braille o audio. Comuníquese con el Servicio de atención a los miembros llamando al 1-844-812-6896 (TTY 711), de lunes a viernes de 8 a. m. a 8 p. m., y los sábados de 8 a. m. a 12 p. m. Los usuarios de TTY deben llamar al 711. La llamada es gratuita.

Si tiene preguntas, llame a Neighborhood INTEGRITY al 1-844-812-6896 y TTY 711, de lunes a viernes de 8 a. m. a 8 p. m.; y los sábados de 8 a. m. a 12 p. m. La llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.



- ❖ Puede solicitar este documento y los materiales que se publiquen en el futuro en su idioma de preferencia y/o en un formato alternativo, comunicándose con el Servicio de atención a los miembros. Esto se denomina “solicitud vigente”. El Servicio de atención a los miembros registrará su solicitud vigente en el expediente de miembro para que pueda recibir materiales ahora y en el futuro en su idioma y/o formato de preferencia. Puede modificar o cancelar su solicitud vigente en cualquier momento comunicándose con el Servicio de atención a los miembros.

B. Preguntas frecuentes (FAQ)

Encuentre aquí las respuestas a las preguntas que tenga sobre esta *Lista de medicamentos cubiertos*. Puede leer todas las Preguntas frecuentes para tener más información o buscar una pregunta y su respuesta.

B1. ¿Qué medicamentos recetados están en la *Lista de medicamentos cubiertos*? (Para abreviar, también llamamos “Lista de medicamentos” a la *Lista de medicamentos cubiertos*.)

Los medicamentos de la *Lista de medicamentos cubiertos* que empieza en la página 1 son los medicamentos que cubre Neighborhood INTEGRITY. Estos medicamentos se pueden adquirir en las farmacias de nuestra red. Una farmacia pertenece a nuestra red cuando tenemos un contrato con el establecimiento para que trabaje con nosotros y les provea servicios a los miembros. Nos referiremos a estos establecimientos como “farmacias de la red”.

- Neighborhood INTEGRITY cubrirá todos los medicamentos necesarios desde el punto de vista médico que estén en la Lista de medicamentos si:
 - su médico u otro profesional de la salud dice que los necesita para mejorarse o para mantener la salud, **y además**
 - usted adquiere el medicamento recetado en una farmacia de la red Neighborhood INTEGRITY.
- Neighborhood INTEGRITY puede añadir otros requisitos para acceder a ciertos medicamentos (ver pregunta B4 a continuación).

También puede consultar una lista actualizada de los medicamentos que cubrimos en nuestro sitio web, www.nhpri.org/INTEGRITY, o llamando al Servicio de atención a los miembros al 1-844-812-6896 (TTY 711).

B2. ¿La Lista de medicamentos cambia alguna vez?

Si tiene preguntas, llame a Neighborhood INTEGRITY al 1-844-812-6896 y TTY 711, de lunes a viernes de 8 a. m. a 8 p. m.; y los sábados de 8 a. m. a 12 p. m. La llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY. IV



Sí, y Neighborhood INTEGRITY debe seguir las normas de Medicare y Medicaid al realizar modificaciones. Podemos incorporar o eliminar medicamentos de la Lista de medicamentos durante el año. También podemos modificar nuestras normas con relación a los medicamentos. Por ejemplo, podemos:

- decidir que pediremos o no pediremos autorización previa para un medicamento. (Autorización previa es el permiso de Neighborhood INTEGRITY para que usted pueda obtener un medicamento).
- Agregar o modificar la cantidad de un medicamento que usted puede obtener (se denomina “límite de cantidad”).
- agregar o modificar las restricciones de tratamiento escalonado de un medicamento. (Tratamiento escalonado significa que usted debe probar un medicamento antes de que le cubramos otro medicamento).

Para obtener más información sobre estas normas que regulan el uso de medicamentos, consulte la pregunta B4.

Si usted está tomando un medicamento que estaba cubierto a **principios** de año, generalmente no eliminaremos ni modificaremos la cobertura de ese medicamento **durante el resto del año** a menos que:

- aparezca en el mercado un nuevo medicamento más económico que funciona igual de bien que un medicamento que está actualmente en la Lista de medicamentos, o
- nos enteremos de que el medicamento no es seguro, o
- el medicamento sea retirado del mercado.

Las preguntas B3 y B6 que figuran a continuación aportan más información sobre lo que sucede cuando se modifica la Lista de medicamentos.

- Usted siempre puede consultar la Lista actualizada de medicamentos de Neighborhood INTEGRITY en línea en www.nhpri.org/INTEGRITY.
- También puede llamar al Servicio de atención a los miembros al 1-844-812-6896 (TTY 711) para consultar la Lista de medicamentos vigente.

B3. ¿Qué sucede si hay una modificación en la Lista de medicamentos?

Algunas modificaciones de la Lista de medicamentos se producen **inmediatamente**. Por ejemplo:

Si tiene preguntas, llame a Neighborhood INTEGRITY al 1-844-812-6896 y TTY 711, de lunes a viernes de 8 a. m. a 8 p. m.; y los sábados de 8 a. m. a 12 p. m. La llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY. V



- **Aparece un nuevo medicamento genérico.** A veces, aparece en el mercado un nuevo medicamento que funciona igual de bien que un medicamento de marca que está incluido en la Lista de medicamentos. Si eso sucede, es posible que eliminemos el medicamento de marca e incorporemos el nuevo medicamento genérico, pero el costo que usted pagará por el nuevo medicamento será el mismo. Cuando incorporemos el nuevo medicamento genérico, también es posible que decidamos conservar el medicamento de marca en la lista pero modifiquemos sus reglas o límites de cobertura.
 - Es posible que no le informemos antes de realizar este cambio, pero le enviaremos información sobre el cambio específico una vez que lo hayamos realizado.
 - Usted o su proveedor pueden solicitar una excepción a estos límites. Le enviaremos una notificación con los pasos a seguir para solicitar una excepción. Para obtener más información sobre las excepciones, lea la pregunta B10.
- **Un medicamento es retirado del mercado.** Si la Administración de Medicamentos y Alimentos (FDA) considera que algún medicamento que usted está tomando no es seguro o el fabricante de un medicamento decide retirarlo del mercado, lo eliminaremos de la Lista de medicamentos. Si usted está tomando dicho medicamento, recibirá una notificación. Le enviaremos una carta donde le aconsejaremos cómo proceder con su proveedor y su farmacéutico.

Es posible que realicemos otros cambios relativos a los medicamentos que usted toma.

En caso de realizar otros cambios a la Lista de medicamentos, se lo notificaremos con anticipación. Estos cambios pueden producirse si:

- la FDA proporciona nuevas pautas o se publican nuevas directrices clínicas sobre un medicamento,
- incorporamos un medicamento genérico que es nuevo en el mercado y
- reemplazamos un medicamento de marca que se encuentra actualmente en la Lista de medicamentos o
- modificamos las reglas o los límites de cobertura para el medicamento de marca.

Cuando se produzcan estos cambios:

- se lo informaremos por lo menos 30 días antes de modificar la Lista de medicamentos o



- se lo informaremos y le proporcionaremos un suministro del medicamento para 30 días cuando usted solicite la reposición.

Esto le dará tiempo de hablar con su médico o con el profesional que le receta el medicamento. Este podrá ayudarle a decidir:

- si hay un medicamento similar en la Lista de medicamentos que usted pueda tomar en su lugar o
- si es conveniente solicitar una excepción a estos cambios. Para obtener más información sobre excepciones, consulte la pregunta B10.

B4. ¿Existen restricciones o limitaciones para la cobertura de medicamentos o requisitos que se deban cumplir para obtener ciertos medicamentos?

Sí, algunos medicamentos tienen requisitos de cobertura o límites en la cantidad que puede obtener. En algunos casos, usted o su médico u otro profesional que recete el medicamento deberán cumplir con ciertos requisitos antes de que usted pueda obtener el medicamento. Por ejemplo:

- **Autorización previa (o aprobación previa):** Para ciertos medicamentos, usted o su médico u otro profesional que recete el medicamento deberán obtener la aprobación de Neighborhood INTEGRITY antes de que usted pueda obtener el medicamento. Neighborhood INTEGRITY podría no cubrir el medicamento si usted no obtiene autorización.
- **Límites de cantidad:** A veces, Neighborhood INTEGRITY limita la cantidad de medicamento que usted puede obtener.
- **Tratamiento escalonado:** A veces, Neighborhood INTEGRITY requiere que usted realice un tratamiento escalonado. Es decir, para el tratamiento de su enfermedad, tendrá que probar medicamentos en un determinado orden. Es posible que tenga que probar un medicamento antes de que le cubramos otro. Si su médico considera que el primer medicamento no funciona para usted, le cubriremos el segundo.

Usted puede averiguar si su medicamento tiene algún otro requisito o límite consultando las tablas que figuran en las páginas 1-148. También puede obtener información visitando nuestro sitio web, www.nhpri.org/INTEGRITY. Hemos publicado documentos en línea que explican nuestras restricciones de autorización previa y tratamiento escalonado. También puede pedirnos que le enviemos una copia.

Puede solicitar una excepción a estos límites. Esto le dará tiempo de hablar con su médico o con el profesional que le receta el medicamento. El médico le ayudará a decidir si hay un

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medicamento similar en la Lista de medicamentos que usted pueda tomar o si debe pedir una excepción. Para obtener más información sobre las excepciones, lea las preguntas B10-B12.

B5. ¿Cómo sabrá si el medicamento que usted quiere tiene limitaciones o si existen requisitos que se deben cumplir para obtener el medicamento?

La *Lista de medicamentos cubiertos* de la página 1 incluye una columna rotulada “Acciones necesarias, restricciones o límites de uso”.

B6. ¿Qué sucede si modificamos nuestras normas sobre algunos medicamentos (por ejemplo, autorización previa (aprobación), límites de cantidad y/o restricciones de tratamiento escalonado sobre un medicamento)?

En algunos casos, le informaremos con anticipación si agregamos o modificamos requisitos de autorización previa, límites de cantidad y/o restricciones de tratamiento escalonado sobre un medicamento. Lea la pregunta B3 para obtener más información sobre esta notificación anticipada y las situaciones en las que quizás no podamos notificarle anticipadamente que se modificarán las reglas sobre los medicamentos que figuran en la Lista de medicamentos.

B7. ¿Cómo puede encontrar un medicamento en la Lista de medicamentos?

Hay dos formas de encontrar un medicamento:

- Puede buscar por orden alfabético (si sabe como se escribe el nombre del medicamento), o
- puede buscar por la enfermedad.

Para buscar **por orden alfabético**, diríjase a la sección Índice de medicamentos cubiertos. Puede encontrarla en la página 149.

Para buscar **por enfermedad**, busque la sección denominada “Lista de medicamentos por enfermedad” en la página 1. En esta sección, los medicamentos están agrupados en categorías según el tipo de enfermedad para la que se utilizan. Por ejemplo, si usted tiene una enfermedad del corazón, debe buscar en la categoría Agentes cardiovasculares - Medicamentos para tratar enfermedades cardíacas y circulatorias. Allí encontrará los medicamentos para tratar las enfermedades del corazón.



B8. ¿Qué sucede si el medicamento que quiere tomar no está en la Lista de medicamentos?

Si no lo encuentra en la Lista de medicamentos, llame al Servicio de atención a los miembros al 1-844-812-6896 (TTY 711) y pregunte por el medicamento. Si averigua que Neighborhood INTEGRITY no cubre ese medicamento, tiene las siguientes opciones:

- Pedir al Servicio de atención a los miembros una lista de medicamentos similares al que quiere tomar. Después mostrarle la lista a su médico o el profesional que le receta el medicamento. El médico puede recetarle un medicamento de la Lista de medicamentos que sea similar al que usted quiere tomar. **O**
- pedirle al plan de salud que haga una excepción y cubra el medicamento. Para obtener más información sobre las excepciones, lea las preguntas B10-B12.

B9. ¿Qué sucede si usted es un nuevo miembro de Neighborhood INTEGRITY y no puede encontrar su medicamento en la Lista de medicamentos o tiene problemas para obtener su medicamento?

Nosotros podemos ayudar. Podemos cubrir un suministro temporal para 30 días de su medicamento Parte D o un suministro para 90 días de su medicamento cubierto por Rhode Island Medicaid durante los primeros 90 días si usted es Miembro de Neighborhood INTEGRITY. Esto le dará tiempo de hablar con su médico o con el profesional que le receta el medicamento. El médico le ayudará a decidir si hay un medicamento similar en la Lista de medicamentos que usted pueda tomar o si debe pedir una excepción.

Si se le extiende una receta por menos días, autorizaremos múltiples reposiciones para proveer hasta un suministro máximo de medicación para 30 días de un medicamento incluido en la Parte D y un suministro para 90 días de un medicamento cubierto por Rhode Island Medicaid.

Cubriremos un suministro para 30 días de su medicamento Parte D o un suministro para 90 días de su medicamento cubierto por Rhode Island Medicaid si:

- usted está tomando un medicamento que no está en la Lista de medicamentos, **O**
- las reglas del plan de salud no le permiten obtener la cantidad indicada por el médico que le extendió la receta, **O**
- el medicamento requiere autorización previa de Neighborhood INTEGRITY, **O**
- usted está tomando un medicamento que tiene una restricción de tratamiento escalonado.

Si tiene preguntas, llame a Neighborhood INTEGRITY al 1-844-812-6896 y TTY 711, de lunes a viernes de 8 a. m. a 8 p. m.; y los sábados de 8 a. m. a 12 p. m. La llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.



Si usted está en un hogar para personas de edad avanzada o en otro establecimiento de cuidados por tiempo prolongado y necesita un medicamento que no está en la Lista de medicamentos, o si no puede obtener fácilmente el medicamento que necesita, podemos ayudarle. Si usted ha estado en el plan durante más de 90 días, vive en un establecimiento de cuidado a largo plazo y necesita un suministro inmediatamente:

- Cubriremos un suministro para **31 días** del medicamento que necesita (salvo que tenga una receta para menos días), independientemente de que usted sea o no sea un miembro nuevo de Neighborhood INTEGRITY.
- Esto es adicional al suministro temporal durante los primeros 90 días que usted es Miembro de Neighborhood INTEGRITY.

Si su nivel de atención cambia y necesita un suministro inmediatamente:

- Cubriremos un suministro para 31 días del medicamento que necesita si usted vive en un establecimiento de cuidados por tiempo prolongado, o
- Cubriremos un suministro para 30 días del medicamento que necesita si usted **no** vive en un establecimiento de cuidados por tiempo prolongado.

B10. ¿Puede solicitar una excepción que cubra su medicamento?

Sí. Puede pedirle a Neighborhood INTEGRITY que haga una excepción y cubra el medicamento que no está en la Lista de medicamentos.

También puede pedirnos que modifiquemos las reglas que se aplican a su medicamento.

- Por ejemplo, Neighborhood INTEGRITY puede limitar la cantidad de medicamento que cubrimos. Si su medicamento tiene un límite, puede pedirnos que modifiquemos el límite para que cubramos más cantidad.
- Otros ejemplos: Puede solicitarnos que no se apliquen las restricciones de tratamiento escalonado o autorización previa.

B11. ¿Cómo puedo solicitar una excepción?

Para solicitar una excepción, comuníquese con el Servicio de atención a los miembros. El Servicio de atención a los miembros trabajará con usted y su proveedor para ayudarle a solicitar una excepción. También puede leer el Capítulo 9 del *Manual del miembro* para obtener más información sobre las excepciones.

B12. ¿Cuánto demora obtener una excepción?

Si tiene preguntas, llame a Neighborhood INTEGRITY al 1-844-812-6896 y TTY 711, de lunes a viernes de 8 a. m. a 8 p. m.; y los sábados de 8 a. m. a 12 p. m. La llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.



Primero, debemos recibir una declaración del médico que le da la receta en la que respalde su pedido de excepción. Después de recibir la declaración, tomaremos nuestra determinación sobre su pedido de excepción y le informaremos en un plazo de 72 horas.

Si usted o su médico consideran que su salud se puede perjudicar si tiene que esperar 72 horas para obtener nuestra decisión puede solicitar una excepción acelerada. Se trata de una decisión más rápida. Si su médico respalda su pedido, le informaremos nuestra decisión dentro de las 24 horas de recibida la declaración de respaldo de su médico.

B13. ¿Qué son los medicamentos genéricos?

Los medicamentos genéricos están preparados con los mismos ingredientes activos que los medicamentos de marca. Por lo general, cuestan menos que los medicamentos de marca y por lo general no tienen nombres muy conocidos. Los medicamentos genéricos están aprobados por la Administración de Medicamentos y Alimentos (FDA).

Neighborhood INTEGRITY cubre medicamentos de marca y medicamentos genéricos.

B14. ¿Qué son los medicamentos de venta libre (OTC)?

OTC es la sigla de “over-the-counter”, que significa “de venta libre”. Neighborhood INTEGRITY cubre algunos medicamentos OTC cuando están recetados por su proveedor médico.

Puede consultar la Lista de medicamentos de Neighborhood INTEGRITY para ver qué medicamentos OTC están cubiertos.

B15. ¿Cuál es el copago?

Como miembro del plan Neighborhood INTEGRITY, usted no tiene que pagar copagos para los medicamentos recetados y OTC siempre y cuando usted cumpla con las reglas de Neighborhood INTEGRITY.

B16. ¿Qué son los niveles de medicamentos?

Los niveles son grupos de medicamentos incluidos en la Lista de medicamentos.

- Los medicamentos del Nivel 1 son los genéricos.
- Los medicamentos del Nivel 2 son los de marca.
- Los medicamentos del Nivel 3 son los OTC.

Ninguno de los niveles tiene copagos.

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C. Breve resumen de la Lista de medicamentos cubiertos

La *Lista de medicamentos cubiertos* le proporciona información sobre los medicamentos que cubre Neighborhood INTEGRITY. Si tiene problemas para encontrar su medicamento en la lista, consulte el Índice de medicamentos cubiertos que comienza en la página 149. En el índice encontrará una lista de todos los medicamentos cubiertos por Neighborhood INTEGRITY en orden alfabético.

Nota: La inscripción **DP** al lado de un medicamento significa que el medicamento no es un “medicamento de la Parte D”. El monto que usted paga cuando adquiere este medicamento bajo receta no se tiene en consideración para calcular sus costos totales de medicamentos (es decir que el monto que paga no lo ayuda a calificar para cobertura catastrófica).

- Además, si está recibiendo Ayuda Adicional para pagar por sus recetas, no recibirá Ayuda Adicional para pagar estos medicamentos. Para obtener más información sobre Ayuda Adicional, consulte el recuadro que aparece a continuación.

Ayuda Adicional es un programa de Medicare que ayuda a las personas con ingresos y recursos limitados a reducir los costos de medicamentos recetados de Medicare Parte D, como primas, deducibles y copagos. La Ayuda adicional también se llama “Subsidio por bajos ingresos” o “LIS.”

- Estos medicamentos también tienen diferentes reglas para las apelaciones. Una apelación es un recurso formal para pedir una revisión de la decisión de cobertura y modificarla si cree que hemos cometido un error. Por ejemplo, nosotros podríamos decidir que un medicamento que usted quiere no está cubierto o ha dejado de estar cubierto por Medicare o Rhode Island Medicaid.
- Si usted o su médico no están de acuerdo con nuestra decisión, puede presentar una apelación. Para pedir instrucciones sobre la forma de apelar, comuníquese con el Servicio de atención a los miembros llamando al 1-844-812-6896 (TTY 711). También puede leer el Capítulo 9 del *Manual del miembro* para saber cómo apelar una decisión.



C1. Lista de medicamentos por enfermedad

En esta sección, los medicamentos están agrupados en categorías según el tipo de enfermedad para la que se utilizan. Por ejemplo, si usted tiene una enfermedad del corazón, debe buscar en la categoría Agentes cardiovasculares - Medicamentos para tratar enfermedades cardíacas y circulatorias. Allí encontrará los medicamentos para tratar las enfermedades del corazón.

Significado de los códigos usados en la columna “Acciones necesarias, restricciones o límites de uso”:

B/D = Este medicamento recetado tiene un requisito administrativo de autorización previa de la Parte B versus D. Es decir que este medicamento puede estar cubierto por Medicare Parte B o D según las circunstancias. Es posible que se deba enviar información sobre el uso y el lugar de administración del medicamento para tomar la determinación.

DP = Este medicamento no corresponde a la Parte D.

QL = Límite de cantidad. Para ciertos medicamentos, Neighborhood INTEGRITY limita la cantidad de medicamento que cubrirá Neighborhood INTEGRITY.

ST = Tratamiento escalonado. En algunos casos, Neighborhood INTEGRITY requiere que usted primero pruebe cierto medicamento para tratar una determinada enfermedad antes de que cubramos otro medicamento para su enfermedad. Por ejemplo, si el *Medicamento A* y el *Medicamento B* se usan ambos para tratar su enfermedad, quizás Neighborhood INTEGRITY no cubra el *Medicamento B* si primero no prueba el *Medicamento A*. Si el *Medicamento A* no le da resultados, entonces Neighborhood INTEGRITY cubrirá el *Medicamento B*.

PA = Autorización previa. Neighborhood INTEGRITY requiere que usted o su médico obtengan autorización previa para ciertos medicamentos. Esto significa que usted deberá obtener aprobación de Neighborhood INTEGRITY antes de obtener el medicamento. Neighborhood INTEGRITY podría no cubrir el medicamento si usted no obtiene autorización.

NDS = Suministro por tiempo no extendido. Este medicamento no está disponible para un suministro mayor a 30 días.

LA = Acceso limitado. Este medicamento solo está disponible a través de ciertas farmacias especializadas.



RI_CY20_2T_MMP eff 01/01/2020

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List of Drugs by Medical Condition

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION

GOUT - DRUGS TO TREAT GOUT

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

MISCELLANEOUS

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

PA - Prior Authorization QL - Quantity Limits ST - Step Therapy B/D - Covered
under Medicare B or D LA - Limited Access NDS - Non-Extended Days Supply DP
- The drug is not a Part D drug.

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

NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION

<i>celecoxib cap 50 mg</i>	\$0 (Tier 1) QL (240 caps / 30 days)
<i>celecoxib cap 100 mg</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>celecoxib cap 200 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>celecoxib cap 400 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>diclofenac potassium tab 50 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>diclofenac sodium tab delayed release 25 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab delayed release 50 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>diclofenac sodium tab delayed release 75 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab er 24hr 100 mg</i>	\$0 (Tier 1)
<i>diflunisal tab 500 mg</i>	\$0 (Tier 1)
<i>etodolac cap 200 mg</i>	\$0 (Tier 1)
<i>etodolac cap 300 mg</i>	\$0 (Tier 1)
<i>etodolac tab 400 mg</i>	\$0 (Tier 1)
<i>etodolac tab 500 mg</i>	\$0 (Tier 1)
<i>etodolac tab er 24hr 400 mg</i>	\$0 (Tier 1)
<i>etodolac tab er 24hr 500 mg</i>	\$0 (Tier 1)
<i>etodolac tab er 24hr 600 mg</i>	\$0 (Tier 1)
<i>flurbiprofen tab 50 mg</i>	\$0 (Tier 1)
<i>flurbiprofen tab 100 mg</i>	\$0 (Tier 1)
<i>ibuprofen dro 50/1.25</i>	\$0 (Tier 3) DP
<i>ibuprofen ib chw 100mg</i>	\$0 (Tier 3) DP
<i>ibuprofen jr chw 100mg</i>	\$0 (Tier 3) DP
<i>ibuprofen sus 100/5ml</i>	\$0 (Tier 3) DP
<i>ibuprofen susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>ibuprofen tab 400 mg</i>	\$0 (Tier 1)
<i>ibuprofen tab 600 mg</i>	\$0 (Tier 1)
<i>ibuprofen tab 800 mg</i>	\$0 (Tier 1)
<i>medi-profen sus 40mg/ml</i>	\$0 (Tier 3) DP
<i>meloxicam tab 7.5 mg</i>	\$0 (Tier 1)
<i>meloxicam tab 15 mg</i>	\$0 (Tier 1)
<i>nabumetone tab 500 mg</i>	\$0 (Tier 1)
<i>nabumetone tab 750 mg</i>	\$0 (Tier 1)
<i>naproxen dr tab 375mg</i>	\$0 (Tier 1)
<i>naproxen dr tab 500mg</i>	\$0 (Tier 1)
<i>naproxen sodium tab 275 mg</i>	\$0 (Tier 1)
<i>naproxen sodium tab 550 mg</i>	\$0 (Tier 1)
<i>naproxen tab 250 mg</i>	\$0 (Tier 1)
<i>naproxen tab 375 mg</i>	\$0 (Tier 1)
<i>naproxen tab 500 mg</i>	\$0 (Tier 1)
<i>piroxicam cap 10 mg</i>	\$0 (Tier 1)
<i>piroxicam cap 20 mg</i>	\$0 (Tier 1)
<i>sm ibuprofen tab 100mg jr</i>	\$0 (Tier 3) DP
<i>sulindac tab 150 mg</i>	\$0 (Tier 1)
<i>sulindac tab 200 mg</i>	\$0 (Tier 1)

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

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	\$0 (Tier 1) QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	\$0 (Tier 1) QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	\$0 (Tier 1) QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>buprenorphine td patch weekly 5 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 10 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 15 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 20 mcg/hr</i>	\$0 (Tier 1) QL (4 patches / 28 days), PA
<i>butorphanol tartrate inj 1 mg/ml</i>	\$0 (Tier 2)
<i>butorphanol tartrate inj 2 mg/ml</i>	\$0 (Tier 2)
<i>nalbuphine hcl inj 10 mg/ml</i>	\$0 (Tier 2)
<i>nalbuphine hcl inj 20 mg/ml</i>	\$0 (Tier 2)
<i>tramadol hcl tab 50 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)

OPIOID ANALGESICS, CII - DRUGS TO TREAT PAIN

<i>fentanyl citrate lozenge on a handle 200 mcg</i>	\$0 (Tier 2) NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	\$0 (Tier 2) NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	\$0 (Tier 2) NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	\$0 (Tier 2) NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	\$0 (Tier 2) NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	\$0 (Tier 2) NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	\$0 (Tier 1) QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 25 mcg/hr</i>	\$0 (Tier 1) QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 50 mcg/hr</i>	\$0 (Tier 1) QL (10 patches / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>fentanyl td patch 72hr 75 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	\$0 (Tier 1)	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	\$0 (Tier 1)	QL (150 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	\$0 (Tier 1)	QL (600 mL / 30 days)
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	\$0 (Tier 2)	B/D
<i>hydromorphone hcl tab 2 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
HYSINGLA ER TAB 20 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 30 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 40 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 60 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 80 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 100 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 120 MG	\$0 (Tier 2)	QL (30 tabs / 30 days), PA
<i>methadone con 10mg/ml</i>	\$0 (Tier 1)	QL (90 mL / 30 days), PA
<i>methadone hcl soln 5 mg/5ml</i>	\$0 (Tier 1)	QL (450 mL / 30 days), PA
<i>methadone hcl soln 10 mg/5ml</i>	\$0 (Tier 1)	QL (450 mL / 30 days), PA
<i>methadone hcl tab 5 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA
<i>methadone hcl tab 10 mg</i>	\$0 (Tier 1)	QL (90 tabs / 30 days), PA

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **B/D** - Covered under Medicare B or D
LA - Limited Access **NDS** - Non-Extended Days Supply **DP** - The drug is not a Part D drug.

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
MORPHINE SUL INJ 2MG/ML	\$0 (Tier 2) B/D
MORPHINE SUL INJ 4MG/ML	\$0 (Tier 2) B/D
MORPHINE SUL INJ 5MG/ML	\$0 (Tier 2) B/D
MORPHINE SUL INJ 8MG/ML	\$0 (Tier 2) B/D
MORPHINE SUL INJ 10MG/ML	\$0 (Tier 2) B/D
MORPHINE SUL INJ 150/30ML	\$0 (Tier 2) B/D
<i>morphine sulfate inj 8 mg/ml</i>	\$0 (Tier 2) B/D
<i>morphine sulfate inj 10 mg/ml</i>	\$0 (Tier 2) B/D
<i>morphine sulfate iv soln 1 mg/ml</i>	\$0 (Tier 2) B/D
<i>morphine sulfate iv soln pf 4 mg/ml</i>	\$0 (Tier 2) B/D
<i>morphine sulfate iv soln pf 8 mg/ml</i>	\$0 (Tier 2) B/D
<i>morphine sulfate iv soln pf 10 mg/ml</i>	\$0 (Tier 2) B/D
<i>morphine sulfate oral soln 10 mg/5ml</i>	\$0 (Tier 1) QL (900 mL / 30 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	\$0 (Tier 1) QL (900 mL / 30 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) QL (180 mL / 30 days)
<i>morphine sulfate tab 15 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>morphine sulfate tab er 15 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 30 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 60 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 100 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 200 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
NUCYNTA ER TAB 50MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 100MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 150MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 200MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 250MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
<i>oxycodone hcl cap 5 mg</i>	\$0 (Tier 1) QL (180 caps / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) QL (180 mL / 30 days)

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **B/D** - Covered under Medicare B or D
LA - Limited Access **NDS** - Non-Extended Days Supply **DP** - The drug is not a Part D drug.

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>oxycodone hcl soln 5 mg/5ml</i>	\$0 (Tier 1) QL (900 mL / 30 days)
<i>oxycodone hcl tab 5 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	\$0 (Tier 1) QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	\$0 (Tier 1) QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
OXYCONTIN TAB 10MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA
OXYCONTIN TAB 15MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA
OXYCONTIN TAB 20MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA
OXYCONTIN TAB 30MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA
OXYCONTIN TAB 40MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA
OXYCONTIN TAB 60MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA
OXYCONTIN TAB 80MG CR	\$0 (Tier 2) QL (60 tabs / 30 days), PA

ANESTHETICS - DRUGS FOR NUMBING

LOCAL ANESTHETICS

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

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS****ANTI-BACTERIALS - MISCELLANEOUS**

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	\$0 (Tier 1)
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 0.8 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1.2 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1.6 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 2 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin sulfate inj 10 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin sulfate inj 40 mg/ml</i>	\$0 (Tier 1)
<i>neomycin sulfate tab 500 mg</i>	\$0 (Tier 1)
<i>paromomycin sulfate cap 250 mg</i>	\$0 (Tier 1)
<i>streptomycin sulfate for inj 1 gm</i>	\$0 (Tier 2) NDS
SULFADIAZINE TAB 500MG	\$0 (Tier 2)
<i>tobramycin nebu soln 300 mg/5ml</i>	\$0 (Tier 2) NDS, PA
<i>tobramycin sulfate for inj 1.2 gm</i>	\$0 (Tier 2) NDS
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	\$0 (Tier 2) NDS
ALINIA SUS 100/5ML	\$0 (Tier 2) NDS
ALINIA TAB 500MG	\$0 (Tier 2) NDS
<i>atovaquone susp 750 mg/5ml</i>	\$0 (Tier 2) NDS
<i>aztreonam for inj 1 gm</i>	\$0 (Tier 1)
<i>aztreonam for inj 2 gm</i>	\$0 (Tier 1)
CAYSTON INH 75MG	\$0 (Tier 2) NDS, LA, PA
<i>clindamycin hcl cap 75 mg</i>	\$0 (Tier 1)
<i>clindamycin hcl cap 150 mg</i>	\$0 (Tier 1)
<i>clindamycin hcl cap 300 mg</i>	\$0 (Tier 1)
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 9 gm/60ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 300 mg/2ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 600 mg/4ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 900 mg/6ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate iv soln 300 mg/2ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate iv soln 900 mg/6ml</i>	\$0 (Tier 1)
CLINDMYC/NAC INJ 300/50ML	\$0 (Tier 2)
CLINDMYC/NAC INJ 600/50ML	\$0 (Tier 2)
CLINDMYC/NAC INJ 900/50ML	\$0 (Tier 2)
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	\$0 (Tier 1)
<i>dapsone tab 25 mg</i>	\$0 (Tier 1)
<i>dapsone tab 100 mg</i>	\$0 (Tier 1)
<i>daptomycin for iv soln 500 mg</i>	\$0 (Tier 2) NDS
DAPTOMYCIN SOL 350MG	\$0 (Tier 2) NDS
EMVERM CHW 100MG	\$0 (Tier 2) NDS, QL (12 tabs / 365 days)
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 1)
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	\$0 (Tier 1)
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	\$0 (Tier 1)
<i>ivermectin tab 3 mg</i>	\$0 (Tier 1)
<i>linezolid for susp 100 mg/5ml</i>	\$0 (Tier 2) NDS
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	\$0 (Tier 2)
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	\$0 (Tier 1)
<i>linezolid tab 600 mg</i>	\$0 (Tier 1)
<i>meropenem iv for soln 1 gm</i>	\$0 (Tier 1)
<i>meropenem iv for soln 500 mg</i>	\$0 (Tier 1)
<i>methenamine hippurate tab 1 gm</i>	\$0 (Tier 1)
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>metronidazole tab 250 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>metronidazole tab 500 mg</i>	\$0 (Tier 1)
NEBUPENT INH 300MG	\$0 (Tier 2) B/D
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	\$0 (Tier 2)
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	\$0 (Tier 2)
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	\$0 (Tier 2)
PENTAM 300 INJ 300MG	\$0 (Tier 2)
<i>pentamidine isethionate for soln 300 mg</i>	\$0 (Tier 1)
PINWORM TAB MEDICINE	\$0 (Tier 3) DP
<i>praziquantel tab 600 mg</i>	\$0 (Tier 1)
<i>reeses med sus pinworm</i>	\$0 (Tier 3) DP
SIVEXTRO INJ 200MG	\$0 (Tier 2) NDS
SIVEXTRO TAB 200MG	\$0 (Tier 2) NDS
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	\$0 (Tier 1)
<i>sulfamethoxazole-trimethoprim susp 200- 40 mg/5ml</i>	\$0 (Tier 1)
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	\$0 (Tier 1)
<i>sulfamethoxazole-trimethoprim tab 800- 160 mg</i>	\$0 (Tier 1)
SYNERCID INJ 500MG	\$0 (Tier 2) NDS
<i>tigecycline for iv soln 50 mg</i>	\$0 (Tier 2) NDS
<i>trimethoprim tab 100 mg</i>	\$0 (Tier 1)
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (240 caps / 30 days)
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	\$0 (Tier 1)
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	\$0 (Tier 1)
VANCOMYCIN INJ 1 GM	\$0 (Tier 2)
VANCOMYCIN INJ 500MG	\$0 (Tier 2)
VANCOMYCIN INJ 750MG	\$0 (Tier 2)

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

ABELCET INJ 5MG/ML	\$0 (Tier 2) NDS, B/D
AMBISOME INJ 50MG	\$0 (Tier 2) NDS, B/D
<i>amphotericin b for iv soln 50 mg</i>	\$0 (Tier 1) B/D
<i>caspofungin acetate for iv soln 50 mg</i>	\$0 (Tier 2) NDS
<i>caspofungin acetate for iv soln 70 mg</i>	\$0 (Tier 2) NDS
<i>fluconazole for susp 10 mg/ml</i>	\$0 (Tier 1)
<i>fluconazole for susp 40 mg/ml</i>	\$0 (Tier 1)
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	\$0 (Tier 1)
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	\$0 (Tier 1)
<i>fluconazole tab 50 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 100 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 150 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 200 mg</i>	\$0 (Tier 1)
<i>flucytosine cap 250 mg</i>	\$0 (Tier 2) NDS
<i>flucytosine cap 500 mg</i>	\$0 (Tier 2) NDS
<i>griseofulvin microsize susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>griseofulvin microsize tab 500 mg</i>	\$0 (Tier 1)
<i>griseofulvin ultramicrosize tab 125 mg</i>	\$0 (Tier 1)
<i>griseofulvin ultramicrosize tab 250 mg</i>	\$0 (Tier 1)
<i>itraconazole cap 100 mg</i>	\$0 (Tier 1) PA
<i>ketoconazole tab 200 mg</i>	\$0 (Tier 1) PA
MYCAMINE INJ 50MG	\$0 (Tier 2) NDS
MYCAMINE INJ 100MG	\$0 (Tier 2) NDS
NOXAFIL SUS 40MG/ML	\$0 (Tier 2) NDS, QL (630 mL / 30 days)
NOXAFIL TAB 100MG	\$0 (Tier 2) NDS, QL (93 tabs / 30 days)
<i>nystatin tab 500000 unit</i>	\$0 (Tier 1)
<i>terbinafine hcl tab 250 mg</i>	\$0 (Tier 1) QL (90 tabs / year)
<i>voriconazole for inj 200 mg</i>	\$0 (Tier 2) NDS, PA
<i>voriconazole for susp 40 mg/ml</i>	\$0 (Tier 2) NDS, PA
<i>voriconazole tab 50 mg</i>	\$0 (Tier 1)
<i>voriconazole tab 200 mg</i>	\$0 (Tier 2) NDS

ANTIMALARIALS - DRUGS TO TREAT MALARIA

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	\$0 (Tier 1)
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	\$0 (Tier 1)
<i>chloroquine phosphate tab 250 mg</i>	\$0 (Tier 1)
<i>chloroquine phosphate tab 500 mg</i>	\$0 (Tier 1)
COARTEM TAB 20-120MG	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>mefloquine hcl tab 250 mg</i>	\$0 (Tier 1)
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	\$0 (Tier 1)
PRIMAQUINE TAB 26.3MG	\$0 (Tier 2)
<i>quinine sulfate cap 324 mg</i>	\$0 (Tier 1) PA

ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	\$0 (Tier 1)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	\$0 (Tier 1)
APTIVUS CAP 250MG	\$0 (Tier 2) NDS
APTIVUS SOL	\$0 (Tier 2) NDS
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	\$0 (Tier 1)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	\$0 (Tier 1)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	\$0 (Tier 1)
CRIXIVAN CAP 200MG	\$0 (Tier 2)
CRIXIVAN CAP 400MG	\$0 (Tier 2)
<i>didanosine delayed release capsule 200 mg</i>	\$0 (Tier 1)
<i>didanosine delayed release capsule 250 mg</i>	\$0 (Tier 1)
<i>didanosine delayed release capsule 400 mg</i>	\$0 (Tier 1)
EDURANT TAB 25MG	\$0 (Tier 2) NDS
<i>efavirenz cap 50 mg</i>	\$0 (Tier 1)
<i>efavirenz cap 200 mg</i>	\$0 (Tier 2) NDS
<i>efavirenz tab 600 mg</i>	\$0 (Tier 2) NDS
EMTRIVA CAP 200MG	\$0 (Tier 2)
EMTRIVA SOL 10MG/ML	\$0 (Tier 2)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	\$0 (Tier 2) NDS
FUZEON INJ 90MG	\$0 (Tier 2) NDS
INTELENCE TAB 25MG	\$0 (Tier 2)
INTELENCE TAB 100MG	\$0 (Tier 2) NDS
INTELENCE TAB 200MG	\$0 (Tier 2) NDS
INVIRASE TAB 500MG	\$0 (Tier 2) NDS
ISENTRESS CHW 25MG	\$0 (Tier 2)
ISENTRESS CHW 100MG	\$0 (Tier 2) NDS
ISENTRESS HD TAB 600MG	\$0 (Tier 2) NDS
ISENTRESS POW 100MG	\$0 (Tier 2)
ISENTRESS TAB 400MG	\$0 (Tier 2) NDS
<i>lamivudine oral soln 10 mg/ml</i>	\$0 (Tier 1)
<i>lamivudine tab 150 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>lamivudine tab 300 mg</i>	\$0 (Tier 1)
LEXIVA SUS 50MG/ML	\$0 (Tier 2)
<i>nevirapine susp 50 mg/5ml</i>	\$0 (Tier 1)
<i>nevirapine tab 200 mg</i>	\$0 (Tier 1)
<i>nevirapine tab er 24hr 100 mg</i>	\$0 (Tier 1)
<i>nevirapine tab er 24hr 400 mg</i>	\$0 (Tier 1)
NORVIR POW 100MG	\$0 (Tier 2)
NORVIR SOL 80MG/ML	\$0 (Tier 2)
PIFELTRO TAB 100MG	\$0 (Tier 2) NDS
PREZISTA SUS 100MG/ML	\$0 (Tier 2) NDS, QL (400 mL / 30 days)
PREZISTA TAB 75MG	\$0 (Tier 2) QL (480 tabs / 30 days)
PREZISTA TAB 150MG	\$0 (Tier 2) NDS, QL (240 tabs / 30 days)
PREZISTA TAB 600MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
PREZISTA TAB 800MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
RESCRIPTOR TAB 200MG	\$0 (Tier 2)
REYATAZ POW 50MG	\$0 (Tier 2) NDS
<i>ritonavir tab 100 mg</i>	\$0 (Tier 1)
SELZENTRY SOL 20MG/ML	\$0 (Tier 2) NDS
SELZENTRY TAB 25MG	\$0 (Tier 2)
SELZENTRY TAB 75MG	\$0 (Tier 2) NDS
SELZENTRY TAB 150MG	\$0 (Tier 2) NDS
SELZENTRY TAB 300MG	\$0 (Tier 2) NDS
<i>stavudine cap 15 mg</i>	\$0 (Tier 1)
<i>stavudine cap 20 mg</i>	\$0 (Tier 1)
<i>stavudine cap 30 mg</i>	\$0 (Tier 1)
<i>stavudine cap 40 mg</i>	\$0 (Tier 1)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	\$0 (Tier 1)
TIVICAY TAB 10MG	\$0 (Tier 2)
TIVICAY TAB 25MG	\$0 (Tier 2) NDS
TIVICAY TAB 50MG	\$0 (Tier 2) NDS
TROGARZO INJ 150MG/ML	\$0 (Tier 2) NDS, LA
TYBOST TAB 150MG	\$0 (Tier 2)
VIDEX EC CAP 125MG	\$0 (Tier 2)
VIDEX SOL 2GM	\$0 (Tier 2)
VIDEX SOL 4GM	\$0 (Tier 2)
VIRACEPT TAB 250MG	\$0 (Tier 2) NDS
VIRACEPT TAB 625MG	\$0 (Tier 2) NDS

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
VIREAD POW 40MG/GM	\$0 (Tier 2) NDS
VIREAD TAB 150MG	\$0 (Tier 2) NDS
VIREAD TAB 200MG	\$0 (Tier 2) NDS
VIREAD TAB 250MG	\$0 (Tier 2) NDS
<i>zidovudine cap 100 mg</i>	\$0 (Tier 1)
<i>zidovudine syrup 10 mg/ml</i>	\$0 (Tier 1)
<i>zidovudine tab 300 mg</i>	\$0 (Tier 1)

**ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS
HIV/AIDS INFECTION**

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	\$0 (Tier 1)
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	\$0 (Tier 2) NDS
ATRIPLA TAB	\$0 (Tier 2) NDS
BIKTARVY TAB	\$0 (Tier 2) NDS
CIMDUO TAB 300-300	\$0 (Tier 2) NDS
COMPLERA TAB	\$0 (Tier 2) NDS
DELSTRIGO TAB	\$0 (Tier 2) NDS
DESCOVY TAB 200/25	\$0 (Tier 2) NDS
DOVATO TAB 50-300MG	\$0 (Tier 2) NDS
EVOTAZ TAB 300-150	\$0 (Tier 2) NDS
GENVOYA TAB	\$0 (Tier 2) NDS
JULUCA TAB 50-25MG	\$0 (Tier 2) NDS
KALETRA TAB 100-25MG	\$0 (Tier 2)
KALETRA TAB 200-50MG	\$0 (Tier 2) NDS
<i>lamivudine-zidovudine tab 150-300 mg</i>	\$0 (Tier 1)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	\$0 (Tier 1)
ODEFSEY TAB	\$0 (Tier 2) NDS
PREZCOBIX TAB 800-150	\$0 (Tier 2) NDS
STRIBILD TAB	\$0 (Tier 2) NDS
SYMFI LO TAB	\$0 (Tier 2) NDS
SYMFI TAB	\$0 (Tier 2) NDS
SYMTUZA TAB	\$0 (Tier 2) NDS
TRIUMEQ TAB	\$0 (Tier 2) NDS
TRUVADA TAB 100-150	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
TRUVADA TAB 133-200	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TRUVADA TAB 167-250	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
TRUVADA TAB 200-300	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)

ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS

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

ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS

<i>acyclovir cap 200 mg</i>	\$0 (Tier 1)
<i>acyclovir sodium iv soln 50 mg/ml</i>	\$0 (Tier 1) B/D
<i>acyclovir susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>acyclovir tab 400 mg</i>	\$0 (Tier 1)
<i>acyclovir tab 800 mg</i>	\$0 (Tier 1)
<i>adefovir dipivoxil tab 10 mg</i>	\$0 (Tier 2) NDS
BARACLUDE SOL .05MG/ML	\$0 (Tier 2) NDS
<i>entecavir tab 0.5 mg</i>	\$0 (Tier 1)
<i>entecavir tab 1 mg</i>	\$0 (Tier 1)
EPCLUSA TAB 400-100	\$0 (Tier 2) NDS, PA
EPIVIR HBV SOL 5MG/ML	\$0 (Tier 2)
<i>famciclovir tab 125 mg</i>	\$0 (Tier 1)
<i>famciclovir tab 250 mg</i>	\$0 (Tier 1)
<i>famciclovir tab 500 mg</i>	\$0 (Tier 1)
<i>ganciclovir sodium for inj 500 mg</i>	\$0 (Tier 1) B/D
HARVONI TAB 90-400MG	\$0 (Tier 2) NDS, PA
<i>lamivudine tab 100 mg (hbv)</i>	\$0 (Tier 1)
MAVYRET TAB 100-40MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	\$0 (Tier 1) QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	\$0 (Tier 1) QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	\$0 (Tier 1) QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	\$0 (Tier 1) QL (1080 mL / year)
PEGASYS INJ	\$0 (Tier 2) NDS, PA
PEGASYS INJ 180MCG/M	\$0 (Tier 2) NDS, PA
PEGASYS INJ PROCLICK	\$0 (Tier 2) NDS, PA
REBETOL SOL 40MG/ML	\$0 (Tier 2) NDS
RELENZA MIS DISKHALE	\$0 (Tier 2) QL (6 inhalers / year)
<i>ribasphere cap 200mg</i>	\$0 (Tier 1)
<i>ribasphere tab 200mg</i>	\$0 (Tier 1)
<i>ribasphere tab 600mg</i>	\$0 (Tier 2) NDS
<i>ribavirin cap 200 mg</i>	\$0 (Tier 1)
<i>ribavirin tab 200 mg</i>	\$0 (Tier 1)
<i>rimantadine hydrochloride tab 100 mg</i>	\$0 (Tier 1)
<i>valacyclovir hcl tab 1 gm</i>	\$0 (Tier 1)
<i>valacyclovir hcl tab 500 mg</i>	\$0 (Tier 1)
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	\$0 (Tier 2) NDS
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	\$0 (Tier 2) NDS
VEMLIDY TAB 25MG	\$0 (Tier 2) NDS
VOSEVI TAB	\$0 (Tier 2) NDS, PA

CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS

<i>cefaclor cap 250 mg</i>	\$0 (Tier 1)
<i>cefaclor cap 500 mg</i>	\$0 (Tier 1)
CEFACTOR ER TAB 500MG	\$0 (Tier 2)
<i>cefaclor for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cefaclor for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefaclor for susp 375 mg/5ml</i>	\$0 (Tier 1)
<i>cefadroxil cap 500 mg</i>	\$0 (Tier 1)
<i>cefadroxil for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefadroxil for susp 500 mg/5ml</i>	\$0 (Tier 1)
<i>cefadroxil tab 1 gm</i>	\$0 (Tier 1)
CEFAZOLIN INJ 1GM/50ML	\$0 (Tier 2)
<i>cefazolin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>cefazolin sodium for inj 10 gm</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cefazolin sodium for inj 20 gm</i>	\$0 (Tier 1)
<i>cefazolin sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>cefazolin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
CEFAZOLIN SOL	\$0 (Tier 2)
<i>cefdinir cap 300 mg</i>	\$0 (Tier 1)
<i>cefdinir for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cefdinir for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefepime hcl for inj 1 gm</i>	\$0 (Tier 1)
<i>cefepime hcl for inj 2 gm</i>	\$0 (Tier 1)
<i>cefixime for susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>cefixime for susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>cefoxitin sodium for inj 10 gm</i>	\$0 (Tier 1)
<i>cefoxitin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>cefoxitin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil tab 100 mg</i>	\$0 (Tier 1)
<i>cefpodoxime proxetil tab 200 mg</i>	\$0 (Tier 1)
<i>cefprozil for susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>cefprozil for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>cefprozil tab 250 mg</i>	\$0 (Tier 1)
<i>cefprozil tab 500 mg</i>	\$0 (Tier 1)
<i>ceftazidime for inj 1 gm</i>	\$0 (Tier 1)
<i>ceftazidime for inj 2 gm</i>	\$0 (Tier 1)
<i>ceftazidime for inj 6 gm</i>	\$0 (Tier 1)
CEFTAZIDIME/ SOL D5W 1GM	\$0 (Tier 2)
CEFTAZIDIME/ SOL D5W 2GM	\$0 (Tier 2)
<i>ceftriaxone sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 10 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 250 mg</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>ceftriaxone sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>cefuroxime axetil tab 250 mg</i>	\$0 (Tier 1)
<i>cefuroxime axetil tab 500 mg</i>	\$0 (Tier 1)
<i>cefuroxime sodium for inj 7.5 gm</i>	\$0 (Tier 1)
<i>cefuroxime sodium for inj 750 mg</i>	\$0 (Tier 1)
<i>cefuroxime sodium for iv soln 1.5 gm</i>	\$0 (Tier 1)
<i>cephalexin cap 250 mg</i>	\$0 (Tier 1)

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

ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS

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

FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS

<i>ciprofloxacin 200 mg/100ml in d5w</i>	\$0 (Tier 1)
<i>ciprofloxacin 400 mg/200ml in d5w</i>	\$0 (Tier 1)
<i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	\$0 (Tier 1)

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

PENICILLINS - DRUGS TO TREAT INFECTIONS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>amoxicillin (trihydrate) tab 875 mg</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 15 (10-5) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0 (Tier 1)
<i>ampicillin cap 500 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 10 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 125 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 250 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 10 gm</i>	\$0 (Tier 1)
<i>BICILLIN L-A INJ 600000</i>	\$0 (Tier 2)
<i>BICILLIN L-A INJ 1200000</i>	\$0 (Tier 2)
<i>BICILLIN L-A INJ 2400000</i>	\$0 (Tier 2)
<i>dicloxacillin sodium cap 250 mg</i>	\$0 (Tier 1)
<i>dicloxacillin sodium cap 500 mg</i>	\$0 (Tier 1)
<i>NAFCILLIN INJ 10GM</i>	\$0 (Tier 2)
<i>nafcillin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 10 gm</i>	\$0 (Tier 2) NDS
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 1)
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	\$0 (Tier 1)
<i>oxacillin sodium for inj 10 gm (base equivalent)</i>	\$0 (Tier 2) NDS
<i>PEN G PROC INJ 600000</i>	\$0 (Tier 2)
<i>PENICILL GK/ INJ DEX 2MU</i>	\$0 (Tier 2)
<i>PENICILL GK/ INJ DEX 3MU</i>	\$0 (Tier 2)
<i>penicillin g potassium for inj 5000000 unit</i>	\$0 (Tier 1)
<i>penicillin g potassium for inj 20000000 unit</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>penicillin g sodium for inj 5000000 unit</i>	\$0 (Tier 1)
<i>penicillin v potassium for soln 125 mg/5ml</i>	\$0 (Tier 1)
<i>penicillin v potassium for soln 250 mg/5ml</i>	\$0 (Tier 1)
<i>penicillin v potassium tab 250 mg</i>	\$0 (Tier 1)
<i>penicillin v potassium tab 500 mg</i>	\$0 (Tier 1)
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0 (Tier 1)
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0 (Tier 1)
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0 (Tier 1)
PIPERACILLIN SOD-TAZOBACTAM SOD FOR INJ 13.5 GM (12-1.5 GM)	\$0 (Tier 2)
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0 (Tier 1)

TETRACYCLINES - DRUGS TO TREAT INFECTIONS

<i>doxy 100 inj 100mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate cap 50 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate cap 100 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate for inj 100 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate tab 20 mg</i>	\$0 (Tier 1)
<i>doxycycline hyclate tab 100 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate cap 50 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate cap 100 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate tab 50 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate tab 75 mg</i>	\$0 (Tier 1)
<i>doxycycline monohydrate tab 100 mg</i>	\$0 (Tier 1)
<i>minocycline hcl cap 50 mg</i>	\$0 (Tier 1)
<i>minocycline hcl cap 75 mg</i>	\$0 (Tier 1)
<i>minocycline hcl cap 100 mg</i>	\$0 (Tier 1)
<i>tetracycline hcl cap 250 mg</i>	\$0 (Tier 1)
<i>tetracycline hcl cap 500 mg</i>	\$0 (Tier 1)

ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER

ALKYLATING AGENTS

BENDEKA INJ 100/4ML	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide cap 25 mg</i>	\$0 (Tier 1) B/D
CYCLOPHOSPHAMIDE CAP 25 MG	\$0 (Tier 2) B/D
<i>cyclophosphamide cap 50 mg</i>	\$0 (Tier 1) B/D
CYCLOPHOSPHAMIDE CAP 50 MG	\$0 (Tier 2) B/D
<i>cyclophosphamide for inj 1 gm</i>	\$0 (Tier 2) NDS, B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>cyclophosphamide for inj 2 gm</i>	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide for inj 500 mg</i>	\$0 (Tier 2) NDS, B/D
EMCYT CAP 140MG	\$0 (Tier 2)
GLEOSTINE CAP 10MG	\$0 (Tier 2)
GLEOSTINE CAP 40MG	\$0 (Tier 2) NDS
GLEOSTINE CAP 100MG	\$0 (Tier 2) NDS
LEUKERAN TAB 2MG	\$0 (Tier 2) NDS

ANTHRACYCLINES

<i>adriamycin inj 20mg</i>	\$0 (Tier 1) B/D
<i>doxorubicin hcl inj 2 mg/ml</i>	\$0 (Tier 1) B/D
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	\$0 (Tier 1) B/D
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	\$0 (Tier 1) B/D

ANTIMETABOLITES

ALIMTA INJ 100MG	\$0 (Tier 2) NDS, B/D
ALIMTA INJ 500MG	\$0 (Tier 2) NDS, B/D
<i>azacitidine for inj 100 mg</i>	\$0 (Tier 2) NDS, B/D
<i>cytarabine inj 20 mg/ml</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl for inj 1 gm</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl for inj 2 gm</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl for inj 200 mg</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
<i>mercaptopurine tab 50 mg</i>	\$0 (Tier 1)
<i>methotrexate sodium for inj 1 gm</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
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<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
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<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
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<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
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PURIXAN SUS 20MG/ML	\$0 (Tier 2) NDS
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TABLOID TAB 40MG	\$0 (Tier 2) NDS
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ANTIMITOTIC, TAXOIDS

ABRAXANE INJ 100MG	\$0 (Tier 2) NDS, B/D
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<i>docetaxel for inj conc 20 mg/ml</i>	\$0 (Tier 2) NDS, B/D
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<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	\$0 (Tier 2) NDS, B/D
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DOCETAXEL INJ 20MG/2ML	\$0 (Tier 2) NDS, B/D
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DOCETAXEL INJ 80MG/4ML	\$0 (Tier 2) NDS, B/D
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DOCETAXEL INJ 80MG/8ML	\$0 (Tier 2) NDS, B/D
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DOCETAXEL INJ 160/8ML	\$0 (Tier 2) NDS, B/D
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DOCETAXEL INJ 160/16ML	\$0 (Tier 2) NDS, B/D
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DOCETAXEL INJ 200/10	\$0 (Tier 2) NDS, B/D
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<i>docetaxel soln for iv infusion 20 mg/2ml</i>	\$0 (Tier 2) NDS, B/D
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<i>docetaxel soln for iv infusion 80 mg/8ml</i>	\$0 (Tier 2) NDS, B/D
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<i>docetaxel soln for iv infusion 160 mg/16ml</i>	\$0 (Tier 2) NDS, B/D
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<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
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<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
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<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
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<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
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TAXOTERE INJ 80MG/4ML	\$0 (Tier 2) NDS, B/D
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ANTIMITOTIC, VINCA ALKALOIDS

<i>vincristine sulfate iv soln 1 mg/ml</i>	\$0 (Tier 1) B/D
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<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	\$0 (Tier 1) B/D
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<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
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BIOLOGIC RESPONSE MODIFIERS

AVASTIN INJ	\$0 (Tier 2) NDS, LA, PA
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AVASTIN INJ 400/16ML	\$0 (Tier 2) NDS, LA, PA
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BORTEZOMIB INJ 3.5MG	\$0 (Tier 2) NDS, PA
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
DAURISMO TAB 25MG	\$0 (Tier 2) NDS, LA, PA
DAURISMO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
ERIVEDGE CAP 150MG	\$0 (Tier 2) NDS, LA, PA
FARYDAK CAP 10MG	\$0 (Tier 2) NDS, LA, PA
FARYDAK CAP 15MG	\$0 (Tier 2) NDS, LA, PA
FARYDAK CAP 20MG	\$0 (Tier 2) NDS, LA, PA
HERCEP HYLEC SOL 60-10000	\$0 (Tier 2) NDS, PA
HERCEPTIN INJ 150MG	\$0 (Tier 2) NDS, PA
HERCEPTIN INJ 440MG	\$0 (Tier 2) NDS, PA
IBRANCE CAP 75MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
IBRANCE CAP 100MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
IBRANCE CAP 125MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
IDHIFA TAB 50MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
IDHIFA TAB 100MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
KADCYLA INJ 100MG	\$0 (Tier 2) NDS, B/D
KADCYLA INJ 160MG	\$0 (Tier 2) NDS, B/D
KEYTRUDA INJ 100MG/4M	\$0 (Tier 2) NDS, PA
KISQALI 200 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI 400 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI 600 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI TAB 200DOSE	\$0 (Tier 2) NDS, PA
KISQALI TAB 400DOSE	\$0 (Tier 2) NDS, PA
KISQALI TAB 600DOSE	\$0 (Tier 2) NDS, PA
LYNPARZA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
LYNPARZA TAB 150MG	\$0 (Tier 2) NDS, LA, PA
NINLARO CAP 2.3MG	\$0 (Tier 2) NDS, PA
NINLARO CAP 3MG	\$0 (Tier 2) NDS, PA
NINLARO CAP 4MG	\$0 (Tier 2) NDS, PA
ODOMZO CAP 200MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ 100MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ 500MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ HYCELA	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 200MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 250MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
TALZENNA CAP 0.25MG	\$0 (Tier 2) NDS, LA, PA

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **B/D** - Covered under Medicare B or D **LA** - Limited Access **NDS** - Non-Extended Days Supply **DP** - The drug is not a Part D drug.

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TALZENNA CAP 1MG	\$0 (Tier 2) NDS, LA, PA
TECENTRIQ INJ 840/14	\$0 (Tier 2) NDS, LA, PA
TECENTRIQ INJ 1200/20	\$0 (Tier 2) NDS, LA, PA
TIBSOVO TAB 250MG	\$0 (Tier 2) NDS, LA, PA
VELCADE INJ 3.5MG	\$0 (Tier 2) NDS, PA
VENCLEXTA TAB 10MG	\$0 (Tier 2) LA, PA
VENCLEXTA TAB 50MG	\$0 (Tier 2) NDS, LA, PA
VENCLEXTA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
VENCLEXTA TAB START PK	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 50MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 150MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 200MG	\$0 (Tier 2) NDS, LA, PA
ZEJULA CAP 100MG	\$0 (Tier 2) NDS, LA, PA
ZOLINZA CAP 100MG	\$0 (Tier 2) NDS, PA

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	\$0 (Tier 2) NDS, PA
<i>anastrozole tab 1 mg</i>	\$0 (Tier 1)
<i>bicalutamide tab 50 mg</i>	\$0 (Tier 1)
DEPO-PROVERA INJ 400/ML	\$0 (Tier 2) B/D
ERLEADA TAB 60MG	\$0 (Tier 2) NDS, LA, PA
<i>exemestane tab 25 mg</i>	\$0 (Tier 1)
FASLODEX INJ 250/5ML	\$0 (Tier 2) NDS, B/D
<i>flutamide cap 125 mg</i>	\$0 (Tier 1)
<i>letrozole tab 2.5 mg</i>	\$0 (Tier 1)
<i>leuprolide acetate inj kit 5 mg/ml</i>	\$0 (Tier 1) PA
LUPRON DEPOT INJ 3.75MG	\$0 (Tier 2) NDS, PA
LUPRON DEPOT INJ 11.25MG	\$0 (Tier 2) NDS, PA
LYSODREN TAB 500MG	\$0 (Tier 2)
<i>megestrol acetate susp 40 mg/ml</i>	\$0 (Tier 2)
<i>megestrol acetate susp 625 mg/5ml</i>	\$0 (Tier 2) PA
<i>megestrol acetate tab 20 mg</i>	\$0 (Tier 2)
<i>megestrol acetate tab 40 mg</i>	\$0 (Tier 2)
<i>nilutamide tab 150 mg</i>	\$0 (Tier 2) NDS
SOLTAMOX SOL 10MG/5ML	\$0 (Tier 2) NDS
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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toremifene citrate tab 60 mg (base equivalent)

\$0 (Tier 2) NDS

TRELSTAR MIX INJ 3.75MG

\$0 (Tier 2) NDS, PA

TRELSTAR MIX INJ 11.25MG

\$0 (Tier 2) NDS, PA

XTANDI CAP 40MG

\$0 (Tier 2) NDS, LA, PA

ZYTIGA TAB 500MG

\$0 (Tier 2) NDS, LA, PA

IMMUNOMODULATORS

POMALYST CAP 1MG

\$0 (Tier 2) NDS, QL (21 caps / 21 days), LA, PA

POMALYST CAP 2MG

\$0 (Tier 2) NDS, QL (21 caps / 21 days), LA, PA

POMALYST CAP 3MG

\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA

POMALYST CAP 4MG

\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA

REVLIMID CAP 2.5MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA

REVLIMID CAP 5MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA

REVLIMID CAP 10MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA

REVLIMID CAP 15MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA

REVLIMID CAP 20MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA

REVLIMID CAP 25MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA

THALOMID CAP 50MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA

THALOMID CAP 100MG

\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA

THALOMID CAP 150MG

\$0 (Tier 2) NDS, QL (56 caps / 28 days), PA

THALOMID CAP 200MG

\$0 (Tier 2) NDS, QL (56 caps / 28 days), PA

KINASE INHIBITORS

AFINITOR DIS TAB 2MG

\$0 (Tier 2) NDS, QL (150 tabs / 30 days), PA

AFINITOR DIS TAB 3MG

\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA

AFINITOR DIS TAB 5MG

\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
AFINITOR TAB 2.5MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
AFINITOR TAB 5MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
AFINITOR TAB 7.5MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
AFINITOR TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
ALECENSA CAP 150MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG PAK	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 30MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 90MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 180MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 3MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 4MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 5MG	\$0 (Tier 2) NDS, LA, PA
BOSULIF TAB 100MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 400MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 500MG	\$0 (Tier 2) NDS, PA
BRAFTOVI CAP 75MG	\$0 (Tier 2) NDS, LA, PA
CABOMETYX TAB 20MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 40MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 60MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CALQUENCE CAP 100MG	\$0 (Tier 2) NDS, LA, PA
CAPRELSA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
CAPRELSA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 60MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 100MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 140MG	\$0 (Tier 2) NDS, LA, PA
COPIKTRA CAP 15MG	\$0 (Tier 2) NDS, LA, PA
COPIKTRA CAP 25MG	\$0 (Tier 2) NDS, LA, PA
COTELLIC TAB 20MG	\$0 (Tier 2) NDS, LA, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
GILOTRIF TAB 20MG	\$0 (Tier 2) NDS, LA, PA
GILOTRIF TAB 30MG	\$0 (Tier 2) NDS, LA, PA
GILOTRIF TAB 40MG	\$0 (Tier 2) NDS, LA, PA
ICLUSIG TAB 15MG	\$0 (Tier 2) NDS, LA, PA
ICLUSIG TAB 45MG	\$0 (Tier 2) NDS, LA, PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
IMBRUVICA CAP 70MG	\$0 (Tier 2) NDS, LA, PA
IMBRUVICA CAP 140MG	\$0 (Tier 2) NDS, LA, PA
IMBRUVICA TAB 140MG	\$0 (Tier 2) NDS, LA, PA
IMBRUVICA TAB 280MG	\$0 (Tier 2) NDS, LA, PA
IMBRUVICA TAB 420MG	\$0 (Tier 2) NDS, LA, PA
IMBRUVICA TAB 560MG	\$0 (Tier 2) NDS, LA, PA
INLYTA TAB 1MG	\$0 (Tier 2) NDS, QL (180 tabs / 30 days), LA, PA
INLYTA TAB 5MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), LA, PA
IRESSA TAB 250MG	\$0 (Tier 2) NDS, LA, PA
JAKAFI TAB 5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 10MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 15MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 20MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 25MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
LENVIMA CAP 4MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 8 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 10 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 12MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 14 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 18 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 20 MG	\$0 (Tier 2) NDS, LA, PA
LENVIMA CAP 24 MG	\$0 (Tier 2) NDS, LA, PA
LORBRENA TAB 25MG	\$0 (Tier 2) NDS, LA, PA
LORBRENA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
MEKINIST TAB 0.5MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
MEKINIST TAB 2MG	\$0 (Tier 2) NDS, LA, PA
MEKTOVI TAB 15MG	\$0 (Tier 2) NDS, LA, PA
NERLYNX TAB 40MG	\$0 (Tier 2) NDS, LA, PA
NEXAVAR TAB 200MG	\$0 (Tier 2) NDS, LA, PA
PIQRAY 200MG TAB DOSE	\$0 (Tier 2) NDS, PA
PIQRAY 250MG TAB DOSE	\$0 (Tier 2) NDS, PA
PIQRAY 300MG TAB DOSE	\$0 (Tier 2) NDS, PA
RYDAPT CAP 25MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 20MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 50MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 70MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 80MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 100MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 140MG	\$0 (Tier 2) NDS, PA
STIVARGA TAB 40MG	\$0 (Tier 2) NDS, LA, PA
SUTENT CAP 12.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 25MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 37.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 50MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
TAFINLAR CAP 50MG	\$0 (Tier 2) NDS, LA, PA
TAFINLAR CAP 75MG	\$0 (Tier 2) NDS, LA, PA
TAGRISSO TAB 40MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
TAGRISSO TAB 80MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
TASIGNA CAP 50MG	\$0 (Tier 2) NDS, PA
TASIGNA CAP 150MG	\$0 (Tier 2) NDS, PA
TASIGNA CAP 200MG	\$0 (Tier 2) NDS, PA
TYKERB TAB 250MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI CAP 25MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI CAP 100MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI SOL 20MG/ML	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 15MG	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 30MG	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 45MG	\$0 (Tier 2) NDS, LA, PA
VOTRIENT TAB 200MG	\$0 (Tier 2) NDS, LA, PA
XALKORI CAP 200MG	\$0 (Tier 2) NDS, LA, PA

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **B/D** - Covered under Medicare B or D **LA** - Limited Access **NDS** - Non-Extended Days Supply **DP** - The drug is not a Part D drug.

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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XALKORI CAP 250MG	\$0 (Tier 2) NDS, LA, PA
XOSPATA TAB 40MG	\$0 (Tier 2) NDS, LA, PA
ZELBORAF TAB 240MG	\$0 (Tier 2) NDS, LA, PA
ZYDELIG TAB 100MG	\$0 (Tier 2) NDS, LA, PA
ZYDELIG TAB 150MG	\$0 (Tier 2) NDS, LA, PA
ZYKADIA CAP 150MG	\$0 (Tier 2) NDS, LA, PA
ZYKADIA TAB 150MG	\$0 (Tier 2) NDS, LA, PA

MISCELLANEOUS

<i>bexarotene cap 75 mg</i>	\$0 (Tier 2) NDS, PA
<i>hydroxyurea cap 500 mg</i>	\$0 (Tier 1)
LONSURF TAB 15-6.14	\$0 (Tier 2) NDS, PA
LONSURF TAB 20-8.19	\$0 (Tier 2) NDS, PA
MATULANE CAP 50MG	\$0 (Tier 2) NDS, LA
SYLATRON KIT 200MCG	\$0 (Tier 2) NDS, PA
SYLATRON KIT 300MCG	\$0 (Tier 2) NDS, PA
SYLATRON KIT 600MCG	\$0 (Tier 2) NDS, PA
SYNRIBO INJ 3.5MG	\$0 (Tier 2) NDS, PA
<i>tretinoin cap 10 mg</i>	\$0 (Tier 2) NDS

PLATINUM-BASED AGENTS

<i>carboplatin iv soln 50 mg/5ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 150 mg/15ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 450 mg/45ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 600 mg/60ml</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>oxaliplatin for iv inj 50 mg</i>	\$0 (Tier 2) NDS, B/D
<i>oxaliplatin for iv inj 100 mg</i>	\$0 (Tier 2) NDS, B/D
<i>oxaliplatin iv soln 50 mg/10ml</i>	\$0 (Tier 1) B/D
<i>oxaliplatin iv soln 100 mg/20ml</i>	\$0 (Tier 1) B/D

PROTECTIVE AGENTS

<i>leucovorin calcium for inj 50 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 100 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 200 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 350 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 500 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium tab 5 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 10 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>leucovorin calcium tab 15 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 25 mg</i>	\$0 (Tier 1)
MESNEX TAB 400MG	\$0 (Tier 2) NDS

TOPOISOMERASE INHIBITORS

<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>toposar inj 1gm/50ml</i>	\$0 (Tier 1) B/D
<i>toposar inj 100/5ml</i>	\$0 (Tier 1) B/D

CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS

ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>amlodipine besylate-benazepril hcl cap 2.5- 10 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-benazepril hcl cap 5- 10 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-benazepril hcl cap 5- 20 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-benazepril hcl cap 5- 40 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-benazepril hcl cap 10- 20 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-benazepril hcl cap 10- 40 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 5- 6.25 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 10- 12.5 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 20- 12.5 mg</i>	\$0 (Tier 1)
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	\$0 (Tier 1)
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	\$0 (Tier 1)
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)	

ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>benazepril hcl tab 5 mg</i>	\$0 (Tier 1)	
<i>benazepril hcl tab 10 mg</i>	\$0 (Tier 1)	
<i>benazepril hcl tab 20 mg</i>	\$0 (Tier 1)	
<i>benazepril hcl tab 40 mg</i>	\$0 (Tier 1)	
<i>captopril tab 12.5 mg</i>	\$0 (Tier 1)	
<i>captopril tab 25 mg</i>	\$0 (Tier 1)	
<i>captopril tab 50 mg</i>	\$0 (Tier 1)	
<i>captopril tab 100 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate tab 2.5 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate tab 5 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate tab 10 mg</i>	\$0 (Tier 1)	
<i>enalapril maleate tab 20 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium tab 10 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium tab 20 mg</i>	\$0 (Tier 1)	
<i>fosinopril sodium tab 40 mg</i>	\$0 (Tier 1)	
<i>lisinopril tab 2.5 mg</i>	\$0 (Tier 1)	
<i>lisinopril tab 5 mg</i>	\$0 (Tier 1)	
<i>lisinopril tab 10 mg</i>	\$0 (Tier 1)	
<i>lisinopril tab 20 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>lisinopril tab 30 mg</i>	\$0 (Tier 1)
<i>lisinopril tab 40 mg</i>	\$0 (Tier 1)
<i>moexipril hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>moexipril hcl tab 15 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 2 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 4 mg</i>	\$0 (Tier 1)
<i>perindopril erbumine tab 8 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 5 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 10 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 20 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 40 mg</i>	\$0 (Tier 1)
<i>ramipril cap 1.25 mg</i>	\$0 (Tier 1)
<i>ramipril cap 2.5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 10 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 1 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 2 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 4 mg</i>	\$0 (Tier 1)

ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>eplerenone tab 25 mg</i>	\$0 (Tier 1)
<i>eplerenone tab 50 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 25 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 50 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 100 mg</i>	\$0 (Tier 1)

ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>doxazosin mesylate tab 1 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 2 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 4 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 8 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 1 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 2 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 5 mg</i>	\$0 (Tier 1)
<i>terazosin hcl cap 1 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 10 mg (base equivalent)</i>	\$0 (Tier 1)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS
TO TREAT HIGH BLOOD PRESSURE**

<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 5-20 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 5-40 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 10-20 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 10-40 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-valsartan tab 5-160</i> <i>mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-valsartan tab 5-320</i> <i>mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-valsartan tab 10-160</i> <i>mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-valsartan tab 10-320</i> <i>mg</i>	\$0 (Tier 1)
<i>amlodipine-valsartan-hydrochlorothiazide</i> <i>tab 5-160-12.5 mg</i>	\$0 (Tier 1)
<i>amlodipine-valsartan-hydrochlorothiazide</i> <i>tab 5-160-25 mg</i>	\$0 (Tier 1)
<i>amlodipine-valsartan-hydrochlorothiazide</i> <i>tab 10-160-12.5 mg</i>	\$0 (Tier 1)
<i>amlodipine-valsartan-hydrochlorothiazide</i> <i>tab 10-160-25 mg</i>	\$0 (Tier 1)
<i>amlodipine-valsartan-hydrochlorothiazide</i> <i>tab 10-320-25 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil-hydrochlorothiazide</i> <i>tab 16-12.5 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil-hydrochlorothiazide</i> <i>tab 32-12.5 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil-hydrochlorothiazide</i> <i>tab 32-25 mg</i>	\$0 (Tier 1)
ENTRESTO TAB 24-26MG	\$0 (Tier 2)
ENTRESTO TAB 49-51MG	\$0 (Tier 2)
ENTRESTO TAB 97-103MG	\$0 (Tier 2)
<i>irbesartan-hydrochlorothiazide tab 150-</i> <i>12.5 mg</i>	\$0 (Tier 1)
<i>irbesartan-hydrochlorothiazide tab 300-</i> <i>12.5 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	\$0 (Tier 1)
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	\$0 (Tier 1)
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	\$0 (Tier 1)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	\$0 (Tier 1)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	\$0 (Tier 1)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	\$0 (Tier 1)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	\$0 (Tier 1)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	\$0 (Tier 1)
<i>telmisartan-amlodipine tab 40-5 mg</i>	\$0 (Tier 1)
<i>telmisartan-amlodipine tab 40-10 mg</i>	\$0 (Tier 1)
<i>telmisartan-amlodipine tab 80-5 mg</i>	\$0 (Tier 1)
<i>telmisartan-amlodipine tab 80-10 mg</i>	\$0 (Tier 1)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0 (Tier 1)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	\$0 (Tier 1)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0 (Tier 1)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	\$0 (Tier 1)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	\$0 (Tier 1)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	\$0 (Tier 1)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	\$0 (Tier 1)

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT
HIGH BLOOD PRESSURE**

<i>candesartan cilexetil tab 4 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil tab 8 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil tab 16 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil tab 32 mg</i>	\$0 (Tier 1)
<i>eprosartan mesylate tab 600 mg</i>	\$0 (Tier 1)
<i>irbesartan tab 75 mg</i>	\$0 (Tier 1)
<i>irbesartan tab 150 mg</i>	\$0 (Tier 1)
<i>irbesartan tab 300 mg</i>	\$0 (Tier 1)
<i>losartan potassium tab 25 mg</i>	\$0 (Tier 1)
<i>losartan potassium tab 50 mg</i>	\$0 (Tier 1)
<i>losartan potassium tab 100 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil tab 5 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil tab 20 mg</i>	\$0 (Tier 1)
<i>olmesartan medoxomil tab 40 mg</i>	\$0 (Tier 1)
<i>telmisartan tab 20 mg</i>	\$0 (Tier 1)
<i>telmisartan tab 40 mg</i>	\$0 (Tier 1)
<i>telmisartan tab 80 mg</i>	\$0 (Tier 1)
<i>valsartan tab 40 mg</i>	\$0 (Tier 1)
<i>valsartan tab 80 mg</i>	\$0 (Tier 1)
<i>valsartan tab 160 mg</i>	\$0 (Tier 1)
<i>valsartan tab 320 mg</i>	\$0 (Tier 1)

ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM

<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 200 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 400 mg</i>	\$0 (Tier 1)
<i>disopyramide phosphate cap 100 mg</i>	\$0 (Tier 2)
<i>disopyramide phosphate cap 150 mg</i>	\$0 (Tier 2)
<i>dofetilide cap 125 mcg (0.125 mg)</i>	\$0 (Tier 1)
<i>dofetilide cap 250 mcg (0.25 mg)</i>	\$0 (Tier 1)
<i>dofetilide cap 500 mcg (0.5 mg)</i>	\$0 (Tier 1)
<i>flecainide acetate tab 50 mg</i>	\$0 (Tier 1)
<i>flecainide acetate tab 100 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>flecainide acetate tab 150 mg</i>	\$0 (Tier 1)
MULTAQ TAB 400MG	\$0 (Tier 2)
NORPACE CAP 100MG CR	\$0 (Tier 2)
NORPACE CAP 150MG CR	\$0 (Tier 2)
<i>pacerone tab 100mg</i>	\$0 (Tier 1)
<i>pacerone tab 200mg</i>	\$0 (Tier 1)
<i>pacerone tab 400mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 225 mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 325 mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 425 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 225 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 300 mg</i>	\$0 (Tier 1)
<i>quinidine sulfate tab 200 mg</i>	\$0 (Tier 1)
<i>quinidine sulfate tab 300 mg</i>	\$0 (Tier 1)
<i>sorine tab 80mg</i>	\$0 (Tier 1)
<i>sorine tab 120mg</i>	\$0 (Tier 1)
<i>sorine tab 160mg</i>	\$0 (Tier 1)
<i>sorine tab 240mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 80 mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 120 mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 160 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 80 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 120 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 160 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 240 mg</i>	\$0 (Tier 1)

ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	\$0 (Tier 1)
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	\$0 (Tier 1)
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	\$0 (Tier 1)
<i>lovastatin tab 10 mg</i>	\$0 (Tier 1)
<i>lovastatin tab 20 mg</i>	\$0 (Tier 1)
<i>lovastatin tab 40 mg</i>	\$0 (Tier 1)
<i>pravastatin sodium tab 10 mg</i>	\$0 (Tier 1)

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

ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>cholestyramine light powder 4 gm/dose</i>	\$0 (Tier 1)
<i>cholestyramine light powder packets 4 gm</i>	\$0 (Tier 1)
<i>cholestyramine powder 4 gm/dose</i>	\$0 (Tier 1)
<i>cholestyramine powder packets 4 gm</i>	\$0 (Tier 1)
<i>colesevelam hcl packet for susp 3.75 gm</i>	\$0 (Tier 1)
<i>colesevelam hcl tab 625 mg</i>	\$0 (Tier 1)
<i>colestipol hcl granule packets 5 gm</i>	\$0 (Tier 1)
<i>colestipol hcl granules 5 gm</i>	\$0 (Tier 1)
<i>colestipol hcl tab 1 gm</i>	\$0 (Tier 1)
<i>ezetimibe tab 10 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 67 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 134 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 200 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 48 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 54 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 145 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 160 mg</i>	\$0 (Tier 1)
<i>gemfibrozil tab 600 mg</i>	\$0 (Tier 1)
JUXTAPID CAP 5MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 10MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 20MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 30MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
JUXTAPID CAP 40MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 60MG	\$0 (Tier 2) NDS, LA, PA
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	\$0 (Tier 1)
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	\$0 (Tier 1)
<i>niacor tab 500mg</i>	\$0 (Tier 1)
PRALUENT INJ 75MG/ML	\$0 (Tier 2) PA
PRALUENT INJ 150MG/ML	\$0 (Tier 2) PA
<i>prevalite pow 4gm</i>	\$0 (Tier 1)
<i>prevalite pow 4gm pk</i>	\$0 (Tier 1)
VASCEPA CAP 0.5GM	\$0 (Tier 2)
VASCEPA CAP 1GM	\$0 (Tier 2)

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

<i>atenolol & chlorthalidone tab 50-25 mg</i>	\$0 (Tier 1)
<i>atenolol & chlorthalidone tab 100-25 mg</i>	\$0 (Tier 1)
<i>bisoprolol & hydrochlorothiazide tab 2.5- 6.25 mg</i>	\$0 (Tier 1)
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	\$0 (Tier 1)
<i>bisoprolol & hydrochlorothiazide tab 10- 6.25 mg</i>	\$0 (Tier 1)
<i>metoprolol & hydrochlorothiazide tab 50- 25 mg</i>	\$0 (Tier 1)
<i>metoprolol & hydrochlorothiazide tab 100- 25 mg</i>	\$0 (Tier 1)
<i>metoprolol & hydrochlorothiazide tab 100- 50 mg</i>	\$0 (Tier 1)
<i>propranolol & hydrochlorothiazide tab 40- 25 mg</i>	\$0 (Tier 1)
<i>propranolol & hydrochlorothiazide tab 80- 25 mg</i>	\$0 (Tier 1)

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

<i>acebutolol hcl cap 200 mg</i>	\$0 (Tier 1)
<i>acebutolol hcl cap 400 mg</i>	\$0 (Tier 1)
<i>atenolol tab 25 mg</i>	\$0 (Tier 1)
<i>atenolol tab 50 mg</i>	\$0 (Tier 1)
<i>atenolol tab 100 mg</i>	\$0 (Tier 1)
<i>betaxolol hcl tab 10 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>betaxolol hcl tab 20 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 5 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 10 mg</i>	\$0 (Tier 1)
BYSTOLIC TAB 2.5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 20MG	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>carvedilol tab 3.125 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 6.25 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 12.5 mg</i>	\$0 (Tier 1)
<i>carvedilol tab 25 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 100 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 200 mg</i>	\$0 (Tier 1)
<i>labetalol hcl tab 300 mg</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	\$0 (Tier 1)
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	\$0 (Tier 1)
<i>metoprolol tartrate iv soln cart inj 5 mg/5ml (1 mg/ml)</i>	\$0 (Tier 1)
<i>metoprolol tartrate tab 25 mg</i>	\$0 (Tier 1)
<i>metoprolol tartrate tab 50 mg</i>	\$0 (Tier 1)
<i>metoprolol tartrate tab 100 mg</i>	\$0 (Tier 1)
<i>nadolol tab 20 mg</i>	\$0 (Tier 1)
<i>nadolol tab 40 mg</i>	\$0 (Tier 1)
<i>nadolol tab 80 mg</i>	\$0 (Tier 1)
<i>pindolol tab 5 mg</i>	\$0 (Tier 1)
<i>pindolol tab 10 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 60 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 80 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>propranolol hcl cap er 24hr 160 mg</i>	\$0 (Tier 1)
<i>propranolol hcl oral soln 20 mg/5ml</i>	\$0 (Tier 1)
<i>propranolol hcl oral soln 40 mg/5ml</i>	\$0 (Tier 1)
<i>propranolol hcl tab 10 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 20 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>propranolol hcl tab 40 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 60 mg</i>	\$0 (Tier 1)
<i>propranolol hcl tab 80 mg</i>	\$0 (Tier 1)
<i>timolol maleate tab 5 mg</i>	\$0 (Tier 1)
<i>timolol maleate tab 10 mg</i>	\$0 (Tier 1)
<i>timolol maleate tab 20 mg</i>	\$0 (Tier 1)

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

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 12hr 60 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 12hr 90 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 12hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	\$0 (Tier 1)
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	\$0 (Tier 1)
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	\$0 (Tier 1)
<i>diltiazem hcl tab 30 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl tab 60 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl tab 90 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl tab 120 mg</i>	\$0 (Tier 1)
<i>felodipine tab er 24hr 2.5 mg</i>	\$0 (Tier 1)
<i>felodipine tab er 24hr 5 mg</i>	\$0 (Tier 1)
<i>felodipine tab er 24hr 10 mg</i>	\$0 (Tier 1)
<i>isradipine cap 2.5 mg</i>	\$0 (Tier 1)
<i>isradipine cap 5 mg</i>	\$0 (Tier 1)
<i>nicardipine hcl cap 20 mg</i>	\$0 (Tier 1)
<i>nicardipine hcl cap 30 mg</i>	\$0 (Tier 1)
<i>nifedipine tab er 24hr 30 mg</i>	\$0 (Tier 1)
<i>nifedipine tab er 24hr 60 mg</i>	\$0 (Tier 1)
<i>nifedipine tab er 24hr 90 mg</i>	\$0 (Tier 1)
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	\$0 (Tier 1)
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	\$0 (Tier 1)
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	\$0 (Tier 1)
<i>nimodipine cap 30 mg</i>	\$0 (Tier 2) NDS
<i>NYMALIZE SOL 60/20ML</i>	\$0 (Tier 2) NDS
<i>taztia xt cap 120mg/24</i>	\$0 (Tier 1)
<i>taztia xt cap 180mg/24</i>	\$0 (Tier 1)
<i>taztia xt cap 240mg/24</i>	\$0 (Tier 1)
<i>taztia xt cap 300mg er</i>	\$0 (Tier 1)
<i>taztia xt cap 360mg/24</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 100 mg</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 200 mg</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 300 mg</i>	\$0 (Tier 1)
<i>verapamil hcl cap er 24hr 360 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>verapamil hcl iv soln 2.5 mg/ml</i>	\$0 (Tier 1)
<i>verapamil hcl tab 40 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab 80 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab 120 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab er 120 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab er 180 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab er 240 mg</i>	\$0 (Tier 1)

DIGITALIS GLYCOSIDES - DRUGS TO TREAT HEART CONDITIONS

<i>digitek tab 0.25mg</i>	\$0 (Tier 1) PA; PA if 70 years and older
<i>digitek tab 0.125mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	\$0 (Tier 1)
<i>digoxin oral soln 0.05 mg/ml</i>	\$0 (Tier 1) PA; PA if 70 years and older
<i>digoxin tab 125 mcg (0.125 mg)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	\$0 (Tier 1) PA; PA if 70 years and older

DIURETICS - DRUGS TO TREAT HEART CONDITIONS

<i>acetazolamide cap er 12hr 500 mg</i>	\$0 (Tier 1)
<i>acetazolamide tab 125 mg</i>	\$0 (Tier 1)
<i>acetazolamide tab 250 mg</i>	\$0 (Tier 1)
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	\$0 (Tier 1)
<i>amiloride hcl tab 5 mg</i>	\$0 (Tier 1)
<i>bumetanide inj 0.25 mg/ml</i>	\$0 (Tier 1)
<i>bumetanide tab 0.5 mg</i>	\$0 (Tier 1)
<i>bumetanide tab 1 mg</i>	\$0 (Tier 1)
<i>bumetanide tab 2 mg</i>	\$0 (Tier 1)
<i>chlorothiazide tab 250 mg</i>	\$0 (Tier 1)
<i>chlorothiazide tab 500 mg</i>	\$0 (Tier 1)
<i>chlorthalidone tab 25 mg</i>	\$0 (Tier 1)
<i>chlorthalidone tab 50 mg</i>	\$0 (Tier 1)
<i>furosemide inj 10 mg/ml</i>	\$0 (Tier 1)
<i>furosemide oral soln 8 mg/ml</i>	\$0 (Tier 1)
<i>furosemide oral soln 10 mg/ml</i>	\$0 (Tier 1)
<i>furosemide tab 20 mg</i>	\$0 (Tier 1)
<i>furosemide tab 40 mg</i>	\$0 (Tier 1)
<i>furosemide tab 80 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide cap 12.5 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 12.5 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>hydrochlorothiazide tab 25 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 50 mg</i>	\$0 (Tier 1)
<i>indapamide tab 1.25 mg</i>	\$0 (Tier 1)
<i>indapamide tab 2.5 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 25 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 50 mg</i>	\$0 (Tier 1)
<i>metolazone tab 2.5 mg</i>	\$0 (Tier 1)
<i>metolazone tab 5 mg</i>	\$0 (Tier 1)
<i>metolazone tab 10 mg</i>	\$0 (Tier 1)
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	\$0 (Tier 1)
<i>torsemide tab 5 mg</i>	\$0 (Tier 1)
<i>torsemide tab 10 mg</i>	\$0 (Tier 1)
<i>torsemide tab 20 mg</i>	\$0 (Tier 1)
<i>torsemide tab 100 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	\$0 (Tier 1)

MISCELLANEOUS

<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	\$0 (Tier 1)
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	\$0 (Tier 1)
<i>clonidine hcl tab 0.1 mg</i>	\$0 (Tier 1)
<i>clonidine hcl tab 0.2 mg</i>	\$0 (Tier 1)
<i>clonidine hcl tab 0.3 mg</i>	\$0 (Tier 1)
<i>clonidine td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 1)
<i>clonidine td patch weekly 0.2 mg/24hr</i>	\$0 (Tier 1)
<i>clonidine td patch weekly 0.3 mg/24hr</i>	\$0 (Tier 1)
CORLANOR TAB 5MG	\$0 (Tier 2)
CORLANOR TAB 7.5MG	\$0 (Tier 2)
DEMSER CAP 250MG	\$0 (Tier 2) NDS, PA
<i>hydralazine hcl inj 20 mg/ml</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>midodrine hcl tab 2.5 mg</i>	\$0 (Tier 1)

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

NITRATES - DRUGS TO TREAT HEART CONDITIONS

<i>isosorbide dinitrate tab 5 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab 10 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab 20 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab 30 mg</i>	\$0 (Tier 1)
<i>isosorbide dinitrate tab er 40 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab 10 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab 20 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	\$0 (Tier 1)
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	\$0 (Tier 1)
<i>minitran dis 0.1mg/hr</i>	\$0 (Tier 1)
<i>minitran dis 0.2mg/hr</i>	\$0 (Tier 1)
<i>minitran dis 0.4mg/hr</i>	\$0 (Tier 1)
<i>minitran dis 0.6mg/hr</i>	\$0 (Tier 1)
NITRO-BID OIN 2%	\$0 (Tier 2)
NITRO-DUR DIS 0.3MG/HR	\$0 (Tier 2)
NITRO-DUR DIS 0.8MG/HR	\$0 (Tier 2)
<i>nitroglycerin sl tab 0.3 mg</i>	\$0 (Tier 1)
<i>nitroglycerin sl tab 0.4 mg</i>	\$0 (Tier 1)
<i>nitroglycerin sl tab 0.6 mg</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	\$0 (Tier 1)
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	\$0 (Tier 1)

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

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

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

<i>alprazolam tab 0.5 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>bupirone hcl tab 5 mg</i>	\$0 (Tier 1)

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

ANTICONSULSANTS - DRUGS TO TREAT SEIZURES

APTOM TAB 200MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
APTOM TAB 400MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
APTOM TAB 600MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
APTOM TAB 800MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
BANZEL SUS 40MG/ML	\$0 (Tier 2) NDS, PA
BANZEL TAB 200MG	\$0 (Tier 2) NDS, PA
BANZEL TAB 400MG	\$0 (Tier 2) NDS, PA
BRIVIACT INJ 50MG/5ML	\$0 (Tier 2) PA
BRIVIACT SOL 10MG/ML	\$0 (Tier 2) NDS, PA
BRIVIACT TAB 10MG	\$0 (Tier 2) NDS, PA
BRIVIACT TAB 25MG	\$0 (Tier 2) NDS, PA
BRIVIACT TAB 50MG	\$0 (Tier 2) NDS, PA
BRIVIACT TAB 75MG	\$0 (Tier 2) NDS, PA
BRIVIACT TAB 100MG	\$0 (Tier 2) NDS, PA
<i>carbamazepine cap er 12hr 100 mg</i>	\$0 (Tier 1)
<i>carbamazepine cap er 12hr 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine cap er 12hr 300 mg</i>	\$0 (Tier 1)
<i>carbamazepine chew tab 100 mg</i>	\$0 (Tier 1)
<i>carbamazepine susp 100 mg/5ml</i>	\$0 (Tier 1)
<i>carbamazepine tab 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 100 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 200 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>carbamazepine tab er 12hr 400 mg</i>	\$0 (Tier 1)
CELONTIN CAP 300MG	\$0 (Tier 2)
<i>clobazam suspension 2.5 mg/ml</i>	\$0 (Tier 1) PA
<i>clobazam tab 10 mg</i>	\$0 (Tier 1) PA
<i>clobazam tab 20 mg</i>	\$0 (Tier 1) PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	\$0 (Tier 1) QL (300 tabs / 30 days)
<i>clonazepam tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	\$0 (Tier 1) QL (300 tabs / 30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 7.5 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 15 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
DIASTAT ACDL GEL 5-10MG	\$0 (Tier 2)
DIASTAT ACDL GEL 12.5-20	\$0 (Tier 2)
DIASTAT PED GEL 2.5M GEL	\$0 (Tier 2)
<i>diazepam conc 5 mg/ml</i>	\$0 (Tier 1) QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam inj 5 mg/ml</i>	\$0 (Tier 1)
<i>diazepam oral soln 1 mg/ml</i>	\$0 (Tier 1) QL (1200 mL / 30 days), PA; PA if 65 years and older
<i>diazepam rectal gel delivery system 2.5 mg</i>	\$0 (Tier 1)
<i>diazepam rectal gel delivery system 10 mg</i>	\$0 (Tier 1)
<i>diazepam rectal gel delivery system 20 mg</i>	\$0 (Tier 1)
<i>diazepam tab 2 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days), PA; PA if 65 years and older

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>diazepam tab 5 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 10 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
DILANTIN CAP 30MG	\$0 (Tier 2)	
DILANTIN CAP 100MG	\$0 (Tier 2)	
DILANTIN CHW 50MG	\$0 (Tier 2)	
DILANTIN-125 SUS 125/5ML	\$0 (Tier 2)	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 125 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 250 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 500 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab er 24 hr 250 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab er 24 hr 500 mg</i>	\$0 (Tier 1)	
EPIDIOLEX SOL 100MG/ML	\$0 (Tier 2)	NDS, QL (600 mL / 30 days), LA, PA
<i>epitol tab 200mg</i>	\$0 (Tier 1)	
<i>ethosuximide cap 250 mg</i>	\$0 (Tier 1)	
<i>ethosuximide soln 250 mg/5ml</i>	\$0 (Tier 1)	
<i>felbamate susp 600 mg/5ml</i>	\$0 (Tier 2)	NDS
<i>felbamate tab 400 mg</i>	\$0 (Tier 1)	
<i>felbamate tab 600 mg</i>	\$0 (Tier 1)	
FYCOMPA SUS 0.5MG/ML	\$0 (Tier 2)	NDS, QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), PA
FYCOMPA TAB 6MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), PA
FYCOMPA TAB 8MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>gabapentin cap 100 mg</i>	\$0 (Tier 1) QL (1080 caps / 30 days)
<i>gabapentin cap 300 mg</i>	\$0 (Tier 1) QL (360 caps / 30 days)
<i>gabapentin cap 400 mg</i>	\$0 (Tier 1) QL (270 caps / 30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	\$0 (Tier 1) QL (2160 mL / 30 days)
<i>gabapentin tab 600 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>gabapentin tab 800 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>lamotrigine tab 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 100 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 150 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 200 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab chewable dispersible 5 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab chewable dispersible 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 50 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 100 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 200 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 250 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 300 mg</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	\$0 (Tier 1)
<i>levetiracetam oral soln 100 mg/ml</i>	\$0 (Tier 1)
<i>levetiracetam tab 250 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab 500 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab 750 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab 1000 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab er 24hr 500 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab er 24hr 750 mg</i>	\$0 (Tier 1)
LYRICA CAP 25MG	\$0 (Tier 2) QL (120 caps / 30 days), PA
LYRICA CAP 50MG	\$0 (Tier 2) QL (120 caps / 30 days), PA
LYRICA CAP 75MG	\$0 (Tier 2) QL (120 caps / 30 days), PA
LYRICA CAP 100MG	\$0 (Tier 2) QL (120 caps / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)
LYRICA CAP 150MG	\$0 (Tier 2) QL (120 caps / 30 days), PA
LYRICA CAP 200MG	\$0 (Tier 2) QL (90 caps / 30 days), PA
LYRICA CAP 225MG	\$0 (Tier 2) QL (60 caps / 30 days), PA
LYRICA CAP 300MG	\$0 (Tier 2) QL (60 caps / 30 days), PA
LYRICA SOL 20MG/ML	\$0 (Tier 2) QL (900 mL / 30 days), PA
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	\$0 (Tier 1)
<i>oxcarbazepine tab 150 mg</i>	\$0 (Tier 1)
<i>oxcarbazepine tab 300 mg</i>	\$0 (Tier 1)
<i>oxcarbazepine tab 600 mg</i>	\$0 (Tier 1)
PEGANONE TAB 250MG	\$0 (Tier 2)
PHENOBARB INJ 65MG/ML	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital elixir 20 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital sodium inj 130 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 15 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 16.2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 30 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 32.4 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 60 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 64.8 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 97.2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 100 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
PHENYTEK CAP 200MG	\$0 (Tier 2)
PHENYTEK CAP 300MG	\$0 (Tier 2)
<i>phenytoin chew tab 50 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium extended cap 100 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>phenytoin sodium extended cap 200 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium extended cap 300 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium inj 50 mg/ml</i>	\$0 (Tier 1)
<i>phenytoin susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>primidone tab 50 mg</i>	\$0 (Tier 1)
<i>primidone tab 250 mg</i>	\$0 (Tier 1)
<i>roweepra tab 500mg</i>	\$0 (Tier 1)
<i>roweepra tab 750mg</i>	\$0 (Tier 1)
<i>roweepra tab 1000mg</i>	\$0 (Tier 1)
<i>roweepra xr tab 500mg xr</i>	\$0 (Tier 1)
<i>roweepra xr tab 750mg xr</i>	\$0 (Tier 1)
SPRITAM TAB 250MG	\$0 (Tier 2)
SPRITAM TAB 500MG	\$0 (Tier 2)
SPRITAM TAB 750MG	\$0 (Tier 2)
SPRITAM TAB 1000MG	\$0 (Tier 2)
SYMPAZAN MIS 5MG	\$0 (Tier 2) PA
SYMPAZAN MIS 10MG	\$0 (Tier 2) NDS, PA
SYMPAZAN MIS 20MG	\$0 (Tier 2) NDS, PA
<i>tiagabine hcl tab 2 mg</i>	\$0 (Tier 1)
<i>tiagabine hcl tab 4 mg</i>	\$0 (Tier 1)
<i>tiagabine hcl tab 12 mg</i>	\$0 (Tier 1)
<i>tiagabine hcl tab 16 mg</i>	\$0 (Tier 1)
<i>topiramate sprinkle cap 15 mg</i>	\$0 (Tier 1)
<i>topiramate sprinkle cap 25 mg</i>	\$0 (Tier 1)
<i>topiramate tab 25 mg</i>	\$0 (Tier 1)
<i>topiramate tab 50 mg</i>	\$0 (Tier 1)
<i>topiramate tab 100 mg</i>	\$0 (Tier 1)
<i>topiramate tab 200 mg</i>	\$0 (Tier 1)
<i>valproate sodium inj 100 mg/ml</i>	\$0 (Tier 1)
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	\$0 (Tier 1)
<i>valproic acid cap 250 mg</i>	\$0 (Tier 1)
<i>vigabatrin powd pack 500 mg</i>	\$0 (Tier 2) NDS, QL (180 packets / 30 days), LA, PA
<i>vigabatrin tab 500 mg</i>	\$0 (Tier 2) NDS, QL (180 tabs / 30 days), LA, PA
<i>vigadrone pow 500mg</i>	\$0 (Tier 2) NDS, QL (180 packets / 30 days), LA, PA
VIMPAT INJ 200MG/20	\$0 (Tier 2) NDS
VIMPAT SOL 10MG/ML	\$0 (Tier 2) NDS, QL (1200 mL / 30 days)

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **B/D** - Covered
under Medicare B or D **LA** - Limited Access **NDS** - Non-Extended Days Supply **DP**
- The drug is not a Part D drug.

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
VIMPAT TAB 50MG	\$0 (Tier 2) QL (120 tabs / 30 days)
VIMPAT TAB 100MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
VIMPAT TAB 150MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
VIMPAT TAB 200MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
<i>zonisamide cap 25 mg</i>	\$0 (Tier 1)
<i>zonisamide cap 50 mg</i>	\$0 (Tier 1)
<i>zonisamide cap 100 mg</i>	\$0 (Tier 1)

ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	\$0 (Tier 1)
<i>donepezil hydrochloride tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>donepezil hydrochloride tab 10 mg</i>	\$0 (Tier 1)
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	\$0 (Tier 1)
<i>galantamine hydrobromide tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 8 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 12 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>memantine hcl cap er 24hr 7 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 14 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 21 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 28 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl oral solution 2 mg/ml</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 5 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 5 mg (28) & 10 mg (21) titration pak</i>	\$0 (Tier 2) PA; PA if < 30 yrs
<i>memantine hcl tab 10 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
NAMZARIC CAP	\$0 (Tier 2)
NAMZARIC CAP 7-10MG	\$0 (Tier 2)
NAMZARIC CAP 14-10MG	\$0 (Tier 2)
NAMZARIC CAP 21-10MG	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
NAMZARIC CAP 28-10MG	\$0 (Tier 2)
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	\$0 (Tier 1) QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	\$0 (Tier 1) QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	\$0 (Tier 1) QL (30 patches / 30 days)

ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION

<i>amitriptyline hcl tab 10 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 25 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 50 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 75 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 100 mg</i>	\$0 (Tier 2)
<i>amitriptyline hcl tab 150 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 25 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 50 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 100 mg</i>	\$0 (Tier 2)
<i>amoxapine tab 150 mg</i>	\$0 (Tier 2)
<i>bupropion hcl tab 75 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab 100 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 12hr 100 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 12hr 150 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 12hr 200 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 24hr 150 mg</i>	\$0 (Tier 1)
<i>bupropion hcl tab er 24hr 300 mg</i>	\$0 (Tier 1)
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	\$0 (Tier 1)
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	\$0 (Tier 1)
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	\$0 (Tier 1)
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>clomipramine hcl cap 25 mg</i>	\$0 (Tier 2) PA
<i>clomipramine hcl cap 50 mg</i>	\$0 (Tier 2) PA
<i>clomipramine hcl cap 75 mg</i>	\$0 (Tier 2) PA
<i>desipramine hcl tab 10 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 25 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 50 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 75 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 100 mg</i>	\$0 (Tier 2)
<i>desipramine hcl tab 150 mg</i>	\$0 (Tier 2)
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>doxepin hcl cap 10 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 25 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 50 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 75 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 100 mg</i>	\$0 (Tier 2)
<i>doxepin hcl cap 150 mg</i>	\$0 (Tier 2)
<i>doxepin hcl conc 10 mg/ml</i>	\$0 (Tier 2)
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	\$0 (Tier 2) NDS, QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	\$0 (Tier 2) NDS, QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	\$0 (Tier 2) NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	\$0 (Tier 1)
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	\$0 (Tier 1)
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	\$0 (Tier 1)
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)
FETZIMA CAP 20MG	\$0 (Tier 2) QL (60 caps / 30 days), PA
FETZIMA CAP 40MG	\$0 (Tier 2) QL (60 caps / 30 days), PA
FETZIMA CAP 80MG	\$0 (Tier 2) QL (30 caps / 30 days), PA
FETZIMA CAP 120MG	\$0 (Tier 2) QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	\$0 (Tier 2) PA
<i>fluoxetine hcl cap 10 mg</i>	\$0 (Tier 1)
<i>fluoxetine hcl cap 20 mg</i>	\$0 (Tier 1)
<i>fluoxetine hcl cap 40 mg</i>	\$0 (Tier 1)
<i>fluoxetine hcl solution 20 mg/5ml</i>	\$0 (Tier 1)
<i>imipramine hcl tab 10 mg</i>	\$0 (Tier 2)
<i>imipramine hcl tab 25 mg</i>	\$0 (Tier 2)
<i>imipramine hcl tab 50 mg</i>	\$0 (Tier 2)
<i>maprotiline hcl tab 25 mg</i>	\$0 (Tier 1)
<i>maprotiline hcl tab 50 mg</i>	\$0 (Tier 1)
<i>maprotiline hcl tab 75 mg</i>	\$0 (Tier 1)
MARPLAN TAB 10MG	\$0 (Tier 2) QL (180 tabs / 30 days)
<i>mirtazapine orally disintegrating tab 15 mg</i>	\$0 (Tier 1)
<i>mirtazapine orally disintegrating tab 30 mg</i>	\$0 (Tier 1)
<i>mirtazapine orally disintegrating tab 45 mg</i>	\$0 (Tier 1)
<i>mirtazapine tab 7.5 mg</i>	\$0 (Tier 1)
<i>mirtazapine tab 15 mg</i>	\$0 (Tier 1)
<i>mirtazapine tab 30 mg</i>	\$0 (Tier 1)
<i>mirtazapine tab 45 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 50 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 200 mg</i>	\$0 (Tier 1)
<i>nefazodone hcl tab 250 mg</i>	\$0 (Tier 1)
<i>nortriptyline hcl cap 10 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 25 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 50 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 75 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl soln 10 mg/5ml</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 10 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 20 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 30 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 40 mg</i>	\$0 (Tier 2)

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
VIIBRYD TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days), PA
VIIBRYD TAB 40MG	\$0 (Tier 2) QL (30 tabs / 30 days), PA

**ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS
DISEASE**

<i>amantadine hcl cap 100 mg</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>amantadine hcl syrup 50 mg/5ml</i>	\$0 (Tier 1)
<i>amantadine hcl tab 100 mg</i>	\$0 (Tier 1)
APOKYN INJ 10MG/ML	\$0 (Tier 2) NDS, QL (20 cartridges / 30 days), LA, PA
<i>benztropine mesylate inj 1 mg/ml</i>	\$0 (Tier 1)
<i>benztropine mesylate tab 0.5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>benztropine mesylate tab 1 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>benztropine mesylate tab 2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa tab 10-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa tab 25-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa tab 25-250 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa tab er 25-100 mg</i>	\$0 (Tier 1)
<i>carbidopa & levodopa tab er 50-200 mg</i>	\$0 (Tier 1)
<i>carbidopa-levodopa-entacapone tabs 12.5- 50-200 mg</i>	\$0 (Tier 1)
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	\$0 (Tier 1)
<i>carbidopa-levodopa-entacapone tabs 25- 100-200 mg</i>	\$0 (Tier 1)
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	\$0 (Tier 1)	
<i>entacapone tab 200 mg</i>	\$0 (Tier 1)	
NEUPRO DIS 1MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 2MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 3MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 4MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 6MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 8MG/24HR	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 1 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	\$0 (Tier 1)	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	\$0 (Tier 1)	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 0.5 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 0.25 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 1 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 2 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 3 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 4 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 5 mg</i>	\$0 (Tier 1)	
<i>selegiline hcl cap 5 mg</i>	\$0 (Tier 1)	
<i>selegiline hcl tab 5 mg</i>	\$0 (Tier 1)	
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 2 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 5 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
ABILIFY MAIN INJ 300MG	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
ABILIFY MAIN INJ 400MG	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>aripiprazole oral solution 1 mg/ml</i>	\$0 (Tier 2) NDS, QL (900 mL / 30 days)
<i>aripiprazole orally disintegrating tab 10 mg</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
<i>aripiprazole orally disintegrating tab 15 mg</i>	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
<i>aripiprazole tab 2 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 15 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>aripiprazole tab 30 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ARISTADA INJ 662MG/2	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ARISTADA INJ 882MG/3	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
ARISTADA INJ 1064MG	\$0 (Tier 2) NDS, QL (1 injection / 56 days)
ARISTADA INJ INITIO	\$0 (Tier 2) NDS
CHLORPROMAZ INJ 25MG/ML	\$0 (Tier 2)
CHLORPROMAZ INJ 50MG/2ML	\$0 (Tier 2)
<i>chlorpromazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>chlorpromazine hcl tab 200 mg</i>	\$0 (Tier 1)
<i>clozapine orally disintegrating tab 12.5 mg</i>	\$0 (Tier 1) PA
<i>clozapine orally disintegrating tab 25 mg</i>	\$0 (Tier 1) PA
<i>clozapine orally disintegrating tab 100 mg</i>	\$0 (Tier 1) QL (270 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 150 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 200 mg</i>	\$0 (Tier 1) QL (135 tabs / 30 days), PA
<i>clozapine tab 25 mg</i>	\$0 (Tier 1)
<i>clozapine tab 50 mg</i>	\$0 (Tier 1)
<i>clozapine tab 100 mg</i>	\$0 (Tier 1) QL (270 tabs / 30 days)
<i>clozapine tab 200 mg</i>	\$0 (Tier 1) QL (135 tabs / 30 days)
FANAPT PAK	\$0 (Tier 2) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)
FANAPT TAB 1MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 2MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 4MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 6MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 8MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 12MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
<i>fluphenazine decanoate inj 25 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl inj 2.5 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl oral conc 5 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 1 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 2.5 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 10 mg</i>	\$0 (Tier 1)
GEODON INJ 20MG	\$0 (Tier 2) QL (6 mL / 3 days)
<i>haloperidol decanoate im soln 50 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol decanoate im soln 100 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol lactate inj 5 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol lactate oral conc 2 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol tab 0.5 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 1 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 2 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 5 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 10 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 20 mg</i>	\$0 (Tier 1)
INVEGA SUST INJ 39/0.25	\$0 (Tier 2) QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 117/0.75	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 156MG/ML	\$0 (Tier 2) NDS, QL (1 injection / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
INVEGA SUST INJ 234/1.5	\$0 (Tier 2) NDS, QL (1 injection / 28 days)
INVEGA TRINZ INJ 273MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 410MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 546MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 819MG	\$0 (Tier 2) NDS, QL (1 injection / 90 days)
LATUDA TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
LATUDA TAB 40MG	\$0 (Tier 2) QL (30 tabs / 30 days)
LATUDA TAB 60MG	\$0 (Tier 2) QL (30 tabs / 30 days)
LATUDA TAB 80MG	\$0 (Tier 2) QL (60 tabs / 30 days)
LATUDA TAB 120MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>loxapine succinate cap 5 mg</i>	\$0 (Tier 1)
<i>loxapine succinate cap 10 mg</i>	\$0 (Tier 1)
<i>loxapine succinate cap 25 mg</i>	\$0 (Tier 1)
<i>loxapine succinate cap 50 mg</i>	\$0 (Tier 1)
<i>molindone hcl tab 5 mg</i>	\$0 (Tier 1)
<i>molindone hcl tab 10 mg</i>	\$0 (Tier 1)
<i>molindone hcl tab 25 mg</i>	\$0 (Tier 1)
NUPLAZID CAP 34MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), LA, PA
NUPLAZID TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
<i>olanzapine for im inj 10 mg</i>	\$0 (Tier 1) QL (3 vials / 1 day)
<i>olanzapine orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine orally disintegrating tab 15 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine tab 2.5 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine tab 5 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine tab 7.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>olanzapine tab 15 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>olanzapine tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 1.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 3 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 6 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>paliperidone tab er 24hr 9 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>perphenazine tab 2 mg</i>	\$0 (Tier 1)	
<i>perphenazine tab 4 mg</i>	\$0 (Tier 1)	
<i>perphenazine tab 8 mg</i>	\$0 (Tier 1)	
<i>perphenazine tab 16 mg</i>	\$0 (Tier 1)	
PERSERIS INJ 90MG	\$0 (Tier 2)	NDS, QL (1 injection / 30 days)
PERSERIS INJ 120MG	\$0 (Tier 2)	NDS, QL (1 injection / 30 days)
<i>pimozide tab 1 mg</i>	\$0 (Tier 1)	
<i>pimozide tab 2 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab 25 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab 50 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab 100 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab 200 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab 300 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab 400 mg</i>	\$0 (Tier 1)	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 150 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 200 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 300 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 400 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days), PA
REXULTI TAB 0.5MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 0.25MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 1MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 2MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
REXULTI TAB 3MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days)
REXULTI TAB 4MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days)
RISPERDAL INJ 12.5MG	\$0 (Tier 2)	QL (2 injections / 28 days)
RISPERDAL INJ 25MG	\$0 (Tier 2)	QL (2 injections / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
RISPERDAL INJ 37.5MG	\$0 (Tier 2) NDS, QL (2 injections / 28 days)
RISPERDAL INJ 50MG	\$0 (Tier 2) NDS, QL (2 injections / 28 days)
<i>risperidone orally disintegrating tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 0.25 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 1 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 2 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 3 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone soln 1 mg/ml</i>	\$0 (Tier 1) QL (240 mL / 30 days)
<i>risperidone tab 0.5 mg</i>	\$0 (Tier 1)
<i>risperidone tab 0.25 mg</i>	\$0 (Tier 1)
<i>risperidone tab 1 mg</i>	\$0 (Tier 1)
<i>risperidone tab 2 mg</i>	\$0 (Tier 1)
<i>risperidone tab 3 mg</i>	\$0 (Tier 1)
<i>risperidone tab 4 mg</i>	\$0 (Tier 1)
SAPHRIS SUB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SAPHRIS SUB 5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SAPHRIS SUB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>thioridazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 1 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 2 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 5 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 10 mg</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
VERSACLOZ SUS 50MG/ML	\$0 (Tier 2) NDS, QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5-3MG	\$0 (Tier 2) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
VRAYLAR CAP 1.5MG	\$0 (Tier 2) NDS, QL (60 caps / 30 days), PA
VRAYLAR CAP 3MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 4.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 6MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
<i>ziprasidone hcl cap 20 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 40 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 60 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 80 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
ZYPREXA RELP INJ 210MG	\$0 (Tier 2) QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	\$0 (Tier 2) NDS, QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	\$0 (Tier 2) NDS, QL (1 vial / 28 days), PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>methylphenidate hcl soln 5 mg/5ml</i>	\$0 (Tier 1) QL (1800 mL / 30 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	\$0 (Tier 1) QL (900 mL / 30 days)
<i>methylphenidate hcl tab 5 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 10 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)

HYPNOTICS - DRUGS TO TREAT INSOMNIA

<i>eszopiclone tab 1 mg</i>	\$0 (Tier 2) QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>eszopiclone tab 2 mg</i>	\$0 (Tier 2) QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

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

MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES

AIMOVIG INJ 70MG/ML	\$0 (Tier 2)	QL (1 pen / 30 days), PA
AIMOVIG INJ 140MG/ML	\$0 (Tier 2)	QL (1 pen / 30 days), PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	\$0 (Tier 2)	NDS

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	\$0 (Tier 2)	NDS, QL (8 mL / 30 days), PA
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
EMGALITY INJ 120MG/ML	\$0 (Tier 2)	QL (2 pens / 30 days), PA
EMGALITY INJ 120MG/ML	\$0 (Tier 2)	QL (2 syringes / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	\$0 (Tier 1)	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	\$0 (Tier 1)	QL (24 inhalers / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	\$0 (Tier 1)	QL (12 inhalers / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	\$0 (Tier 1)	QL (18 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	\$0 (Tier 1)	QL (18 injections / 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	\$0 (Tier 1)	QL (12 injections / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
MISCELLANEOUS	
AUSTEDO TAB 6MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
AUSTEDO TAB 9MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), LA, PA
AUSTEDO TAB 12MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), LA, PA
<i>lithium carbonate cap 150 mg</i>	\$0 (Tier 1)
<i>lithium carbonate cap 300 mg</i>	\$0 (Tier 1)
<i>lithium carbonate cap 600 mg</i>	\$0 (Tier 1)
<i>lithium carbonate tab 300 mg</i>	\$0 (Tier 1)
<i>lithium carbonate tab er 300 mg</i>	\$0 (Tier 1)
<i>lithium carbonate tab er 450 mg</i>	\$0 (Tier 1)
LITHIUM SOL 8MEQ/5ML	\$0 (Tier 2)
LYRICA CR TAB 82.5MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
LYRICA CR TAB 165MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
LYRICA CR TAB 330MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
NUDEXTA CAP 20-10MG	\$0 (Tier 2) QL (60 caps / 30 days), PA
<i>pyridostigmine bromide tab 60 mg</i>	\$0 (Tier 1)
<i>riluzole tab 50 mg</i>	\$0 (Tier 1)
<i>tetrabenazine tab 12.5 mg</i>	\$0 (Tier 2) NDS, QL (240 tabs / 30 days), PA
<i>tetrabenazine tab 25 mg</i>	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), PA
MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS	
BETASERON INJ 0.3MG	\$0 (Tier 2) NDS, QL (14 syringes / 28 days), PA
<i>dalfampridine tab er 12hr 10 mg</i>	\$0 (Tier 2) NDS, PA
GILENYA CAP 0.5MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	\$0 (Tier 2) NDS, QL (30 syringes / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	\$0 (Tier 2) NDS, QL (12 syringes / 28 days), PA
<i>glatopa inj 20mg/ml</i>	\$0 (Tier 2) NDS, QL (30 syringes / 30 days), PA
<i>glatopa inj 40mg/ml</i>	\$0 (Tier 2) NDS, QL (12 syringes / 28 days), PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

<i>baclofen tab 10 mg</i>	\$0 (Tier 1)
<i>baclofen tab 20 mg</i>	\$0 (Tier 1)
<i>carisoprodol tab 350 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 10 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>dantrolene sodium cap 25 mg</i>	\$0 (Tier 1)
<i>dantrolene sodium cap 50 mg</i>	\$0 (Tier 1)
<i>dantrolene sodium cap 100 mg</i>	\$0 (Tier 1)
<i>methocarbamol tab 500 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>methocarbamol tab 750 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	\$0 (Tier 1)

NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS

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

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	\$0 (Tier 1)
<i>ADIPEX-P CAP 37.5MG</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ADIPEX-P TAB 37.5MG	\$0 (Tier 3) DP
<i>benzphetamine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	\$0 (Tier 1) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	\$0 (Tier 1) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	\$0 (Tier 1) QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	\$0 (Tier 1)
CHANTIX PAK 0.5& 1MG	\$0 (Tier 2) PA
CHANTIX PAK 1MG	\$0 (Tier 2) PA
CHANTIX TAB 0.5MG	\$0 (Tier 2) PA
CHANTIX TAB 1MG	\$0 (Tier 2) PA
<i>diethylpropion hcl tab 25 mg</i>	\$0 (Tier 3) DP
<i>diethylpropion hcl tab er 24hr 75 mg</i>	\$0 (Tier 3) DP
<i>disulfiram tab 250 mg</i>	\$0 (Tier 1)
<i>disulfiram tab 500 mg</i>	\$0 (Tier 1)
<i>gnp nicotine gum 2mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine gum 2mg orig</i>	\$0 (Tier 3) DP
<i>gnp nicotine gum 4mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine loz 2mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine loz 4mg mint</i>	\$0 (Tier 3) DP
<i>gnp nicotine loz mini 2mg</i>	\$0 (Tier 3) DP
<i>hm nicotine dis 14mg/24h</i>	\$0 (Tier 3) DP
<i>hm nicotine dis 21mg/24h</i>	\$0 (Tier 3) DP
<i>hm nicotine gum 2mg mint</i>	\$0 (Tier 3) DP
<i>hm nicotine gum 4mg mint</i>	\$0 (Tier 3) DP
<i>hm nicotine loz 2mg mint</i>	\$0 (Tier 3) DP
<i>hm nicotine loz 4mg mint</i>	\$0 (Tier 3) DP
<i>naloxone hcl inj 0.4 mg/ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>naloxone hcl inj 4 mg/10ml</i>	\$0 (Tier 1)	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	\$0 (Tier 1)	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	\$0 (Tier 1)	
<i>naltrexone hcl tab 50 mg</i>	\$0 (Tier 1)	
NARCAN SPR	\$0 (Tier 2)	
<i>nicorelief gum 2mg mint</i>	\$0 (Tier 3)	DP
<i>nicorelief gum 2mg orig</i>	\$0 (Tier 3)	DP
<i>nicorelief gum 4mg orig</i>	\$0 (Tier 3)	DP
<i>nicotine pol loz 4mg mint</i>	\$0 (Tier 3)	DP
<i>nicotine polacrilex gum 2 mg</i>	\$0 (Tier 3)	DP
<i>nicotine polacrilex gum 4 mg</i>	\$0 (Tier 3)	DP
<i>nicotine polacrilex lozenge 2 mg</i>	\$0 (Tier 3)	DP
<i>nicotine polacrilex lozenge 4 mg</i>	\$0 (Tier 3)	DP
<i>nicotine td dis 7mg/24hr</i>	\$0 (Tier 3)	DP
<i>nicotine td patch 24hr 7 mg/24hr</i>	\$0 (Tier 3)	DP
<i>nicotine td patch 24hr 14 mg/24hr</i>	\$0 (Tier 3)	DP
<i>nicotine td patch 24hr 21 mg/24hr</i>	\$0 (Tier 3)	DP
NICOTROL INH	\$0 (Tier 2)	
NICOTROL NS SPR 10MG/ML	\$0 (Tier 2)	
<i>phendimetrazine tartrate tab 35 mg</i>	\$0 (Tier 3)	DP
<i>phentermine hcl cap 15 mg</i>	\$0 (Tier 3)	DP
<i>phentermine hcl cap 30 mg</i>	\$0 (Tier 3)	DP
<i>phentermine hcl cap 37.5 mg</i>	\$0 (Tier 3)	DP
<i>phentermine hcl tab 37.5 mg</i>	\$0 (Tier 3)	DP
QSYMIA CAP 3.75-23	\$0 (Tier 3)	DP
QSYMIA CAP 7.5-46MG	\$0 (Tier 3)	DP
QSYMIA CAP 11.25-69	\$0 (Tier 3)	DP
QSYMIA CAP 15-92MG	\$0 (Tier 3)	DP
<i>sm nicotine gum 2mg</i>	\$0 (Tier 3)	DP
<i>sm nicotine gum 2mg mint</i>	\$0 (Tier 3)	DP
<i>sm nicotine gum 4mg</i>	\$0 (Tier 3)	DP
<i>sm nicotine gum 4mg mint</i>	\$0 (Tier 3)	DP
<i>sm nicotine loz 2mg mint</i>	\$0 (Tier 3)	DP
<i>sm nicotine loz 4mg mint</i>	\$0 (Tier 3)	DP
<i>thrive gum 2mg mint</i>	\$0 (Tier 3)	DP
VIVITROL INJ 380MG	\$0 (Tier 2)	NDS

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND
REGULATE HORMONES****ANDROGENS - DRUGS TO REGULATE MALE HORMONES**

ANADROL-50 TAB 50MG	\$0 (Tier 2) NDS, PA
ANDRODERM DIS 2MG/24HR	\$0 (Tier 2) QL (30 patches / 30 days), PA
ANDRODERM DIS 4MG/24HR	\$0 (Tier 2) QL (30 patches / 30 days), PA
<i>oxandrolone tab 2.5 mg</i>	\$0 (Tier 1) PA
<i>oxandrolone tab 10 mg</i>	\$0 (Tier 1) PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	\$0 (Tier 1) QL (300 grams / 30 days), PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	\$0 (Tier 1) QL (300 grams / 30 days), PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	\$0 (Tier 1) QL (300 grams / 30 days), PA

ANTIDIABETICS, INJECTABLE - DRUGS TO TREAT DIABETES

BASAGLAR INJ 100UNIT	\$0 (Tier 2)
BD ALCOHOL SWABS	\$0 (Tier 2)
BD ULTRAFINE INSULIN SYRINGE	\$0 (Tier 2)
BD ULTRAFINE/NANO PEN NEEDLES	\$0 (Tier 2)
BYDUREON BC INJ 2/0.85ML	\$0 (Tier 2) QL (4 pens / 28 days)
BYDUREON PEN INJ 2MG	\$0 (Tier 2) QL (4 pens / 28 days)
BYETTA INJ 5MCG	\$0 (Tier 2) QL (1 pen / 30 days)
BYETTA INJ 10MCG	\$0 (Tier 2) QL (1 pen / 30 days)
FIASP FLEX INJ TOUCH	\$0 (Tier 2)
FIASP INJ 100/ML	\$0 (Tier 2)
GAUZE PADS 2" X 2"	\$0 (Tier 2)
HUMULIN R INJ U-500	\$0 (Tier 2) NDS
HUMULIN R INJ U-500	\$0 (Tier 2) NDS, B/D
INSULIN PEN NEEDLE	\$0 (Tier 2)
INSULIN SAFETY NEEDLES	\$0 (Tier 2)
INSULIN SYRINGE	\$0 (Tier 2)
LEVEMIR INJ	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LEVEMIR INJ FLEXTouc	\$0 (Tier 2)
NOVOLIN INJ 70/30	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN INJ FLEXPEN	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN N INJ U-100	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN R INJ U-100	\$0 (Tier 2) (brand RELION not covered)
NOVOLOG INJ 100/ML	\$0 (Tier 2)
NOVOLOG INJ FLEXPEN	\$0 (Tier 2)
NOVOLOG INJ PENFILL	\$0 (Tier 2)
NOVOLOG MIX INJ 70/30	\$0 (Tier 2)
NOVOLOG MIX INJ FLEXPEN	\$0 (Tier 2)
OZEMPIC INJ 2/1.5ML	\$0 (Tier 2) QL (1 pen / 28 days)
OZEMPIC INJ 2/1.5ML	\$0 (Tier 2) QL (2 pens / 28 days)
SOLIQUA INJ 100/33	\$0 (Tier 2) QL (10 pens / 30 days)
TRESIBA FLEX INJ 100UNIT	\$0 (Tier 2)
TRESIBA FLEX INJ 200UNIT	\$0 (Tier 2)
TRESIBA INJ 100UNIT	\$0 (Tier 2)
TRULICITY INJ 0.75/0.5	\$0 (Tier 2) QL (4 pens / 28 days)
TRULICITY INJ 1.5/0.5	\$0 (Tier 2) QL (4 pens / 28 days)
VICTOZA INJ 18MG/3ML	\$0 (Tier 2) QL (3 pens / 30 days)
XULTOPHY INJ 100/3.6	\$0 (Tier 2) QL (5 pens / 30 days)

ANTIDIABETICS, ORAL - DRUGS TO TREAT DIABETES

<i>acarbose tab 25 mg</i>	\$0 (Tier 1)
<i>acarbose tab 50 mg</i>	\$0 (Tier 1)
<i>acarbose tab 100 mg</i>	\$0 (Tier 1)
FARXIGA TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
FARXIGA TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	\$0 (Tier 2) QL (90 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	\$0 (Tier 2) QL (90 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>glipizide tab 5 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>glipizide xl tab 2.5mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>glipizide xl tab 5mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>glipizide xl tab 10mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>glyburide micronized tab 1.5 mg</i>	\$0 (Tier 2) QL (240 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide micronized tab 3 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide micronized tab 6 mg</i>	\$0 (Tier 2) QL (60 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide tab 1.25 mg</i>	\$0 (Tier 2) QL (480 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide tab 2.5 mg</i>	\$0 (Tier 2) QL (240 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide tab 5 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide-metformin tab 1.25-250 mg</i>	\$0 (Tier 2) QL (240 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide-metformin tab 2.5-500 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide-metformin tab 5-500 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older
JANUMET TAB 50-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET TAB 50-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUVIA TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUVIA TAB 50MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JANUVIA TAB 100MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	\$0 (Tier 2) QL (60 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
JENTADUETO TAB 2.5-850	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB XR	\$0 (Tier 2) QL (30 tabs / 30 days)
JENTADUETO TAB XR	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	\$0 (Tier 1) QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl tab er 24hr 750 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>nateglinide tab 60 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>nateglinide tab 120 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>repaglinide tab 1 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>repaglinide tab 2 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
SYNJARDY TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY TAB 5-500MG	\$0 (Tier 2) QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0 (Tier 2) QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XIGDUO XR TAB 2.5-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0 (Tier 2) QL (30 tabs / 30 days)
BISPHOSPHONATES - DRUGS TO TREAT BONE LOSS	
<i>alendronate sodium oral soln 70 mg/75ml</i>	\$0 (Tier 1)
<i>alendronate sodium tab 5 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 10 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 35 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>alendronate sodium tab 40 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 70 mg</i>	\$0 (Tier 1)
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium for inj 30 mg</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium for inj 90 mg</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium iv soln 3 mg/ml</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium iv soln 9 mg/ml</i>	\$0 (Tier 1) B/D
PAMIDRONATE INJ 6MG/ML	\$0 (Tier 2) B/D
<i>risedronate sodium tab 5 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab 35 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab 150 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab delayed release 35 mg</i>	\$0 (Tier 1)
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	\$0 (Tier 1) B/D
<i>zoledronic acid iv soln 5 mg/100ml</i>	\$0 (Tier 1) B/D

CHELATING AGENTS

CHEMET CAP 100MG	\$0 (Tier 2)
DEPEN TITRA TAB 250MG	\$0 (Tier 2) NDS
JADENU SPRKL GRA 90MG	\$0 (Tier 2) NDS, LA, PA
JADENU SPRKL GRA 180MG	\$0 (Tier 2) NDS, LA, PA
JADENU SPRKL GRA 360MG	\$0 (Tier 2) NDS, LA, PA
JADENU TAB 90MG	\$0 (Tier 2) NDS, LA, PA
JADENU TAB 180MG	\$0 (Tier 2) NDS, LA, PA
JADENU TAB 360MG	\$0 (Tier 2) NDS, LA, PA
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	\$0 (Tier 1)
<i>sodium polystyrene sulfonate powder</i>	\$0 (Tier 1)
<i>trientine hcl cap 250 mg</i>	\$0 (Tier 2) NDS, PA

CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL

<i>alyacen tab 1/35</i>	\$0 (Tier 1)
<i>amethia lo tab</i>	\$0 (Tier 1)
<i>amethia tab</i>	\$0 (Tier 1)
<i>apri tab</i>	\$0 (Tier 1)
<i>aranella tab</i>	\$0 (Tier 1)
<i>ashlyna tab</i>	\$0 (Tier 1)
<i>aubra tab 0.1-0.02</i>	\$0 (Tier 1)
<i>aviane tab</i>	\$0 (Tier 1)
<i>balziva tab</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>bekyree tab</i>	\$0 (Tier 1)
<i>blisovi 24 tab fe 1/20</i>	\$0 (Tier 1)
<i>blisovi fe tab 1.5/30</i>	\$0 (Tier 1)
<i>briellyn tab</i>	\$0 (Tier 1)
<i>camila tab 0.35mg</i>	\$0 (Tier 1)
<i>camrese lo tab</i>	\$0 (Tier 1)
<i>cryselle-28 tab 28 tabs</i>	\$0 (Tier 1)
<i>cyclafem tab 1/35</i>	\$0 (Tier 1)
<i>cyclafem tab 7/7/7</i>	\$0 (Tier 1)
<i>dasetta tab 1/35</i>	\$0 (Tier 1)
<i>dasetta tab 7/7/7</i>	\$0 (Tier 1)
<i>deblitane tab 0.35mg</i>	\$0 (Tier 1)
<i>delyla tab 0.1-0.02</i>	\$0 (Tier 1)
<i>desogest-eth estrad & eth estrad tab 0.15- 0.02/0.01 mg(21/5)</i>	\$0 (Tier 1)
<i>desogest-ethin est tab 0.1-0.025/0.125- 0.025/0.15-0.025mg-mg</i>	\$0 (Tier 1)
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	\$0 (Tier 1)
<i>ELLA TAB 30MG</i>	\$0 (Tier 2)
<i>emoquette tab</i>	\$0 (Tier 1)
<i>enpresse-28 tab</i>	\$0 (Tier 1)
<i>enskyce tab</i>	\$0 (Tier 1)
<i>errin tab 0.35mg</i>	\$0 (Tier 1)
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0 (Tier 1)
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	\$0 (Tier 1)
<i>falmina tab</i>	\$0 (Tier 1)
<i>fayosim tab</i>	\$0 (Tier 1)
<i>femynor tab 0.25-35</i>	\$0 (Tier 1)
<i>hailey 24 tab fe</i>	\$0 (Tier 1)
<i>heather tab 0.35mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>incassia tab 0.35mg</i>	\$0 (Tier 1)
<i>introvale tab</i>	\$0 (Tier 1)
<i>isibloom tab</i>	\$0 (Tier 1)
<i>jasmiel tab 3-0.02mg</i>	\$0 (Tier 1)
<i>jolivette tab 0.35mg</i>	\$0 (Tier 1)
<i>juleber tab</i>	\$0 (Tier 1)
<i>junel 1.5/30 tab</i>	\$0 (Tier 1)
<i>junel 1/20 tab</i>	\$0 (Tier 1)
<i>junel fe 24 tab 1/20</i>	\$0 (Tier 1)
<i>junel fe tab 1.5/30</i>	\$0 (Tier 1)
<i>junel fe tab 1/20</i>	\$0 (Tier 1)
<i>kaitlib fe chw</i>	\$0 (Tier 1)
<i>kariva tab 28 day</i>	\$0 (Tier 1)
<i>kelnor 1/50 tab</i>	\$0 (Tier 1)
<i>kelnor tab 1/35</i>	\$0 (Tier 1)
<i>kurvelo tab 0.15/30</i>	\$0 (Tier 1)
<i>larin fe tab 1.5/30</i>	\$0 (Tier 1)
<i>larin fe tab 1/20</i>	\$0 (Tier 1)
<i>larin tab 1.5/30</i>	\$0 (Tier 1)
<i>larin tab 1/20</i>	\$0 (Tier 1)
<i>layolis fe chw</i>	\$0 (Tier 1)
<i>lessina tab</i>	\$0 (Tier 1)
<i>levonest tab</i>	\$0 (Tier 1)
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	\$0 (Tier 1)
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 1)
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 1)
<i>levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg</i>	\$0 (Tier 1)
<i>levora-28 tab 0.15/30</i>	\$0 (Tier 1)
<i>loryna tab 3-0.02mg</i>	\$0 (Tier 1)
<i>lutra tab</i>	\$0 (Tier 1)
<i>lyza tab 0.35mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>marlissa tab 0.15/30</i>	\$0 (Tier 1)	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	\$0 (Tier 1)	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	\$0 (Tier 1)	
<i>melodetta chw 24 fe</i>	\$0 (Tier 1)	
<i>mibelas 24 chw fe</i>	\$0 (Tier 1)	
<i>mili tab 0.25/35</i>	\$0 (Tier 1)	
<i>necon tab 0.5/35</i>	\$0 (Tier 1)	
<i>nikki tab 3-0.02mg</i>	\$0 (Tier 1)	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	\$0 (Tier 1)	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	\$0 (Tier 1)	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	\$0 (Tier 1)	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	\$0 (Tier 1)	
<i>norethindrone tab 0.35 mg</i>	\$0 (Tier 1)	
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	\$0 (Tier 1)	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	\$0 (Tier 1)	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	\$0 (Tier 1)	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	\$0 (Tier 1)	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	\$0 (Tier 1)	
<i>norlyroc tab 0.35mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>nortrel tab 0.5/35</i>	\$0 (Tier 1)
<i>nortrel tab 1/35</i>	\$0 (Tier 1)
<i>nortrel tab 7/7/7</i>	\$0 (Tier 1)
NUVARING MIS	\$0 (Tier 2)
<i>orsythia tab</i>	\$0 (Tier 1)
<i>philith tab 0.4-35</i>	\$0 (Tier 1)
<i>pimtrea tab</i>	\$0 (Tier 1)
<i>pirmella tab 1/35</i>	\$0 (Tier 1)
<i>portia-28 tab</i>	\$0 (Tier 1)
<i>previfem tab</i>	\$0 (Tier 1)
<i>reclipsen tab</i>	\$0 (Tier 1)
<i>rivelsa tab</i>	\$0 (Tier 1)
<i>sharobel tab 0.35mg</i>	\$0 (Tier 1)
<i>sprintec 28 tab 28 day</i>	\$0 (Tier 1)
<i>tarina 24 fe tab</i>	\$0 (Tier 1)
<i>tarina fe tab 1/20</i>	\$0 (Tier 1)
<i>tri-estaryll tab</i>	\$0 (Tier 1)
<i>tri-legest tab fe</i>	\$0 (Tier 1)
<i>tri-lo- tab sprintec</i>	\$0 (Tier 1)
<i>tri-mili tab</i>	\$0 (Tier 1)
<i>tri-previfem tab</i>	\$0 (Tier 1)
<i>tri-sprintec tab</i>	\$0 (Tier 1)
<i>tri-vylibra tab</i>	\$0 (Tier 1)
<i>tri-vylibra tab lo</i>	\$0 (Tier 1)
<i>trivora-28 tab</i>	\$0 (Tier 1)
<i>tulana tab 0.35mg</i>	\$0 (Tier 1)
<i>tydemy tab</i>	\$0 (Tier 1)
<i>velivet pak</i>	\$0 (Tier 1)
<i>vienva tab 0.1-20</i>	\$0 (Tier 1)
<i>viorele tab</i>	\$0 (Tier 1)
<i>vyfemla tab 0.4-35</i>	\$0 (Tier 1)
<i>vylibra tab 0.25-35</i>	\$0 (Tier 1)
<i>wymzya fe chw 0.4mg-35</i>	\$0 (Tier 1)
<i>zarah tab 3-0.03mg</i>	\$0 (Tier 1)
<i>zovia 1/35e tab</i>	\$0 (Tier 1)
ENDOMETRIOSIS	
<i>danazol cap 50 mg</i>	\$0 (Tier 1)
<i>danazol cap 100 mg</i>	\$0 (Tier 1)
<i>danazol cap 200 mg</i>	\$0 (Tier 1)
SYNAREL SOL 2MG/ML	\$0 (Tier 2) NDS

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

ALDURAZYME INJ 2.9MG/5M	\$0 (Tier 2) NDS, LA, PA
CARBAGLU TAB 200MG	\$0 (Tier 2) NDS, LA, PA
CERDELGA CAP 84MG	\$0 (Tier 2) NDS, PA
CEREZYME INJ 400UNIT	\$0 (Tier 2) NDS, LA, PA
CYSTADANE POW	\$0 (Tier 2) NDS, LA
CYSTAGON CAP 50MG	\$0 (Tier 2) LA, PA
CYSTAGON CAP 150MG	\$0 (Tier 2) LA, PA
FABRAZYME INJ 5MG	\$0 (Tier 2) NDS, LA, PA
FABRAZYME INJ 35MG	\$0 (Tier 2) NDS, LA, PA
KUVAN POW 100MG	\$0 (Tier 2) NDS, LA, PA
KUVAN POW 500MG	\$0 (Tier 2) NDS, LA, PA
KUVAN TAB 100MG	\$0 (Tier 2) NDS, LA, PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	\$0 (Tier 1) B/D
<i>levocarnitine tab 330 mg</i>	\$0 (Tier 1) B/D
LUMIZYME INJ 50MG	\$0 (Tier 2) NDS, LA, PA
<i>miglustat cap 100 mg</i>	\$0 (Tier 2) NDS, PA
NAGLAZYME INJ 1MG/ML	\$0 (Tier 2) NDS, LA, PA
NITYR TAB 2MG	\$0 (Tier 2) NDS, LA, PA
NITYR TAB 5MG	\$0 (Tier 2) NDS, LA, PA
NITYR TAB 10MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 2MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 5MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 10MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 20MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN SUS 4MG/ML	\$0 (Tier 2) NDS, LA, PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	\$0 (Tier 2) NDS, PA
<i>sodium phenylbutyrate tab 500 mg</i>	\$0 (Tier 2) NDS, PA

ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES

DELESTROGEN INJ 10MG/ML	\$0 (Tier 2)
<i>estradiol tab 0.5 mg</i>	\$0 (Tier 2)
<i>estradiol tab 1 mg</i>	\$0 (Tier 2)
<i>estradiol tab 2 mg</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.05 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.06 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.025 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.075 mg/24hr</i>	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)
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<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	\$0 (Tier 2)
<i>estradiol vaginal cream 0.1 mg/gm</i>	\$0 (Tier 1)
<i>estradiol vaginal tab 10 mcg</i>	\$0 (Tier 1)
<i>estradiol valerate im in oil 20 mg/ml</i>	\$0 (Tier 1)
<i>estradiol valerate im in oil 40 mg/ml</i>	\$0 (Tier 1)
<i>fyavolv tab 0.5-2.5</i>	\$0 (Tier 2)
<i>jinteli tab 1mg-5mcg</i>	\$0 (Tier 2)
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	\$0 (Tier 2)
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	\$0 (Tier 2)

GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE

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

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

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD
SUGAR**

GLUCAGEN INJ HYPOKIT	\$0 (Tier 2)
GLUCAGON KIT 1MG	\$0 (Tier 2)
PROGLYCEM SUS 50MG/ML	\$0 (Tier 2)

MISCELLANEOUS

<i>cabergoline tab 0.5 mg</i>	\$0 (Tier 1)
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	\$0 (Tier 1) B/D
CHARCOAL POW	\$0 (Tier 3) DP
CHEMSTRIP TES UGK	\$0 (Tier 3) DP
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (120 tabs / 30 days)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (60 tabs / 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (120 tabs / 30 days)
D-XYLOSE POW	\$0 (Tier 3) DP
DIASCREEN 3 MIS	\$0 (Tier 3) DP
DIASCREEN 5 MIS	\$0 (Tier 3) DP
DIASCREEN 6 MIS	\$0 (Tier 3) DP
DIASCREEN 7 MIS	\$0 (Tier 3) DP
DIASCREEN 8 MIS	\$0 (Tier 3) DP
DIASCREEN 9 MIS	\$0 (Tier 3) DP
DIASCREEN 10 MIS	\$0 (Tier 3) DP
DIASCREEN MIS 1G	\$0 (Tier 3) DP
DIASCREEN MIS 2GK	\$0 (Tier 3) DP
DIASCREEN MIS 4OBL	\$0 (Tier 3) DP
DIASTIX TES STRIPS	\$0 (Tier 3) DP
FORTEO SOL 600/2.4	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.2MG	\$0 (Tier 2) PA
GENOTROPIN INJ 0.4MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.6MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.8MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.4MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.6MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.8MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 5MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
GENOTROPIN INJ 12MG	\$0 (Tier 2) NDS, PA
INCRELEX INJ 40MG/4ML	\$0 (Tier 2) NDS, LA, PA
KETO-DIASTIX TES	\$0 (Tier 3) DP
KORLYM TAB 300MG	\$0 (Tier 2) NDS, LA, PA
LUPR DEP-PED INJ 3M 30MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 7.5MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 11.25MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 15MG	\$0 (Tier 2) NDS, PA
NATPARA INJ 25MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 50MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 75MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 100MCG	\$0 (Tier 2) NDS, PA
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	\$0 (Tier 2) NDS, PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	\$0 (Tier 2) NDS, PA
PROLIA SOL 60MG/ML	\$0 (Tier 2) QL (1 injection / 180 days)
<i>raloxifene hcl tab 60 mg</i>	\$0 (Tier 1)
SIGNIFOR INJ 0.3MG/ML	\$0 (Tier 2) NDS, LA, PA
SIGNIFOR INJ 0.6MG/ML	\$0 (Tier 2) NDS, LA, PA
SIGNIFOR INJ 0.9MG/ML	\$0 (Tier 2) NDS, LA, PA
SOMATULINE INJ 60/0.2ML	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 90/0.3ML	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 120/.5ML	\$0 (Tier 2) NDS, PA
SOMAVERT INJ 10MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 15MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 20MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 25MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 30MG	\$0 (Tier 2) NDS, LA, PA
TYMLOS INJ	\$0 (Tier 2) NDS, PA
XGEVA INJ	\$0 (Tier 2) NDS, PA

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS**

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

PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES

<i>medroxyprogesterone acetate tab 2.5 mg</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate tab 5 mg</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate tab 10 mg</i>	\$0 (Tier 1)
<i>norethindrone acetate tab 5 mg</i>	\$0 (Tier 1)

THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS

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

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

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

VASOPRESSINS - DRUGS TO REGULATE PITUITARY HORMONES

<i>desmopressin acetate inj 4 mcg/ml</i>	\$0 (Tier 1)
<i>desmopressin acetate nasal spray soln 0.01%</i>	\$0 (Tier 1)
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	\$0 (Tier 1)
<i>desmopressin acetate tab 0.1 mg</i>	\$0 (Tier 1)
<i>desmopressin acetate tab 0.2 mg</i>	\$0 (Tier 1)
STIMATE SOL 1.5MG/ML	\$0 (Tier 2) NDS

GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS

ANTACIDS

<i>advanced sus antacid</i>	\$0 (Tier 3) DP
<i>almacone dbl sus strength</i>	\$0 (Tier 3) DP
<i>almacone sus</i>	\$0 (Tier 3) DP
ALUM HYDROX SUS 320/5ML	\$0 (Tier 3) DP
<i>antacid fast sus acting</i>	\$0 (Tier 3) DP
<i>antacid fast sus relief</i>	\$0 (Tier 3) DP
<i>antacid plus sus anti-gas</i>	\$0 (Tier 3) DP
<i>antacid plus sus gas rel</i>	\$0 (Tier 3) DP
<i>antacid sus</i>	\$0 (Tier 3) DP
<i>antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>antacid sus max st</i>	\$0 (Tier 3) DP
<i>antacid sus mint crm</i>	\$0 (Tier 3) DP
<i>antacid sus reg st</i>	\$0 (Tier 3) DP
<i>antacid/sime sus ds</i>	\$0 (Tier 3) DP
CALCIUM CARB TAB 648MG	\$0 (Tier 3) DP
GELUSIL CHW	\$0 (Tier 3) DP
<i>gnp antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>hm antacid sus anti-gas</i>	\$0 (Tier 3) DP
<i>mag-al plus liq</i>	\$0 (Tier 3) DP
<i>mag-al plus liq xs</i>	\$0 (Tier 3) DP
MAGN OXIDE POW HEAVY	\$0 (Tier 3) DP
MAGN OXIDE POW LIGHT	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg</i>	\$0 (Tier 3) DP
<i>mi-acid sus</i>	\$0 (Tier 3) DP

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

ANTI-DIARRHEAL

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

ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING

<i>aprepitant capsule 40 mg</i>	\$0 (Tier 1) B/D
<i>aprepitant capsule 80 mg</i>	\$0 (Tier 1) B/D
<i>aprepitant capsule 125 mg</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	\$0 (Tier 1) B/D
<i>compro sup 25mg</i>	\$0 (Tier 1)
<i>dronabinol cap 2.5 mg</i>	\$0 (Tier 1) B/D, QL (60 caps / 30 days)
<i>dronabinol cap 5 mg</i>	\$0 (Tier 1) B/D, QL (60 caps / 30 days)
<i>dronabinol cap 10 mg</i>	\$0 (Tier 1) B/D, QL (60 caps / 30 days)
<i>EMEND SUS 125MG</i>	\$0 (Tier 2) B/D
<i>granisetron hcl inj 1 mg/ml</i>	\$0 (Tier 1)
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	\$0 (Tier 1)
<i>granisetron hcl tab 1 mg</i>	\$0 (Tier 1) B/D
<i>meclizine hcl tab 12.5 mg</i>	\$0 (Tier 2)
<i>meclizine hcl tab 25 mg</i>	\$0 (Tier 2)
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	\$0 (Tier 1)
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	\$0 (Tier 1)
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	\$0 (Tier 1)
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	\$0 (Tier 1)
<i>ondansetron hcl oral soln 4 mg/5ml</i>	\$0 (Tier 1) B/D
<i>ondansetron hcl tab 4 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron hcl tab 8 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron hcl tab 24 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron orally disintegrating tab 4 mg</i>	\$0 (Tier 1) B/D
<i>ondansetron orally disintegrating tab 8 mg</i>	\$0 (Tier 1) B/D
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	\$0 (Tier 1)
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>prochlorperazine suppos 25 mg</i>	\$0 (Tier 1)
<i>promethazine hcl inj 25 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl inj 50 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>promethazine hcl syrup 6.25 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl tab 12.5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl tab 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>promethazine hcl tab 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>scopolamine td patch 72hr 1 mg/3days</i>	\$0 (Tier 2) QL (10 patches / 30 days), PA; PA if 70 years and older

ANTISPASMODICS - DRUGS FOR STOMACH SPASMS

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

H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID

<i>famotidine for susp 40 mg/5ml</i>	\$0 (Tier 1)
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	\$0 (Tier 1)
<i>famotidine inj 20 mg/2ml</i>	\$0 (Tier 1)
<i>famotidine inj 40 mg/4ml</i>	\$0 (Tier 1)
<i>famotidine inj 200 mg/20ml</i>	\$0 (Tier 1)
<i>famotidine tab 20 mg</i>	\$0 (Tier 1)
<i>famotidine tab 40 mg</i>	\$0 (Tier 1)
<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1)
<i>ranitidine hcl inj 150 mg/6ml (25 mg/ml)</i>	\$0 (Tier 1)
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	\$0 (Tier 1)
<i>ranitidine hcl tab 150 mg</i>	\$0 (Tier 1)
<i>ranitidine hcl tab 300 mg</i>	\$0 (Tier 1)

INFLAMMATORY BOWEL DISEASE

<i>balsalazide disodium cap 750 mg</i>	\$0 (Tier 1)
<i>budesonide delayed release particles cap 3 mg</i>	\$0 (Tier 1)
<i>hydrocortisone enema 100 mg/60ml</i>	\$0 (Tier 1)
<i>mesalamine cap dr 400 mg</i>	\$0 (Tier 1)
<i>mesalamine enema 4 gm</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	\$0 (Tier 1)
<i>mesalamine suppos 1000 mg</i>	\$0 (Tier 2) NDS
<i>mesalamine tab delayed release 1.2 gm</i>	\$0 (Tier 1)
<i>sulfasalazine tab 500 mg</i>	\$0 (Tier 1)
<i>sulfasalazine tab delayed release 500 mg</i>	\$0 (Tier 1)

LAXATIVES

<i>bisac-evac sup 10mg</i>	\$0 (Tier 3) DP
<i>bisacodyl suppos 10 mg</i>	\$0 (Tier 3) DP
<i>bisacodyl tab 5mg ec</i>	\$0 (Tier 3) DP
<i>biscolax sup 10mg</i>	\$0 (Tier 3) DP
<i>constulose sol 10gm/15</i>	\$0 (Tier 1)
<i>docu liq 50mg/5ml</i>	\$0 (Tier 3) DP
<i>docu soft cap 100mg</i>	\$0 (Tier 3) DP
<i>docusate cal cap 240mg</i>	\$0 (Tier 3) DP
<i>docusate sod cap 100mg</i>	\$0 (Tier 3) DP
<i>docusate sod liq 50mg/5ml</i>	\$0 (Tier 3) DP
<i>docusate sodium cap 100 mg</i>	\$0 (Tier 3) DP
<i>docusate sodium liquid 150 mg/15ml</i>	\$0 (Tier 3) DP
<i>docusil cap 100mg</i>	\$0 (Tier 3) DP
DOCUSOL MINI ENE	\$0 (Tier 3) DP
<i>dok plus tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>ducodyl tab 5mg ec</i>	\$0 (Tier 3) DP
ENEMEEZ MINI ENE	\$0 (Tier 3) DP
ENEMEEZ PLUS ENE 20-283	\$0 (Tier 3) DP
<i>enulose sol 10gm/15</i>	\$0 (Tier 1)
<i>epsom salt gra</i>	\$0 (Tier 3) DP
EPSOM SALT POW	\$0 (Tier 3) DP
<i>gavilyte-c sol</i>	\$0 (Tier 1)
<i>gavilyte-g sol</i>	\$0 (Tier 1)
<i>gavilyte-n sol flav pk</i>	\$0 (Tier 1)
<i>generlac sol 10gm/15</i>	\$0 (Tier 1)
<i>gentle laxat sup 10mg</i>	\$0 (Tier 3) DP
<i>gentle laxat tab 5mg ec</i>	\$0 (Tier 3) DP
<i>glycerin suppos 1 gm</i>	\$0 (Tier 3) DP
<i>gnp bisa-lax tab 5mg ec</i>	\$0 (Tier 3) DP
<i>gnp glycerin sup 1.2gm</i>	\$0 (Tier 3) DP
<i>gnp laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>gnp laxative tab 5mg ec</i>	\$0 (Tier 3) DP
<i>gnp laxative tab 25mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
GOLYTELY SOL	\$0 (Tier 2)
<i>hm epsom gra salt</i>	\$0 (Tier 3) DP
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	\$0 (Tier 1)
<i>lactulose solution 10 gm/15ml</i>	\$0 (Tier 1)
<i>laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>laxative tab 25mg</i>	\$0 (Tier 3) DP
<i>medi-natural tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>medi-natural tab 8.6mg</i>	\$0 (Tier 3) DP
MINERAL OIL	\$0 (Tier 3) DP
MINERAL OIL HEAVY	\$0 (Tier 3) DP
MINERAL OIL LIGHT	\$0 (Tier 3) DP
<i>nat fiber pow therapy</i>	\$0 (Tier 3) DP
<i>nat veg lax tab 8.6mg</i>	\$0 (Tier 3) DP
<i>naturl fiber pow 28.3%</i>	\$0 (Tier 3) DP
NULYTELY SOL FLAV PKS	\$0 (Tier 2)
PEDIA-LAX LIQ 50MG	\$0 (Tier 3) DP
PEDIA-LAX SUP 1GM	\$0 (Tier 3) DP
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	\$0 (Tier 1)
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	\$0 (Tier 1)
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	\$0 (Tier 1)
PLENVU SOL	\$0 (Tier 2)
PSYLLIUM POW HUSK 95%	\$0 (Tier 3) DP
<i>qc epsom gra salt</i>	\$0 (Tier 3) DP
<i>qc laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>qc natural pow vegetabl</i>	\$0 (Tier 3) DP
<i>qc senna tab 8.6mg</i>	\$0 (Tier 3) DP
<i>ra epsom gra salt</i>	\$0 (Tier 3) DP
RA EPSOM GRA SALT/LVN	\$0 (Tier 3) DP
<i>ra glycerin sup 80.7%</i>	\$0 (Tier 3) DP
<i>reguloid pow 28.3%</i>	\$0 (Tier 3) DP
<i>reguloid pow 48.57%</i>	\$0 (Tier 3) DP
<i>reguloid pow 58.6%</i>	\$0 (Tier 3) DP
<i>sb docusate tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>sb fib lax pow 33%</i>	\$0 (Tier 3) DP
<i>sb laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>senna-lax tab 8.6mg</i>	\$0 (Tier 3) DP
<i>senna-s tab 8.6-50mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>senna-tabs tab 8.6mg</i>	\$0 (Tier 3) DP
<i>senna-time s tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>senna-time tab 8.6mg</i>	\$0 (Tier 3) DP
<i>senno tab 8.6mg</i>	\$0 (Tier 3) DP
<i>sennosides syrup 8.8 mg/5ml</i>	\$0 (Tier 3) DP
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	\$0 (Tier 3) DP
<i>silace liq 10mg/ml</i>	\$0 (Tier 3) DP
<i>silace syp 60/15ml</i>	\$0 (Tier 3) DP
<i>sm fiber pow 28.3%</i>	\$0 (Tier 3) DP
<i>sm fiber pow 48.57%</i>	\$0 (Tier 3) DP
<i>sm fiber pow 58.6%</i>	\$0 (Tier 3) DP
<i>sm laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>stim laxat tab 5mg ec</i>	\$0 (Tier 3) DP
<i>stool softnr cap 100mg</i>	\$0 (Tier 3) DP
<i>stool softnr cap 250mg</i>	\$0 (Tier 3) DP
<i>stool softnr syp 60/15ml</i>	\$0 (Tier 3) DP
<i>stool softnr tab 8.6-50mg</i>	\$0 (Tier 3) DP
SUPREP BOWEL SOL PREP KIT	\$0 (Tier 2)
<i>trilyte sol</i>	\$0 (Tier 1)
<i>womans laxat tab 5mg ec</i>	\$0 (Tier 3) DP

MISCELLANEOUS

<i>alosetron hcl tab 0.5 mg (base equiv)</i>	\$0 (Tier 2) NDS, PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	\$0 (Tier 2) NDS, PA
AMITIZA CAP 8MCG	\$0 (Tier 2) QL (180 caps / 30 days)
AMITIZA CAP 24MCG	\$0 (Tier 2) QL (60 caps / 30 days)
<i>cromolyn sodium oral conc 100 mg/5ml</i>	\$0 (Tier 2) NDS
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	\$0 (Tier 2)
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	\$0 (Tier 2)
GATTEX KIT 5MG	\$0 (Tier 2) NDS, LA, PA
LINZESS CAP 72MCG	\$0 (Tier 2) QL (30 caps / 30 days)
LINZESS CAP 145MCG	\$0 (Tier 2) QL (30 caps / 30 days)
LINZESS CAP 290MCG	\$0 (Tier 2) QL (30 caps / 30 days)
<i>loperamide hcl cap 2 mg</i>	\$0 (Tier 1)
<i>misoprostol tab 100 mcg</i>	\$0 (Tier 1)
<i>misoprostol tab 200 mcg</i>	\$0 (Tier 1)
MOVANTIK TAB 12.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
MOVANTIK TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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RELISTOR INJ 8/0.4ML	\$0 (Tier 2) NDS, PA
RELISTOR INJ 12/0.6ML	\$0 (Tier 2) NDS, PA
<i>sucralfate tab 1 gm</i>	\$0 (Tier 1)
<i>ursodiol cap 300 mg</i>	\$0 (Tier 1)
<i>ursodiol tab 250 mg</i>	\$0 (Tier 1)
<i>ursodiol tab 500 mg</i>	\$0 (Tier 1)
XIFAXAN TAB 550MG	\$0 (Tier 2) NDS, PA

PANCREATIC ENZYMES

CREON CAP 3000UNIT	\$0 (Tier 2)
CREON CAP 6000UNIT	\$0 (Tier 2)
CREON CAP 12000UNT	\$0 (Tier 2)
CREON CAP 24000UNT	\$0 (Tier 2)
CREON CAP 36000UNT	\$0 (Tier 2)
ZENPEP CAP 3000UNIT	\$0 (Tier 2)
ZENPEP CAP 5000UNIT	\$0 (Tier 2)
ZENPEP CAP 10000UNT	\$0 (Tier 2)
ZENPEP CAP 15000UNT	\$0 (Tier 2)
ZENPEP CAP 20000UNT	\$0 (Tier 2)
ZENPEP CAP 25000	\$0 (Tier 2)
ZENPEP CAP 40000	\$0 (Tier 2)

PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID

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

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT
CONDITIONS****BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED
PROSTATE**

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

MISCELLANEOUS

<i>bethanechol chloride tab 5 mg</i>	\$0 (Tier 1)
<i>bethanechol chloride tab 10 mg</i>	\$0 (Tier 1)
<i>bethanechol chloride tab 25 mg</i>	\$0 (Tier 1)
<i>bethanechol chloride tab 50 mg</i>	\$0 (Tier 1)
GLYCINE POW	\$0 (Tier 3) DP
POT CITRATE GRA	\$0 (Tier 3) DP
<i>potassium citrate tab er 5 meq (540 mg)</i>	\$0 (Tier 1)
<i>potassium citrate tab er 10 meq (1080 mg)</i>	\$0 (Tier 1)
<i>potassium citrate tab er 15 meq (1620 mg)</i>	\$0 (Tier 1)

**URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY
INCONTINENCE**

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

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal cream 2%</i>	\$0 (Tier 1)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>clotrimazole cre 1% vag</i>	\$0 (Tier 3) DP
<i>clotrimazole cre 3 day</i>	\$0 (Tier 3) DP
<i>clotrimazole vaginal cream 1%</i>	\$0 (Tier 3) DP
<i>3 day vaginl cre 2%</i>	\$0 (Tier 3) DP
<i>metronidazole vaginal gel 0.75%</i>	\$0 (Tier 1)
<i>miconazole 3 kit combinat</i>	\$0 (Tier 3) DP
<i>miconazole 3 kit combo pk</i>	\$0 (Tier 3) DP
<i>miconazole 7 cre 2%</i>	\$0 (Tier 3) DP
<i>miconazole 7 cre tube/kit</i>	\$0 (Tier 3) DP
<i>miconazole 7 sup 100mg</i>	\$0 (Tier 3) DP
<i>miconazole nitrate vaginal cream 2%</i>	\$0 (Tier 3) DP
<i>miconazole nitrate vaginal suppos 100 mg</i>	\$0 (Tier 3) DP
<i>sm micon 7 sup 100mg</i>	\$0 (Tier 3) DP
<i>terconazole vaginal cream 0.4%</i>	\$0 (Tier 1)
<i>terconazole vaginal cream 0.8%</i>	\$0 (Tier 1)
<i>terconazole vaginal suppos 80 mg</i>	\$0 (Tier 1)
<i>vandazole gel 0.75%</i>	\$0 (Tier 1)

HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS

ANTICOAGULANTS - BLOOD THINNERS

COUMADIN TAB 1MG	\$0 (Tier 2)
COUMADIN TAB 2.5MG	\$0 (Tier 2)
COUMADIN TAB 2MG	\$0 (Tier 2)
COUMADIN TAB 3MG	\$0 (Tier 2)
COUMADIN TAB 4MG	\$0 (Tier 2)
COUMADIN TAB 5MG	\$0 (Tier 2)
COUMADIN TAB 6MG	\$0 (Tier 2)
COUMADIN TAB 7.5MG	\$0 (Tier 2)
COUMADIN TAB 10MG	\$0 (Tier 2)
ELIQUIS ST P TAB 5MG	\$0 (Tier 2) QL (74 tabs / 30 days)
ELIQUIS TAB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
ELIQUIS TAB 5MG	\$0 (Tier 2) QL (74 tabs / 30 days)
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 100 mg/ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 150 mg/ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 300 mg/3ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	\$0 (Tier 1)	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	\$0 (Tier 2)	NDS
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	\$0 (Tier 2)	NDS
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	\$0 (Tier 2)	NDS
HEP SOD/NACL INJ 25000UNT	\$0 (Tier 2)	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	\$0 (Tier 2)	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	\$0 (Tier 1)	B/D
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	\$0 (Tier 1)	B/D
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	\$0 (Tier 1)	B/D
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	\$0 (Tier 1)	B/D
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	\$0 (Tier 2)	
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	\$0 (Tier 2)	
HEPARIN/NACL INJ 25000UNT	\$0 (Tier 2)	
<i>jantoven tab 1mg</i>	\$0 (Tier 1)	
<i>jantoven tab 2.5mg</i>	\$0 (Tier 1)	
<i>jantoven tab 2mg</i>	\$0 (Tier 1)	
<i>jantoven tab 3mg</i>	\$0 (Tier 1)	
<i>jantoven tab 4mg</i>	\$0 (Tier 1)	
<i>jantoven tab 5mg</i>	\$0 (Tier 1)	
<i>jantoven tab 6mg</i>	\$0 (Tier 1)	
<i>jantoven tab 7.5mg</i>	\$0 (Tier 1)	
<i>jantoven tab 10mg</i>	\$0 (Tier 1)	
PRADAXA CAP 75MG	\$0 (Tier 2)	QL (60 caps / 30 days)
PRADAXA CAP 110MG	\$0 (Tier 2)	QL (60 caps / 30 days)
PRADAXA CAP 150MG	\$0 (Tier 2)	QL (60 caps / 30 days)
<i>warfarin sodium tab 1 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 2 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 2.5 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 3 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 4 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 5 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 6 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 7.5 mg</i>	\$0 (Tier 1)	
<i>warfarin sodium tab 10 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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XARELTO STAR TAB 15/20MG	\$0 (Tier 2) QL (51 tabs / 30 days)
XARELTO TAB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XARELTO TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XARELTO TAB 15MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XARELTO TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)

HEMATOPOIETIC GROWTH FACTORS

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

IRON

DUOFER TAB 28MG	\$0 (Tier 3) DP
EZFE 200 CAP 200MG	\$0 (Tier 3) DP
FE SULFATE POW	\$0 (Tier 3) DP
FERAHEME INJ 510/17ML	\$0 (Tier 3) DP
<i>ferate tab 27mg</i>	\$0 (Tier 3) DP
FERGON TAB 27MG	\$0 (Tier 3) DP
<i>ferosul elx 220/5ml</i>	\$0 (Tier 3) DP
<i>ferosul tab 325mg</i>	\$0 (Tier 3) DP
FERRETTIS IPS SOL	\$0 (Tier 3) DP
FERRETTIS TAB 325MG	\$0 (Tier 3) DP
<i>ferrex 150 cap 150mg</i>	\$0 (Tier 3) DP
FERRIMIN 150 TAB	\$0 (Tier 3) DP
FERRLECIT INJ 12.5MG/M	\$0 (Tier 3) DP
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	\$0 (Tier 3) DP
FERROUS GLUC TAB 324MG	\$0 (Tier 3) DP
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous gluconate tab 324 mg (37.5 mg elemental iron)</i>	\$0 (Tier 3) DP
FERROUS SULF SYP 300/5ML	\$0 (Tier 3) DP
FERROUS SULF TAB 324MG EC	\$0 (Tier 3) DP
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	\$0 (Tier 3) DP
<i>ferrousul tab 325mg</i>	\$0 (Tier 3) DP
FOLITAB 500 TAB	\$0 (Tier 3) DP
FUSION CAP	\$0 (Tier 3) DP
<i>gnp iron tab 45mg</i>	\$0 (Tier 3) DP
<i>gnp iron tab 65mg</i>	\$0 (Tier 3) DP
HEMOCYTE TAB 324MG	\$0 (Tier 3) DP
<i>hm iron tab 65mg</i>	\$0 (Tier 3) DP
<i>iferex 150 cap</i>	\$0 (Tier 3) DP
INTEGRA CAP	\$0 (Tier 3) DP
<i>iron 100 tab plus</i>	\$0 (Tier 3) DP
<i>iron 100/c tab 100-250</i>	\$0 (Tier 3) DP
NOVAFERRUM CAP 50MG	\$0 (Tier 3) DP
NOVAFERRUM DRO 15MG/ML	\$0 (Tier 3) DP
NOVAFERRUM LIQ 125	\$0 (Tier 3) DP
<i>nu-iron 150 cap 150mg</i>	\$0 (Tier 3) DP
<i>poly-iron cap 150mg</i>	\$0 (Tier 3) DP
PROFE CAP 180MG	\$0 (Tier 3) DP
SLOW REL FE TAB 143MG CR	\$0 (Tier 3) DP
<i>slow release tab 47.5mg</i>	\$0 (Tier 3) DP
<i>sm iron slow tab 160mg cr</i>	\$0 (Tier 3) DP
<i>sm iron tab 325mg</i>	\$0 (Tier 3) DP
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	\$0 (Tier 3) DP
VENOFER INJ 20MG/ML	\$0 (Tier 3) DP
<i>wee care sus 15/1.25</i>	\$0 (Tier 3) DP

MISCELLANEOUS

<i>anagrelide hcl cap 0.5 mg</i>	\$0 (Tier 1)
<i>anagrelide hcl cap 1 mg</i>	\$0 (Tier 1)
BERINERT INJ 500UNIT	\$0 (Tier 2) NDS, QL (24 boxes / 30 days), LA, PA
<i>cilostazol tab 50 mg</i>	\$0 (Tier 1)
<i>cilostazol tab 100 mg</i>	\$0 (Tier 1)
DROXIA CAP 200MG	\$0 (Tier 2)
DROXIA CAP 300MG	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
DROXIA CAP 400MG	\$0 (Tier 2)
ENDARI POW 5GM	\$0 (Tier 2) NDS, LA, PA
FIRAZYR INJ 30MG/3ML	\$0 (Tier 2) NDS, QL (9 syringes / 30 days), PA
HAEGARDA INJ 2000UNIT	\$0 (Tier 2) NDS, QL (30 vials / 30 days), LA, PA
HAEGARDA INJ 3000UNIT	\$0 (Tier 2) NDS, QL (20 vials / 30 days), LA, PA
<i>pentoxifylline tab er 400 mg</i>	\$0 (Tier 1)
PROMACTA POW 12.5MG	\$0 (Tier 2) NDS, QL (360 packets / 30 days), LA, PA
PROMACTA TAB 12.5MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
PROMACTA TAB 25MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
PROMACTA TAB 50MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
PROMACTA TAB 75MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	\$0 (Tier 1)
<i>tranexamic acid tab 650 mg</i>	\$0 (Tier 1)

PLATELET AGGREGATION INHIBITORS

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

IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM

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

HUMIRA INJ 10/0.1ML	\$0 (Tier 2) NDS, QL (2 injections / 28 days), PA
HUMIRA INJ 10MG/0.2	\$0 (Tier 2) NDS, QL (2 syringes / 28 days), PA
HUMIRA INJ 20/0.2ML	\$0 (Tier 2) NDS, QL (2 injections / 28 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
HUMIRA INJ 40/0.4ML	\$0 (Tier 2) NDS, QL (6 injections / 28 days), PA
HUMIRA KIT 20MG/0.4	\$0 (Tier 2) NDS, QL (2 syringes / 28 days), PA
HUMIRA KIT 40MG/0.8	\$0 (Tier 2) NDS, QL (6 syringes / 28 days), PA
HUMIRA PEDIA INJ CROHNS	\$0 (Tier 2) NDS, PA
HUMIRA PEN INJ 40/0.4ML	\$0 (Tier 2) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ 40MG/0.8	\$0 (Tier 2) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ CD/UC/HS	\$0 (Tier 2) NDS, PA
HUMIRA PEN INJ PS/UV	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT CD/UC/HS	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT PS/UV	\$0 (Tier 2) NDS, PA
<i>hydroxychloroquine sulfate tab 200 mg</i>	\$0 (Tier 1)
<i>leflunomide tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>leflunomide tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	\$0 (Tier 1)
REMICADE INJ 100MG	\$0 (Tier 2) NDS, PA
RENFLEXIS INJ 100MG	\$0 (Tier 2) NDS, LA, PA
STELARA INJ 45MG/0.5	\$0 (Tier 2) NDS, QL (1 syringe / 28 days), PA
STELARA INJ 45MG/0.5	\$0 (Tier 2) NDS, QL (1 vial / 28 days), LA, PA
STELARA INJ 90MG/ML	\$0 (Tier 2) NDS, QL (1 syringe / 28 days), PA
XATMEP SOL 2.5MG/ML	\$0 (Tier 2) B/D
XELJANZ TAB 5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
XELJANZ TAB 10MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
XELJANZ XR TAB 11MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
IMMUNOGLOBULINS	
BIVIGAM INJ 10%	\$0 (Tier 2) NDS, PA
GAMASTAN S/D INJ	\$0 (Tier 2) B/D
GAMMAGARD INJ 1GM/10ML	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 2.5GM/25	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 5GM/50ML	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
GAMMAGARD INJ 10GM/100	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 20GM/200	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 30GM/300	\$0 (Tier 2) NDS, PA
GAMMAGARD SD INJ 5GM HU	\$0 (Tier 2) NDS, PA
GAMMAGARD SD INJ 10GM HU	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 1GM/10ML	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 2.5GM/25	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 10GM/100	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 20GM/200	\$0 (Tier 2) NDS, PA
GAMMAPLEX INJ 5%	\$0 (Tier 2) NDS, PA
GAMMAPLEX INJ 10%	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 1GM/10ML	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 2.5GM/25	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 10GM/100	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 20GM/200	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 40/400ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 1GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 2.5GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 2GM/20ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 5GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 10/100ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 10GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 20/200ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 25GM	\$0 (Tier 2) NDS, PA
PANZYGA SOL 1GM/10ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 2.5/25ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 5GM/50ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 10/100ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 20/200ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 30/300ML	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 5 GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 10GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 20GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 40GRAMS	\$0 (Tier 2) NDS, PA
IMMUNOMODULATORS	
ACTIMMUNE INJ 2MU/0.5	\$0 (Tier 2) NDS, LA, PA
ARCALYST INJ 220MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
INTRON A INJ 10MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 18MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 25MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 50MU	\$0 (Tier 2) NDS, B/D
IMMUNOSUPPRESSANTS	
<i>azathioprine tab 50 mg</i>	\$0 (Tier 1) B/D
BENLYSTA INJ 120MG	\$0 (Tier 2) NDS, PA
BENLYSTA INJ 200MG/ML	\$0 (Tier 2) NDS, PA
BENLYSTA INJ 400MG	\$0 (Tier 2) NDS, PA
<i>cyclosporine cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine cap 100 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine iv soln 50 mg/ml</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 50 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 100 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified oral soln 100 mg/ml</i>	\$0 (Tier 1) B/D
<i>engraf cap 25mg</i>	\$0 (Tier 1) B/D
<i>engraf cap 100mg</i>	\$0 (Tier 1) B/D
<i>engraf sol 100mg/ml</i>	\$0 (Tier 1) B/D
<i>mycophenolate mofetil cap 250 mg</i>	\$0 (Tier 1) B/D
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>mycophenolate mofetil tab 500 mg</i>	\$0 (Tier 1) B/D
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	\$0 (Tier 1) B/D
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	\$0 (Tier 1) B/D
NULOJIX INJ 250MG	\$0 (Tier 2) NDS, B/D
PROGRAF GRA 0.2MG	\$0 (Tier 2) B/D
PROGRAF GRA 1MG	\$0 (Tier 2) B/D
SANDIMMUNE SOL 100MG/ML	\$0 (Tier 2) B/D
<i>sirolimus oral soln 1 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>sirolimus tab 0.5 mg</i>	\$0 (Tier 1) B/D
<i>sirolimus tab 1 mg</i>	\$0 (Tier 1) B/D
<i>sirolimus tab 2 mg</i>	\$0 (Tier 2) NDS, B/D
<i>tacrolimus cap 0.5 mg</i>	\$0 (Tier 1) B/D
<i>tacrolimus cap 1 mg</i>	\$0 (Tier 1) B/D
<i>tacrolimus cap 5 mg</i>	\$0 (Tier 1) B/D
ZORTRESS TAB 0.5MG	\$0 (Tier 2) NDS, B/D
ZORTRESS TAB 0.25MG	\$0 (Tier 2) NDS, B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ZORTRESS TAB 0.75MG	\$0 (Tier 2) NDS, B/D
ZORTRESS TAB 1MG	\$0 (Tier 2) NDS, B/D

VACCINES

ACTHIB INJ	\$0 (Tier 2)
ADACEL INJ	\$0 (Tier 2)
BCG VACCINE INJ	\$0 (Tier 2)
BEXSERO INJ	\$0 (Tier 2)
BOOSTRIX INJ	\$0 (Tier 2)
DAPTACEL INJ	\$0 (Tier 2)
DIP/TET PED INJ 25-5LFU	\$0 (Tier 2) B/D
ENGRIX-B INJ 10/0.5ML	\$0 (Tier 2) B/D
ENGRIX-B INJ 20MCG/ML	\$0 (Tier 2) B/D
GARDASIL 9 INJ	\$0 (Tier 2)
HAVRIX INJ 720UNIT	\$0 (Tier 2)
HAVRIX INJ 1440UNIT	\$0 (Tier 2)
HIBERIX SOL 10MCG	\$0 (Tier 2)
IMOVAX RABIE INJ 2.5/ML	\$0 (Tier 2) B/D
INFANRIX INJ	\$0 (Tier 2)
IPOL INJ INACTIVE	\$0 (Tier 2)
IXIARO INJ	\$0 (Tier 2)
KINRIX INJ	\$0 (Tier 2)
M-M-R II INJ	\$0 (Tier 2)
MENACTRA INJ	\$0 (Tier 2)
MENVEO INJ	\$0 (Tier 2)
PEDIARIX INJ 0.5ML	\$0 (Tier 2)
PEDVAX HIB INJ	\$0 (Tier 2)
PENTACEL INJ	\$0 (Tier 2)
PROQUAD INJ	\$0 (Tier 2)
QUADRACEL INJ	\$0 (Tier 2)
RABAVERT INJ	\$0 (Tier 2) B/D
RECOMBIVA HB INJ 5MCG/0.5	\$0 (Tier 2) B/D
RECOMBIVA HB INJ 10MCG/ML	\$0 (Tier 2) B/D
RECOMBIVA-HB INJ 40MCG/ML	\$0 (Tier 2) B/D
ROTARIX SUS	\$0 (Tier 2)
ROTATEQ SOL	\$0 (Tier 2)
SHINGRIX INJ 50MCG	\$0 (Tier 2) QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	\$0 (Tier 2) B/D
TENIVAC INJ 5-2LF	\$0 (Tier 2) B/D
TRUMENBA INJ	\$0 (Tier 2)
TWINRIX INJ	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
TYPHIM VI INJ	\$0 (Tier 2)
VAQTA INJ 25/0.5ML	\$0 (Tier 2)
VAQTA INJ 50UNT/ML	\$0 (Tier 2)
VARIVAX INJ	\$0 (Tier 2)
YF-VAX INJ	\$0 (Tier 2)
ZOSTAVAX INJ	\$0 (Tier 2) QL (1 vial per lifetime)

NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS

ELECTROLYTES

<i>gnp pediatri sol electrol</i>	\$0 (Tier 3) DP
<i>klor-con 8 tab 8meq er</i>	\$0 (Tier 1)
<i>klor-con 10 tab 10meq er</i>	\$0 (Tier 1)
MAGNESIUM SU INJ 2GM/50ML	\$0 (Tier 2)
MAGNESIUM SU INJ 4G/100ML	\$0 (Tier 2)
MAGNESIUM SU INJ 20/500ML	\$0 (Tier 2)
MAGNESIUM SU INJ 40G/1000	\$0 (Tier 2)
MAGNESIUM SU INJ 80MG/ML	\$0 (Tier 2)
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0 (Tier 2)
<i>magnesium sulfate inj 50%</i>	\$0 (Tier 2)
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	\$0 (Tier 2)
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	\$0 (Tier 2)
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	\$0 (Tier 2)
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	\$0 (Tier 2)
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	\$0 (Tier 2)
MG SO4/D5W INJ 10MG/ML	\$0 (Tier 2)
<i>oral electrolyte solution</i>	\$0 (Tier 3) DP
<i>oralyte sol</i>	\$0 (Tier 3) DP
<i>oralyte sol freeze</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol freezer</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol fruit</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol grape</i>	\$0 (Tier 3) DP
<i>ped elctrylt sol unflavrd</i>	\$0 (Tier 3) DP
<i>potassium chloride cap er 8 meq</i>	\$0 (Tier 1)
<i>potassium chloride cap er 10 meq</i>	\$0 (Tier 1)
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	\$0 (Tier 1)	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	\$0 (Tier 1)	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	\$0 (Tier 1)	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	\$0 (Tier 1)	
<i>potassium chloride powder packet 20 meq</i>	\$0 (Tier 1)	
<i>potassium chloride tab er 8 meq (600 mg)</i>	\$0 (Tier 1)	
<i>potassium chloride tab er 10 meq</i>	\$0 (Tier 1)	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	\$0 (Tier 1)	
SOD FLUORIDE POW	\$0 (Tier 3)	DP
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	\$0 (Tier 1)	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0 (Tier 1)	
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	\$0 (Tier 3)	DP
TPN ELECTROL INJ	\$0 (Tier 2)	B/D

IV NUTRITION

AMINOSYN II INJ 10%	\$0 (Tier 2)	B/D
AMINOSYN-PF INJ 7%	\$0 (Tier 2)	B/D
AMINOSYN-PF INJ 10%	\$0 (Tier 2)	B/D
<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	\$0 (Tier 3)	DP
CLINIMIX INJ 4.25/D5W	\$0 (Tier 2)	B/D
CLINIMIX INJ 4.25/D10	\$0 (Tier 2)	B/D
CLINIMIX INJ 5%/D15W	\$0 (Tier 2)	B/D
CLINIMIX INJ 5%/D20W	\$0 (Tier 2)	B/D
COPPER SULF CRY	\$0 (Tier 3)	DP
<i>cupric chloride inj 0.4 mg/ml</i>	\$0 (Tier 3)	DP
FAT EMULSION PLANT BASED IV EMULSION 20%	\$0 (Tier 2)	B/D
FREAMINE HBC INJ 6.9%	\$0 (Tier 2)	B/D
FREAMINE III INJ 10%	\$0 (Tier 2)	B/D
<i>hepatamine sol 8%</i>	\$0 (Tier 2)	B/D
INTRALIPID INJ 30%	\$0 (Tier 2)	B/D
NEPHRAMINE INJ 5.4%	\$0 (Tier 2)	B/D
PREMASOL SOL 10%	\$0 (Tier 2)	B/D
PROCALAMINE INJ 3%	\$0 (Tier 2)	B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PROSOL INJ 20%	\$0 (Tier 2) B/D
TRAVASOL INJ 10%	\$0 (Tier 2) B/D
TROPHAMINE INJ 10%	\$0 (Tier 2) B/D
<i>zinc chloride inj 1 mg/ml</i>	\$0 (Tier 3) DP

IV REPLACEMENT SOLUTIONS

D5W/LYTES INJ #48	\$0 (Tier 2)
D5W/NACL INJ 0.3%	\$0 (Tier 2)
D10W/NACL INJ 0.2%	\$0 (Tier 2)
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
<i>dextrose 5% in lactated ringers</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.2%</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.9%</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.33%</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
<i>dextrose 5% w/ sodium chloride 0.225%</i>	\$0 (Tier 1)
<i>dextrose 10% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
<i>dextrose inj 5%</i>	\$0 (Tier 1)
<i>dextrose inj 10%</i>	\$0 (Tier 1)
<i>dextrose inj 50%</i>	\$0 (Tier 1)
<i>dextrose inj 70%</i>	\$0 (Tier 1)
IONOSOL-MB INJ D5W	\$0 (Tier 2)
ISOLYTE-P INJ /D5W	\$0 (Tier 2)
ISOLYTE-S INJ	\$0 (Tier 2)
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.33% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0 (Tier 1)
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	\$0 (Tier 1)
KCL/D5W/NACL INJ 0.3/0.9%	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
KCL/D5W/NAACL INJ 0.15/0.2	\$0 (Tier 2)
<i>lactated ringer's solution</i>	\$0 (Tier 1)
NORMOSOL -M INJ /D5W	\$0 (Tier 2)
NORMOSOL -R INJ /D5W	\$0 (Tier 2)
NORMOSOL-R INJ PH 7.4	\$0 (Tier 2)
PLASMA-LYTE INJ -148	\$0 (Tier 2)
PLASMA-LYTE INJ -A	\$0 (Tier 2)
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0 (Tier 1)
<i>potassium chloride 40 meq/l (0.3%) in dextrose 5% inj</i>	\$0 (Tier 1)
<i>potassium chloride inj 2 meq/ml</i>	\$0 (Tier 1)
<i>potassium chloride inj 10 meq/50ml</i>	\$0 (Tier 1)
<i>potassium chloride inj 10 meq/100ml</i>	\$0 (Tier 1)
<i>potassium chloride inj 20 meq/50ml</i>	\$0 (Tier 1)
<i>potassium chloride inj 20 meq/100ml</i>	\$0 (Tier 1)
<i>potassium chloride inj 40 meq/100ml</i>	\$0 (Tier 1)
<i>sodium chloride iv soln 0.9%</i>	\$0 (Tier 1)
<i>sodium chloride iv soln 0.45%</i>	\$0 (Tier 1)
<i>sodium chloride iv soln 3%</i>	\$0 (Tier 1)
<i>sodium chloride iv soln 5%</i>	\$0 (Tier 1)
<i>sodium chloride tab 1 gm</i>	\$0 (Tier 3) DP

MINERALS

BEELITH TAB	\$0 (Tier 3) DP
CA PHOS DIHY POW DIBASIC	\$0 (Tier 3) DP
CALCET PETIT TAB 200-250	\$0 (Tier 3) DP
CALCI-CHEW CHW 1250MG	\$0 (Tier 3) DP
CALCI-MIX CAP 1250MG	\$0 (Tier 3) DP
<i>calcitrate tab</i>	\$0 (Tier 3) DP
<i>calcitrate tab 950mg</i>	\$0 (Tier 3) DP
<i>calcium 600 chw +d/miner</i>	\$0 (Tier 3) DP
<i>calcium 600 tab</i>	\$0 (Tier 3) DP
<i>calcium 600 tab + d</i>	\$0 (Tier 3) DP
<i>calcium 600 tab +d/mnrsls</i>	\$0 (Tier 3) DP
<i>calcium 600 tab -d</i>	\$0 (Tier 3) DP
<i>calcium +d tab maximum</i>	\$0 (Tier 3) DP
CALCIUM CARB POW	\$0 (Tier 3) DP
CALCIUM CARB POW EX-LIGHT	\$0 (Tier 3) DP
CALCIUM CARB POW HEAVY	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>calcium carb-vit d w/ minerals chew tab 600 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	\$0 (Tier 3) DP
<i>calcium carbonate tab 1500 mg (600 mg elemental ca)</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol chew tab 500 mg-100 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 500 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 500 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 600 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 600 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 500 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 500 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 600 mg-125 unit</i>	\$0 (Tier 3) DP
<i>calcium citr tab w/vit d3</i>	\$0 (Tier 3) DP
<i>calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)</i>	\$0 (Tier 3) DP
CALCIUM GLUC POW	\$0 (Tier 3) DP
CALCIUM LACT POW PENTAHYD	\$0 (Tier 3) DP
CALCIUM LACT TAB 648MG	\$0 (Tier 3) DP
CALCIUM PHOS POW TRIBASIC	\$0 (Tier 3) DP
<i>calcium plus tab 600 +d</i>	\$0 (Tier 3) DP
<i>calcium soft chw mlk choc</i>	\$0 (Tier 3) DP
<i>calcium tab 500/d</i>	\$0 (Tier 3) DP
<i>calcium tab 600mg</i>	\$0 (Tier 3) DP
<i>calcium tab vit d</i>	\$0 (Tier 3) DP
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	\$0 (Tier 3) DP
<i>calcium-magnesium-zinc tab 334-134-5 mg</i>	\$0 (Tier 3) DP
<i>calcium/d3 tab</i>	\$0 (Tier 3) DP
<i>calcium/d chw 500-400</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cit calc/d tab 315-250</i>	\$0 (Tier 3) DP
<i>gnp ca/mg/zn tab</i>	\$0 (Tier 3) DP
<i>gnp ca/vit d chw minerals</i>	\$0 (Tier 3) DP
<i>gnp calcium tab 500/d</i>	\$0 (Tier 3) DP
<i>gnp calcium tab 600/d</i>	\$0 (Tier 3) DP
<i>gnp calcium tab cit +d3</i>	\$0 (Tier 3) DP
<i>gnp magnesiu tab 250mg</i>	\$0 (Tier 3) DP
<i>gnp zinc tab 50mg</i>	\$0 (Tier 3) DP
MAG CARBONAT POW HEAVY	\$0 (Tier 3) DP
<i>mag-g tab 500mg</i>	\$0 (Tier 3) DP
MAGDELAY TAB 70MG	\$0 (Tier 3) DP
MAGN CHLORID POW	\$0 (Tier 3) DP
MAGNEBIND TAB 200	\$0 (Tier 3) DP
MAGNEBIND TAB 300	\$0 (Tier 3) DP
<i>magnesium gluconate tab 500 mg (27 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg (241.3 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 500 mg (mg supplement)</i>	\$0 (Tier 3) DP
MAGNESIUM POW HYDROXID	\$0 (Tier 3) DP
<i>magnesium tab 250 mg</i>	\$0 (Tier 3) DP
<i>magnesium tab 250mg</i>	\$0 (Tier 3) DP
MAGONATE LIQ 1000/5ML	\$0 (Tier 3) DP
<i>magonate tab 500mg</i>	\$0 (Tier 3) DP
<i>manganese chloride inj 0.1 mg/ml</i>	\$0 (Tier 3) DP
<i>oysco 500 tab 500mg</i>	\$0 (Tier 3) DP
<i>oysco 500+d chw</i>	\$0 (Tier 3) DP
<i>oysco 500+d tab</i>	\$0 (Tier 3) DP
<i>oyst cal/d tab 500mg</i>	\$0 (Tier 3) DP
<i>oyst shell/d tab 500mg</i>	\$0 (Tier 3) DP
<i>oyster shell calcium tab 500 mg</i>	\$0 (Tier 3) DP
<i>oyster shell tab 500mg</i>	\$0 (Tier 3) DP
PHOS-NAK POW CONCENTR	\$0 (Tier 3) DP
<i>potassium & sodium phosphates powder pack 280-160-250 mg</i>	\$0 (Tier 3) DP
RISACAL-D TAB	\$0 (Tier 3) DP
<i>sm ca/mg/zn tab</i>	\$0 (Tier 3) DP
<i>sm calcium chw</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>sm calcium/d tab 600-400</i>	\$0 (Tier 3) DP
SM CORAL CAL TAB 1000MG	\$0 (Tier 3) DP
<i>sm zinc tab 50mg</i>	\$0 (Tier 3) DP
SOD ACETATE POW ANHYDR	\$0 (Tier 3) DP
SOD CHLORIDE GRA	\$0 (Tier 3) DP
<i>zinc gluconate tab 50 mg (elemental zn)</i>	\$0 (Tier 3) DP
ZINC SULFATE CAP 50MG	\$0 (Tier 3) DP
ZINC SULFATE POW HEPTAHYD	\$0 (Tier 3) DP
ZINC SULFATE POW MONOHYD	\$0 (Tier 3) DP
<i>zinc sulfate tab 220 mg (50 mg zinc equivalent)</i>	\$0 (Tier 3) DP
<i>zinc tab 50 mg</i>	\$0 (Tier 3) DP

MISCELLANEOUS

ACACIA POW	\$0 (Tier 3) DP
APPLE FLAVOR LIQ	\$0 (Tier 3) DP
ASPARTAME POW	\$0 (Tier 3) DP
BANANA LIQ FLAVOR	\$0 (Tier 3) DP
BENZYL ALC LIQ	\$0 (Tier 3) DP
BITTERNESS POW NATURAL	\$0 (Tier 3) DP
BUFFER CREAM POW	\$0 (Tier 3) DP
BUTTER RUM LIQ FLAVOR	\$0 (Tier 3) DP
BUTYLPARABEN POW	\$0 (Tier 3) DP
CARBOGEL GEL 940	\$0 (Tier 3) DP
CARBOHOL GEL 940	\$0 (Tier 3) DP
CETYL ALCOHO GRA	\$0 (Tier 3) DP
CHERRY CON	\$0 (Tier 3) DP
CHERRY SYP	\$0 (Tier 3) DP
CHERRY SYP CONCENTR	\$0 (Tier 3) DP
CHOCOLATE CON FLAVOR	\$0 (Tier 3) DP
CINNAMON OIL FLAVOR	\$0 (Tier 3) DP
CLOVE FLAVOR OIL	\$0 (Tier 3) DP
CO-ENZYME WAF Q10/E	\$0 (Tier 3) DP
COCOA BUTTER MIS	\$0 (Tier 3) DP
<i>coenzyme q10 cap 10 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 30 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 30mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 50 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 60 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 75 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 100 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>coenzyme q10 cap 100mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 150 mg</i>	\$0 (Tier 3) DP
COENZYME Q10 CHW 60MG	\$0 (Tier 3) DP
COENZYME Q10 LIQ 30MG/5ML	\$0 (Tier 3) DP
COENZYME Q10 TAB 25MG	\$0 (Tier 3) DP
<i>coenzyme q10 tab 60 mg</i>	\$0 (Tier 3) DP
COENZYME Q10 TAB 200MG	\$0 (Tier 3) DP
COLLODION LIQ	\$0 (Tier 3) DP
COLLODION LIQ FLEXIBLE	\$0 (Tier 3) DP
COQ-10 CAP 100MG TR	\$0 (Tier 3) DP
DIABETISWEET POW	\$0 (Tier 3) DP
DISTILLED LIQ WATER	\$0 (Tier 3) DP
<i>eq1 coq10 cap 100mg</i>	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 100%	\$0 (Tier 3) DP
FATTYBLEND MIS	\$0 (Tier 3) DP
FDC BLUE 1 POW	\$0 (Tier 3) DP
FDC BLUE 1 POW AL LAKE	\$0 (Tier 3) DP
FDC BLUE 2 POW	\$0 (Tier 3) DP
FDC GREEN #3 POW	\$0 (Tier 3) DP
FDC RED 40 POW	\$0 (Tier 3) DP
FDC RED #3 POW	\$0 (Tier 3) DP
FDC RED #40 POW AL LAKE	\$0 (Tier 3) DP
FDC YELLOW 5 POW	\$0 (Tier 3) DP
FDC YELLOW 5 POW AL LAKE	\$0 (Tier 3) DP
FDC YELLOW 6 POW	\$0 (Tier 3) DP
FLAVORX LIQ	\$0 (Tier 3) DP
FRUCTOSE GRA	\$0 (Tier 3) DP
<i>gnp co q10 cap 60mg</i>	\$0 (Tier 3) DP
<i>gnp co q10 cap 100mg</i>	\$0 (Tier 3) DP
GOWEY TIN TINCTURE	\$0 (Tier 3) DP
GRAPE LIQ FLAVOR	\$0 (Tier 3) DP
GRAPE SYP	\$0 (Tier 3) DP
<i>h2q cap 100mg</i>	\$0 (Tier 3) DP
<i>hm coq10 cap 50mg</i>	\$0 (Tier 3) DP
<i>hm coq10 cap 100mg</i>	\$0 (Tier 3) DP
HRT BASE CRE	\$0 (Tier 3) DP
HYDROPHILIC OIN	\$0 (Tier 3) DP
HYDROUS CRE EMULSIFI	\$0 (Tier 3) DP
JELENE OIN	\$0 (Tier 3) DP
KARAYA GUM	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
L-ARGININE POW	\$0 (Tier 3) DP
L-CYSTINE POW	\$0 (Tier 3) DP
L-GLUTAMINE POW	\$0 (Tier 3) DP
L-GLUTATHION CRY	\$0 (Tier 3) DP
L-ISOLEUCINE POW	\$0 (Tier 3) DP
L-METHIONINE POW	\$0 (Tier 3) DP
L-TYROSINE POW	\$0 (Tier 3) DP
L-VALINE POW	\$0 (Tier 3) DP
LACTOSE POW	\$0 (Tier 3) DP
LACTOSE POW ANHYDROU	\$0 (Tier 3) DP
LACTOSE POW HYDROUS	\$0 (Tier 3) DP
LACTOSE POW MONOHYDR	\$0 (Tier 3) DP
LECITHIN GRA	\$0 (Tier 3) DP
LEMON FLAVOR OIL	\$0 (Tier 3) DP
LIP BALM OIN BASE	\$0 (Tier 3) DP
LIP BALM OIN NATURAL	\$0 (Tier 3) DP
LIPOBASE CRE	\$0 (Tier 3) DP
LIPOIL OIL	\$0 (Tier 3) DP
LIPOVAN BASE CRE	\$0 (Tier 3) DP
LOLLIBASE POW	\$0 (Tier 3) DP
LOZIBASE MIS	\$0 (Tier 3) DP
METHYLCELLUL GEL 2%	\$0 (Tier 3) DP
METHYLCELLUL GEL 3%	\$0 (Tier 3) DP
METHYLCELLUL POW 1500CPS	\$0 (Tier 3) DP
METHYLCELLUL POW 4000CPS	\$0 (Tier 3) DP
METHYLPARABE POW	\$0 (Tier 3) DP
MICRODERM CRE BASE	\$0 (Tier 3) DP
MICROSOME CRE BASE	\$0 (Tier 3) DP
NICE DISTILL LIQ WATER	\$0 (Tier 3) DP
ORA-BLEND SF SUS	\$0 (Tier 3) DP
ORA-BLEND SUS	\$0 (Tier 3) DP
ORA-HESIVE PST BASE	\$0 (Tier 3) DP
ORA-PLUS LIQ	\$0 (Tier 3) DP
ORA-SWEET SF SYP	\$0 (Tier 3) DP
ORA-SWEET SYP	\$0 (Tier 3) DP
ORANGE CONC LIQ	\$0 (Tier 3) DP
PCCA BASE CRE 7542	\$0 (Tier 3) DP
PCCA MBK MIS FAT ACID	\$0 (Tier 3) DP
PEG 300 LIQ	\$0 (Tier 3) DP
PEG 1000 LIQ	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PEG 3350 POW	\$0 (Tier 3) DP
PEG BLEND OIN	\$0 (Tier 3) DP
PEPPERMINT OIL FLAVOR	\$0 (Tier 3) DP
PFCB CRE	\$0 (Tier 3) DP
PHARMABASE CRE ANTIOXID	\$0 (Tier 3) DP
PHARMABASE CRE COSMETIC	\$0 (Tier 3) DP
PHARMABASE CRE LIGHT	\$0 (Tier 3) DP
PHARMABASE CRE VAGINAL	\$0 (Tier 3) DP
PHYTOBASE CRE	\$0 (Tier 3) DP
PLO20 GEL FLOWABLE	\$0 (Tier 3) DP
PLO LECITHIN GEL BASE	\$0 (Tier 3) DP
PNA-HRT BASE CRE	\$0 (Tier 3) DP
POLOX GEL 20%	\$0 (Tier 3) DP
POLOX GEL 30%	\$0 (Tier 3) DP
POLOXAMER POW 407	\$0 (Tier 3) DP
POLY GLYCOL LIQ 1450	\$0 (Tier 3) DP
POLY GLYCOL POW 8000	\$0 (Tier 3) DP
POLYETHYLENE LIQ GLY 400	\$0 (Tier 3) DP
POLYOXYL 40 POW STEARATE	\$0 (Tier 3) DP
POT SORBATE CRY	\$0 (Tier 3) DP
<i>prasterone (dhea) cap 25 mg</i>	\$0 (Tier 3) DP
PROPYLENE GL SOL	\$0 (Tier 3) DP
PROPYLENE LIQ GLYCOL	\$0 (Tier 3) DP
PROPYPARABEN POW	\$0 (Tier 3) DP
Q-DERM CRE	\$0 (Tier 3) DP
<i>q-sorb cap 30mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 75mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 150mg</i>	\$0 (Tier 3) DP
<i>q-sorb co-q cap 100mg</i>	\$0 (Tier 3) DP
RASPBERRY LIQ FLAVOR	\$0 (Tier 3) DP
RDT BASE POW	\$0 (Tier 3) DP
SACCHARIN POW	\$0 (Tier 3) DP
SACCHARIN POW SODIUM	\$0 (Tier 3) DP
SAFFLOWER OIL	\$0 (Tier 3) DP
SALTSTABLE CRE	\$0 (Tier 3) DP
SHEA BUTTER MIS	\$0 (Tier 3) DP
SIMPLE SYP	\$0 (Tier 3) DP
<i>sm coq-10 cap 50mg</i>	\$0 (Tier 3) DP
SOD BENZOATE POW	\$0 (Tier 3) DP
SOD LAURYL POW SULFATE	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
SOD SACCHARI GRA	\$0 (Tier 3) DP
SORBIC ACID POW	\$0 (Tier 3) DP
SORBITOL SOL 70%	\$0 (Tier 3) DP
SPERMACETI MIS	\$0 (Tier 3) DP
STRAWBERRY LIQ FLAVOR	\$0 (Tier 3) DP
SUPPOSIBLEND MIS	\$0 (Tier 3) DP
SUSPENDIT GEL	\$0 (Tier 3) DP
SYRSPEND SF SUS ALKA	\$0 (Tier 3) DP
TANGERINE POW FLAVOR	\$0 (Tier 3) DP
THREONINE POW	\$0 (Tier 3) DP
TROCHIBASE MIS	\$0 (Tier 3) DP
TROCHIBASE MIS CLASSIC	\$0 (Tier 3) DP
TROCHIBASE S MIS	\$0 (Tier 3) DP
TROLAMINE LIQ	\$0 (Tier 3) DP
TUTTI FRUTTI CON	\$0 (Tier 3) DP
U-BASE CRE	\$0 (Tier 3) DP
UNIBASE CRE	\$0 (Tier 3) DP
V-MAX CRE	\$0 (Tier 3) DP
V-R FATIGUE TAB COMPLEX	\$0 (Tier 3) DP
VANIBASE CRE	\$0 (Tier 3) DP
VERSATILE CRE BASE	\$0 (Tier 3) DP
VERSIGEL CRE	\$0 (Tier 3) DP
WATERMELON LIQ FLAVOR	\$0 (Tier 3) DP
<i>white petrolatum gel</i>	\$0 (Tier 3) DP
WITEPSOL H15 MIS	\$0 (Tier 3) DP
XANTHAN GUM POW	\$0 (Tier 3) DP

VITAMINS

ADULT 50+ CAP OCUVITE	\$0 (Tier 3) DP
<i>animal shape chw</i>	\$0 (Tier 3) DP
<i>animal shape chw complete</i>	\$0 (Tier 3) DP
ANIMAL SHAPE CHW IRON	\$0 (Tier 3) DP
<i>antioxidant tab</i>	\$0 (Tier 3) DP
<i>antioxidant tab vitamins</i>	\$0 (Tier 3) DP
APATATE FORT LIQ	\$0 (Tier 3) DP
APATATE LIQ	\$0 (Tier 3) DP
AQUADEKS CHW	\$0 (Tier 3) DP
<i>aquadeks dro</i>	\$0 (Tier 3) DP
AQUASOL A INJ 50000/ML	\$0 (Tier 3) DP
<i>aqueous e dro 15/0.3ml</i>	\$0 (Tier 3) DP
<i>ascorbic acid cap er 500 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>ascorbic acid chew tab 250 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid chew tab 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 250 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 1000 mg</i>	\$0 (Tier 3) DP
<i>B-12 DOTS TAB 500MCG</i>	\$0 (Tier 3) DP
<i>b-complex vitamin cap</i>	\$0 (Tier 3) DP
<i>b-complex vitamin tab</i>	\$0 (Tier 3) DP
<i>b-complex w/ c & calcium tab</i>	\$0 (Tier 3) DP
<i>b-complex w/ c tab</i>	\$0 (Tier 3) DP
<i>biotin cap 5 mg</i>	\$0 (Tier 3) DP
<i>biotin tab 5 mg</i>	\$0 (Tier 3) DP
<i>biotin tab 300 mcg</i>	\$0 (Tier 3) DP
<i>c 250 tab</i>	\$0 (Tier 3) DP
<i>c-500 chw 500mg</i>	\$0 (Tier 3) DP
<i>c-1000/rh tab 1000mg</i>	\$0 (Tier 3) DP
<i>c/rosehip tr tab 1000mg</i>	\$0 (Tier 3) DP
<i>ca citrate + tab</i>	\$0 (Tier 3) DP
<i>cal-mag-zinc tab +d3</i>	\$0 (Tier 3) DP
<i>calciferol dro 8000/ml</i>	\$0 (Tier 3) DP
<i>calcitriol cap 0.5 mcg</i>	\$0 (Tier 1) B/D
<i>calcitriol cap 0.25 mcg</i>	\$0 (Tier 1) B/D
<i>calcitriol inj 1 mcg/ml</i>	\$0 (Tier 1) B/D
<i>calcitriol oral soln 1 mcg/ml</i>	\$0 (Tier 1) B/D
<i>centamin liq</i>	\$0 (Tier 3) DP
<i>centavite liq</i>	\$0 (Tier 3) DP
<i>century tab</i>	\$0 (Tier 3) DP
<i>century tab mature</i>	\$0 (Tier 3) DP
<i>cerovite jr chw</i>	\$0 (Tier 3) DP
<i>cerovite tab advanced</i>	\$0 (Tier 3) DP
<i>cerovite tab senior</i>	\$0 (Tier 3) DP
<i>CERTAVITE TAB SENIOR</i>	\$0 (Tier 3) DP
<i>certavite/ tab antioxid</i>	\$0 (Tier 3) DP
<i>chewabl vite chw childrns</i>	\$0 (Tier 3) DP
<i>chewable c chw 500mg</i>	\$0 (Tier 3) DP
<i>child chew chw iron</i>	\$0 (Tier 3) DP
<i>child chew chw vitamins</i>	\$0 (Tier 3) DP
<i>child chew/ chw extra c</i>	\$0 (Tier 3) DP
<i>childrens chw /iron</i>	\$0 (Tier 3) DP
<i>CHILDRENS CHW COMPLETE</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cholecalciferol cap 400 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 1000 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 2000 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 5000 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 10000 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 50000 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol oral liquid 400 unit/ml</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 400 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 1000 unit</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 2000 unit</i>	\$0 (Tier 3) DP
CL PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
<i>cod liver cap</i>	\$0 (Tier 3) DP
<i>cod liver oil cap</i>	\$0 (Tier 3) DP
COD LIVER OIL OIL	\$0 (Tier 3) DP
<i>compete tab</i>	\$0 (Tier 3) DP
<i>complete tab</i>	\$0 (Tier 3) DP
<i>complete tab senior</i>	\$0 (Tier 3) DP
<i>cyanocobalamin inj 1000 mcg/ml</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 100 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 250 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 500 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 1000 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab er 1000 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab er 2000 mcg</i>	\$0 (Tier 3) DP
<i>d3 cap 1000unit</i>	\$0 (Tier 3) DP
<i>d3 super str cap 2000unit</i>	\$0 (Tier 3) DP
<i>d 400 tab 400unit</i>	\$0 (Tier 3) DP
<i>daily vit tab</i>	\$0 (Tier 3) DP
<i>daily-vite tab</i>	\$0 (Tier 3) DP
<i>daily-vite/ tab iron</i>	\$0 (Tier 3) DP
DIALYVIT 800 TAB ZINC 15	\$0 (Tier 3) DP
<i>dialyvite d cap 5000unit</i>	\$0 (Tier 3) DP
<i>dialyvite tab 800</i>	\$0 (Tier 3) DP
<i>dialyvite tab 800/d</i>	\$0 (Tier 3) DP
DIALYVITE TAB 800/ZINC	\$0 (Tier 3) DP
<i>e-400 cap 400unit</i>	\$0 (Tier 3) DP
<i>ecce plus tab</i>	\$0 (Tier 3) DP
<i>eldertonic liq</i>	\$0 (Tier 3) DP
<i>ergocalciferol cap 50000 unit</i>	\$0 (Tier 3) DP
<i>ergocalciferol soln 8000 unit/ml</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>essentl one tab daily</i>	\$0 (Tier 3) DP
<i>ester-c tab 500mg</i>	\$0 (Tier 3) DP
EZFE FORTE CAP	\$0 (Tier 3) DP
FOLGARD TAB	\$0 (Tier 3) DP
<i>folic acid inj 5 mg/ml</i>	\$0 (Tier 3) DP
<i>folic acid tab 1 mg</i>	\$0 (Tier 3) DP
<i>folic acid tab 400 mcg</i>	\$0 (Tier 3) DP
<i>folic acid tab 400mcg</i>	\$0 (Tier 3) DP
<i>folic acid tab 800 mcg</i>	\$0 (Tier 3) DP
FOSFREE TAB	\$0 (Tier 3) DP
<i>geriaton liq</i>	\$0 (Tier 3) DP
GERIATRIC LIQ VITAMIN	\$0 (Tier 3) DP
<i>gnp b-50 tab balanced</i>	\$0 (Tier 3) DP
<i>gnp b-100 tab</i>	\$0 (Tier 3) DP
<i>gnp century tab</i>	\$0 (Tier 3) DP
<i>gnp century tab cardio</i>	\$0 (Tier 3) DP
GNP CENTURY TAB ENERGY	\$0 (Tier 3) DP
<i>gnp century tab mature</i>	\$0 (Tier 3) DP
<i>gnp century tab senior</i>	\$0 (Tier 3) DP
<i>gnp century tab ultimate</i>	\$0 (Tier 3) DP
<i>gnp healthy tab eyes</i>	\$0 (Tier 3) DP
<i>gnp little chw ones</i>	\$0 (Tier 3) DP
<i>gnp niacin tab 250mg tr</i>	\$0 (Tier 3) DP
<i>gnp one dail tab maximum</i>	\$0 (Tier 3) DP
<i>gnp opti-vit tab</i>	\$0 (Tier 3) DP
GNP PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
<i>gnp vit b1 tab 100mg</i>	\$0 (Tier 3) DP
<i>gnp vit b-6 tab 100mg</i>	\$0 (Tier 3) DP
<i>gnp vit b-12 tab 500mcg</i>	\$0 (Tier 3) DP
<i>gnp vit b-12 tab 1000 cr</i>	\$0 (Tier 3) DP
<i>gnp vit c chw 500mg</i>	\$0 (Tier 3) DP
<i>gnp vit c loz 60mg</i>	\$0 (Tier 3) DP
<i>gnp vit c tab 250mg</i>	\$0 (Tier 3) DP
<i>gnp vit c tab 1000mg</i>	\$0 (Tier 3) DP
<i>gnp vit d tab 1000unit</i>	\$0 (Tier 3) DP
<i>gnp vit e cap 200unit</i>	\$0 (Tier 3) DP
<i>gnp vit e cap 400unit</i>	\$0 (Tier 3) DP
<i>gnp vit e cap 1000unit</i>	\$0 (Tier 3) DP
<i>gnp zoochews chw gummies</i>	\$0 (Tier 3) DP
<i>healthy eyes cap supervis</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>healthy eyes tab</i>	\$0 (Tier 3) DP
<i>hm niacin tab 250mg</i>	\$0 (Tier 3) DP
<i>hm vit b1 tab 100mg</i>	\$0 (Tier 3) DP
<i>hm vitamin e cap 200unit</i>	\$0 (Tier 3) DP
<i>hm vitamin e cap 1000unit</i>	\$0 (Tier 3) DP
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	\$0 (Tier 3) DP
<i>i-vite prote tab</i>	\$0 (Tier 3) DP
<i>i-vite tab</i>	\$0 (Tier 3) DP
ICAPS AREDS TAB FORMULA	\$0 (Tier 3) DP
<i>icaps cap</i>	\$0 (Tier 3) DP
<i>icaps lutein cap /omega-3</i>	\$0 (Tier 3) DP
ICAPS LUTEIN TAB ZEAXANTH	\$0 (Tier 3) DP
<i>icaps mv tab</i>	\$0 (Tier 3) DP
ICAPS PLUS TAB	\$0 (Tier 3) DP
ICAR PEDS SUS GRAPE	\$0 (Tier 3) DP
ICAR-C TAB	\$0 (Tier 3) DP
INFUVITE INJ	\$0 (Tier 3) DP
INFUVITE INJ ADULT	\$0 (Tier 3) DP
INFUVITE INJ PEDIATRI	\$0 (Tier 3) DP
M-NATAL PLUS TAB	\$0 (Tier 2)
M.V.I PEDIAT INJ	\$0 (Tier 3) DP
<i>mega multi tab men</i>	\$0 (Tier 3) DP
<i>mega multi tab women</i>	\$0 (Tier 3) DP
MEGA MULTIVI TAB MEN	\$0 (Tier 3) DP
MEGA MULTIVI TAB WOMEN	\$0 (Tier 3) DP
MEPHYTON TAB 5MG	\$0 (Tier 3) DP
<i>mult vitamin tab essent</i>	\$0 (Tier 3) DP
<i>mult vitamin tab mens</i>	\$0 (Tier 3) DP
<i>mult vitamin tab womens</i>	\$0 (Tier 3) DP
<i>multi-delyn liq</i>	\$0 (Tier 3) DP
MULTI-DELYN LIQ /IRON	\$0 (Tier 3) DP
<i>multi-vitam tab</i>	\$0 (Tier 3) DP
<i>multilex tab</i>	\$0 (Tier 3) DP
<i>multilex-t&m tab</i>	\$0 (Tier 3) DP
<i>multiple vitamins w/ minerals tab</i>	\$0 (Tier 3) DP
<i>nail-ex tab 2.5mg</i>	\$0 (Tier 3) DP
NASCOBAL SPR 500MCG	\$0 (Tier 3) DP
NEPHRO-VITE TAB	\$0 (Tier 3) DP
NEPHRONEX LIQ 0.9/5ML	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>niacin cap 500mg</i>	\$0 (Tier 3) DP
<i>niacin cap er 250 mg</i>	\$0 (Tier 3) DP
<i>niacin cap er 500 mg</i>	\$0 (Tier 3) DP
NIACIN POW	\$0 (Tier 3) DP
<i>niacin tab 100 mg</i>	\$0 (Tier 3) DP
<i>niacin tab 500 mg</i>	\$0 (Tier 3) DP
<i>niacin tab er 500 mg</i>	\$0 (Tier 3) DP
<i>niacin tab er 750 mg</i>	\$0 (Tier 3) DP
NIACIN TR TAB 1000MG	\$0 (Tier 3) DP
NIACINAMIDE POW	\$0 (Tier 3) DP
<i>niacinamide tab 500 mg</i>	\$0 (Tier 3) DP
<i>nutr-e-sol liq 400/15ml</i>	\$0 (Tier 3) DP
OCUVITE CAP ADULT	\$0 (Tier 3) DP
<i>ocuvite tab lutein</i>	\$0 (Tier 3) DP
<i>ocuvite xtra tab</i>	\$0 (Tier 3) DP
<i>once daily tab</i>	\$0 (Tier 3) DP
<i>once daily tab iron</i>	\$0 (Tier 3) DP
ONCOVITE TAB	\$0 (Tier 3) DP
<i>one daily tab</i>	\$0 (Tier 3) DP
<i>one daily tab maximum</i>	\$0 (Tier 3) DP
<i>one daily tab men 50+</i>	\$0 (Tier 3) DP
<i>one daily tab mens</i>	\$0 (Tier 3) DP
<i>one daily tab mens 50+</i>	\$0 (Tier 3) DP
<i>one daily tab pls iron</i>	\$0 (Tier 3) DP
<i>one daily tab wom 50+</i>	\$0 (Tier 3) DP
<i>one daily tab womens</i>	\$0 (Tier 3) DP
OPCON-A SOL OP	\$0 (Tier 3) DP
<i>paricalcitol cap 1 mcg</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 2 mcg</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 4 mcg</i>	\$0 (Tier 1) B/D
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	\$0 (Tier 3) DP
<i>phytonadione inj 10 mg/ml</i>	\$0 (Tier 3) DP
<i>phytonadione tab 5 mg</i>	\$0 (Tier 3) DP
PNV FOLIC AC TAB + IRON	\$0 (Tier 2)
<i>poly vitamin chw</i>	\$0 (Tier 3) DP
POLY-VI-SOL DRO /IRON	\$0 (Tier 3) DP
<i>poly-vite sol /iron</i>	\$0 (Tier 3) DP
<i>polyvitamin chw /iron</i>	\$0 (Tier 3) DP
PRENATAL PLUS	\$0 (Tier 2)
PRENATAL TAB	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PRENATAL TAB 27-0.8MG	\$0 (Tier 3) DP
PRENATAL TAB 27-1MG	\$0 (Tier 2)
PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
PRENATAL TAB LOW IRON	\$0 (Tier 3) DP
PRENATAL TAB PLUS	\$0 (Tier 2)
PRENATAL VIT TAB LOW IRON	\$0 (Tier 2)
PRESERVISION CAP AREDS	\$0 (Tier 3) DP
PRESERVISION CAP AREDS 2	\$0 (Tier 3) DP
PRESERVISION CAP LUTEIN	\$0 (Tier 3) DP
PRESERVISION TAB AREDS	\$0 (Tier 3) DP
<i>prosight tab</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl inj 100 mg/ml</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 25 mg</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 100 mg</i>	\$0 (Tier 3) DP
<i>qc therin-m tab</i>	\$0 (Tier 3) DP
RAYALDEE CAP 30MCG	\$0 (Tier 2) NDS
<i>rena-vite tab</i>	\$0 (Tier 3) DP
<i>sentry tab</i>	\$0 (Tier 3) DP
<i>sentry tab senior</i>	\$0 (Tier 3) DP
<i>slo-niacin tab 250mg cr</i>	\$0 (Tier 3) DP
SLO-NIACIN TAB 500MG CR	\$0 (Tier 3) DP
SLO-NIACIN TAB 750MG CR	\$0 (Tier 3) DP
<i>sm animal chw shapes</i>	\$0 (Tier 3) DP
<i>sm balanced tab b-50</i>	\$0 (Tier 3) DP
<i>sm balanced tab b-100</i>	\$0 (Tier 3) DP
<i>sm complete tab</i>	\$0 (Tier 3) DP
<i>sm complete tab adv form</i>	\$0 (Tier 3) DP
<i>sm complete tab senior</i>	\$0 (Tier 3) DP
<i>sm folic acd tab 400mcg</i>	\$0 (Tier 3) DP
<i>sm multiple tab vit/iron</i>	\$0 (Tier 3) DP
<i>sm multiple tab vitamins</i>	\$0 (Tier 3) DP
<i>sm opti-vita tab</i>	\$0 (Tier 3) DP
SM PRENATAL TAB VITAMINS	\$0 (Tier 3) DP
<i>sm vit b-6 tab 100mg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 100mcg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 500mcg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 1000 tr</i>	\$0 (Tier 3) DP
<i>sm vit c/rh tab 1000mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c chw 500mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>sm vitamin c tab 250mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c tab 1000mg</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 200unit</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 400unit</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 1000unit</i>	\$0 (Tier 3) DP
<i>stress form/ tab zinc</i>	\$0 (Tier 3) DP
<i>stress formu tab</i>	\$0 (Tier 3) DP
<i>stress formu tab w/iron</i>	\$0 (Tier 3) DP
STUART ONE CAP	\$0 (Tier 3) DP
<i>super b comp tab vit c</i>	\$0 (Tier 3) DP
<i>super liq nu-thera</i>	\$0 (Tier 3) DP
SUPER POW NU-THERA	\$0 (Tier 3) DP
<i>super tab nu-thera</i>	\$0 (Tier 3) DP
<i>super vikaps tab</i>	\$0 (Tier 3) DP
<i>superplex-t tab</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab /iron</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab beta car</i>	\$0 (Tier 3) DP
THERA M PLUS TAB	\$0 (Tier 3) DP
<i>thera tab</i>	\$0 (Tier 3) DP
THERA TAB	\$0 (Tier 3) DP
<i>thera-m tab</i>	\$0 (Tier 3) DP
THERA-M TAB	\$0 (Tier 3) DP
THERAPEUTIC SOL	\$0 (Tier 3) DP
<i>therapeutic- tab m</i>	\$0 (Tier 3) DP
<i>therems tab</i>	\$0 (Tier 3) DP
THEREMS-H TAB	\$0 (Tier 3) DP
THEREMS-M TAB	\$0 (Tier 3) DP
<i>thiamine hcl inj 100 mg/ml</i>	\$0 (Tier 3) DP
THIAMINE HCL POW	\$0 (Tier 3) DP
<i>thiamine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>thiamine hcl tab 100 mg</i>	\$0 (Tier 3) DP
<i>total b/c tab</i>	\$0 (Tier 3) DP
TRICARE TAB PRENATAL	\$0 (Tier 2)
UNICOMPLEX-M TAB	\$0 (Tier 3) DP
<i>vita-bee/c tab</i>	\$0 (Tier 3) DP
<i>vitamin a cap 8000unit</i>	\$0 (Tier 3) DP
<i>vitamin a cap 10000 unit</i>	\$0 (Tier 3) DP
<i>vitamin b12 tab 1000mcg</i>	\$0 (Tier 3) DP
<i>vitamin c tab 500mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>vitamin c tab 500mg tr</i>	\$0 (Tier 3) DP
<i>vitamin d3 cap 10000unt</i>	\$0 (Tier 3) DP
<i>vitamin d3 dro 400unit</i>	\$0 (Tier 3) DP
<i>vitamin d3 tab 1000unit</i>	\$0 (Tier 3) DP
<i>vitamin d3 tab 50000unt</i>	\$0 (Tier 3) DP
<i>vitamin d tab 400unit</i>	\$0 (Tier 3) DP
<i>vitamin d tab 1000unit</i>	\$0 (Tier 3) DP
<i>vitamin d-3 tab 5000unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 100 unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 200 unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 400 unit</i>	\$0 (Tier 3) DP
<i>vitamin e cap 1000 unit</i>	\$0 (Tier 3) DP
<i>vite/iron chw children</i>	\$0 (Tier 3) DP
<i>womens one tab daily</i>	\$0 (Tier 3) DP
<i>zoo friends chw</i>	\$0 (Tier 3) DP
ZOO FRIENDS CHW COMPLETE	\$0 (Tier 3) DP
<i>zoo friends chw extra c</i>	\$0 (Tier 3) DP
<i>zoo friends chw gummies</i>	\$0 (Tier 3) DP

OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS

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

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

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

AZASITE SOL 1%	\$0 (Tier 2)
<i>bacitracin ophth oint 500 unit/gm</i>	\$0 (Tier 1)
<i>bacitracin-polymyxin b ophth oint</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)
BESIVANCE SUS 0.6%	\$0 (Tier 2)
CILOXAN OIN 0.3% OP	\$0 (Tier 2)
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	\$0 (Tier 1)
<i>erythromycin ophth oint 5 mg/gm</i>	\$0 (Tier 1)
<i>gatifloxacin ophth soln 0.5%</i>	\$0 (Tier 1)
<i>gentak oin 0.3% op</i>	\$0 (Tier 1)
<i>gentamicin sulfate ophth soln 0.3%</i>	\$0 (Tier 1)
MOXEZA SOL 0.5%	\$0 (Tier 2)
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	\$0 (Tier 1)
NATACYN SUS 5% OP	\$0 (Tier 2)
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	\$0 (Tier 1)
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	\$0 (Tier 1)
<i>ofloxacin ophth soln 0.3%</i>	\$0 (Tier 1)
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	\$0 (Tier 1)
<i>sulfacetamide sodium ophth oint 10%</i>	\$0 (Tier 1)
<i>sulfacetamide sodium ophth soln 10%</i>	\$0 (Tier 1)
<i>tobramycin ophth soln 0.3%</i>	\$0 (Tier 1)
<i>trifluridine ophth soln 1%</i>	\$0 (Tier 1)
ZIRGAN GEL 0.15%	\$0 (Tier 2)

ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION

ALREX SUS 0.2%	\$0 (Tier 2)
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	\$0 (Tier 1)
BROMSITE DRO 0.075%	\$0 (Tier 2)
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	\$0 (Tier 1)
<i>diclofenac sodium ophth soln 0.1%</i>	\$0 (Tier 1)
DUREZOL EMU 0.05%	\$0 (Tier 2)
<i>fluorometholone ophth susp 0.1%</i>	\$0 (Tier 1)
<i>flurbiprofen sodium ophth soln 0.03%</i>	\$0 (Tier 1)
ILEVRO DRO 0.3% OP	\$0 (Tier 2)
<i>ketorolac tromethamine ophth soln 0.4%</i>	\$0 (Tier 1)
<i>ketorolac tromethamine ophth soln 0.5%</i>	\$0 (Tier 1)
LOTEMAX GEL 0.5%	\$0 (Tier 2)
LOTEMAX OIN 0.5%	\$0 (Tier 2)
<i>loteprednol etabonate ophth susp 0.5%</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
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PRED SOD PHO SOL 1% OP	\$0 (Tier 2)
<i>prednisolone acetate ophth susp 1%</i>	\$0 (Tier 1)
PROLENSA SOL 0.07%	\$0 (Tier 2)

ANTIALLERGICS - DRUGS TO TREAT ALLERGIES

<i>azelastine hcl ophth soln 0.05%</i>	\$0 (Tier 1)
BEPREVE DRO 1.5%	\$0 (Tier 2)
<i>cromolyn sodium ophth soln 4%</i>	\$0 (Tier 1)
<i>eye allergy sol relief</i>	\$0 (Tier 3) DP
LASTACFT SOL 0.25%	\$0 (Tier 2)
NAPHCONE-A SOL OP	\$0 (Tier 3) DP
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	\$0 (Tier 1)
PAZEO DRO 0.7%	\$0 (Tier 2)

ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA

ALPHAGAN P SOL 0.1%	\$0 (Tier 2)
AZOPT SUS 1% OP	\$0 (Tier 2)
<i>betaxolol hcl ophth soln 0.5%</i>	\$0 (Tier 1)
BETOPTIC-S SUS 0.25% OP	\$0 (Tier 2)
<i>brimonidine tartrate ophth soln 0.2%</i>	\$0 (Tier 1)
<i>brimonidine tartrate ophth soln 0.15%</i>	\$0 (Tier 1)
<i>carteolol hcl ophth soln 1%</i>	\$0 (Tier 1)
COMBIGAN SOL 0.2/0.5%	\$0 (Tier 2)
<i>dorzolamide hcl ophth soln 2%</i>	\$0 (Tier 1)
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	\$0 (Tier 1)
<i>latanoprost ophth soln 0.005%</i>	\$0 (Tier 1)
<i>levobunolol hcl ophth soln 0.5%</i>	\$0 (Tier 1)
LUMIGAN SOL 0.01%	\$0 (Tier 2)
PHOSPHOLINE SOL 0.125%OP	\$0 (Tier 2)
<i>pilocarpine hcl ophth soln 1%</i>	\$0 (Tier 1)
<i>pilocarpine hcl ophth soln 2%</i>	\$0 (Tier 1)
<i>pilocarpine hcl ophth soln 4%</i>	\$0 (Tier 1)
RHOPRESSA SOL 0.02%	\$0 (Tier 2)
SIMBRINZA SUS 1-0.2%	\$0 (Tier 2)
<i>timolol maleate ophth gel forming soln 0.5%</i>	\$0 (Tier 1)
<i>timolol maleate ophth gel forming soln 0.25%</i>	\$0 (Tier 1)
<i>timolol maleate ophth soln 0.5%</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
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timolol maleate ophth soln 0.5% (once-daily)

\$0 (Tier 1)

timolol maleate ophth soln 0.25%

\$0 (Tier 1)

TRAVATAN Z DRO 0.004%

\$0 (Tier 2)

MISCELLANEOUS

CYSTARAN SOL 0.44%

\$0 (Tier 2) NDS, LA, PA

proparacaine hcl ophth soln 0.5%

\$0 (Tier 1)

RESTASIS EMU 0.05%

\$0 (Tier 2) QL (60 single use vials / 30 days)

RESTASIS MUL EMU 0.05%

\$0 (Tier 2) QL (1 bottle / 30 days)

RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD

ANORO ELLIPT AER 62.5-25

\$0 (Tier 2) QL (60 blisters / 30 days)

BEVESPI AER 9-4.8MCG

\$0 (Tier 2) QL (1 inhaler / 30 days)

COMBIVENT AER 20-100

\$0 (Tier 2) QL (2 inhalers / 30 days)

ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml

\$0 (Tier 1) B/D

TRELEGY AER ELLIPTA

\$0 (Tier 2) QL (60 blisters / 30 days)

ANTICHOLINERGICS - DRUGS TO TREAT COPD

ATROVENT HFA AER 17MCG

\$0 (Tier 2) QL (2 inhalers / 30 days)

INCRUSE ELPT INH 62.5MCG

\$0 (Tier 2) QL (30 blisters / 30 days)

ipratropium bromide inhal soln 0.02%

\$0 (Tier 1) B/D

ipratropium bromide nasal soln 0.03% (21 mcg/spray)

\$0 (Tier 1)

ipratropium bromide nasal soln 0.06% (42 mcg/spray)

\$0 (Tier 1)

ANTI HISTAMINES - DRUGS TO TREAT ALLERGIES

all day allg sol 1mg/ml

\$0 (Tier 3) DP

all day allg sol 5mg/5ml

\$0 (Tier 3) DP

all day allg tab 10mg

\$0 (Tier 3) DP

aller-chlor tab 4mg

\$0 (Tier 3) DP

aller-ease tab 60mg

\$0 (Tier 3) DP

aller-tec tab 10mg

\$0 (Tier 3) DP

allerclear tab 10mg

\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>allergy cap 25mg</i>	\$0 (Tier 3) DP
<i>allergy chld liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>allergy med tab 25mg</i>	\$0 (Tier 3) DP
<i>allergy relf cap 25mg</i>	\$0 (Tier 3) DP
<i>allergy relf liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>allergy relf tab 1.34mg</i>	\$0 (Tier 3) DP
<i>allergy relf tab 10mg</i>	\$0 (Tier 3) DP
<i>allergy relf tab 25mg</i>	\$0 (Tier 3) DP
<i>allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>allergy tab 10mg</i>	\$0 (Tier 3) DP
<i>allergy-time tab 4mg</i>	\$0 (Tier 3) DP
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	\$0 (Tier 1)
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	\$0 (Tier 1)
<i>banophen cap 25mg</i>	\$0 (Tier 3) DP
<i>banophen cap 50mg</i>	\$0 (Tier 3) DP
<i>banophen liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>banophen tab 25mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl chew tab 5 mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl chew tab 10 mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	\$0 (Tier 1)
<i>cetirizine hcl tab 5 mg</i>	\$0 (Tier 3) DP
<i>cetirizine hcl tab 10 mg</i>	\$0 (Tier 3) DP
<i>cetirizine sol 1mg/ml</i>	\$0 (Tier 3) DP
<i>cetirizine sol 5mg/5ml</i>	\$0 (Tier 3) DP
<i>chld allergy liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>chlor-phenir tab 4mg</i>	\$0 (Tier 3) DP
<i>comp allergy cap 25mg</i>	\$0 (Tier 3) DP
<i>cypiroheptadine hcl syrup 2 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>cypiroheptadine hcl tab 4 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>dayhist alrg tab 12 hour</i>	\$0 (Tier 3) DP
<i>diphenhist cap 25mg</i>	\$0 (Tier 3) DP
<i>diphenhist liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>diphenhist tab 25mg</i>	\$0 (Tier 3) DP
<i>diphenhydramine hcl cap 25 mg</i>	\$0 (Tier 3) DP
<i>diphenhydramine hcl cap 50 mg</i>	\$0 (Tier 3) DP
<i>diphenhydramine hcl inj 50 mg/ml</i>	\$0 (Tier 1)
<i>diphenhydramine hcl tab 25 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>ed chlorped syp jr</i>	\$0 (Tier 3) DP
<i>fexofenadine hcl tab 60 mg</i>	\$0 (Tier 3) DP
<i>fexofenadine hcl tab 180 mg</i>	\$0 (Tier 3) DP
<i>fexofenadine tab 60mg</i>	\$0 (Tier 3) DP
<i>fexofenadine tab 180mg</i>	\$0 (Tier 3) DP
<i>gnp all day tab allergy</i>	\$0 (Tier 3) DP
<i>gnp allergy cap 25mg</i>	\$0 (Tier 3) DP
<i>gnp allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>gnp allergy tab 25mg</i>	\$0 (Tier 3) DP
<i>gnp allergy tab 180mg</i>	\$0 (Tier 3) DP
<i>gnp dayhist tab 1.34mg</i>	\$0 (Tier 3) DP
<i>hm allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>hm allergy tab 25mg</i>	\$0 (Tier 3) DP
<i>hydroxyzine hcl im soln 25 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl tab 10 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl tab 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine hcl tab 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 25 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 50 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	\$0 (Tier 1)
<i>levocetirizine dihydrochloride tab 5 mg</i>	\$0 (Tier 1)
<i>loratadine sol 5mg/5ml</i>	\$0 (Tier 3) DP
<i>loratadine syp 5mg/5ml</i>	\$0 (Tier 3) DP
<i>loratadine tab 10 mg</i>	\$0 (Tier 3) DP
<i>loratadine tab 10mg</i>	\$0 (Tier 3) DP
<i>medi-phedryl cap 25mg</i>	\$0 (Tier 3) DP
<i>mucinex allr tab 180mg</i>	\$0 (Tier 3) DP
<i>pharbecchlor tab 4mg</i>	\$0 (Tier 3) DP
<i>pharbedryl cap 25mg</i>	\$0 (Tier 3) DP
<i>pharbedryl cap 50mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>qc allergy tab 10mg</i>	\$0 (Tier 3) DP
<i>siladryl alr liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>sm all day tab allergy</i>	\$0 (Tier 3) DP
<i>sm allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>sm allergy tab 25mg rlf</i>	\$0 (Tier 3) DP

BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 1) QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	\$0 (Tier 1) QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	\$0 (Tier 1)
<i>albuterol sulfate tab 2 mg</i>	\$0 (Tier 1)
<i>albuterol sulfate tab 4 mg</i>	\$0 (Tier 1)
<i>albuterol sulfate tab er 12hr 4 mg</i>	\$0 (Tier 1)
<i>albuterol sulfate tab er 12hr 8 mg</i>	\$0 (Tier 1)
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	\$0 (Tier 1) B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	\$0 (Tier 1) QL (2 inhalers / 30 days)
SEREVENT DIS AER 50MCG	\$0 (Tier 2) QL (60 inhalations / 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	\$0 (Tier 1)
<i>terbutaline sulfate tab 5 mg</i>	\$0 (Tier 1)
VENTOLIN HFA AER	\$0 (Tier 2) QL (2 inhalers / 30 days)

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

<i>aller/conges tab 10-240mg</i>	\$0 (Tier 3) DP
<i>allergy d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>allergy rel/ tab deconges</i>	\$0 (Tier 3) DP
<i>allergy relf tab /nsl dec</i>	\$0 (Tier 3) DP
<i>allergy relf tab d-24</i>	\$0 (Tier 3) DP
<i>allergy-d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>allergy/cong tab 5-120mg</i>	\$0 (Tier 3) DP
<i>allgy comp-d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>ambi 10peh/ tab 400gfn</i>	\$0 (Tier 3) DP
<i>ambi 40pse/ tab 400gfn</i>	\$0 (Tier 3) DP
<i>benzonatate cap 100 mg</i>	\$0 (Tier 3) DP
<i>benzonatate cap 200 mg</i>	\$0 (Tier 3) DP
<i>bromfed dm syp</i>	\$0 (Tier 3) DP
<i>CAPCOF SYP 5-2-10MG</i>	\$0 (Tier 3) DP
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	\$0 (Tier 3) DP
<i>cheratussin syp ac</i>	\$0 (Tier 3) DP
<i>child silfed liq 15mg/5ml</i>	\$0 (Tier 3) DP
<i>cold/allergy elx children</i>	\$0 (Tier 3) DP
<i>cough cont liq dm max</i>	\$0 (Tier 3) DP
<i>cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>cough syp 100/5ml</i>	\$0 (Tier 3) DP
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	\$0 (Tier 3) DP
<i>cvs cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>decongestant tab 120mg er</i>	\$0 (Tier 3) DP
<i>DELSYM SUS 30MG/5ML</i>	\$0 (Tier 3) DP
<i>dextromethorphan polistirex extended release susp 30 mg/5ml</i>	\$0 (Tier 3) DP
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	\$0 (Tier 3) DP
<i>diabetic tus liq 100/5ml</i>	\$0 (Tier 3) DP
<i>diabetic tus liq dm</i>	\$0 (Tier 3) DP
<i>diabetic tus liq max st</i>	\$0 (Tier 3) DP
<i>eq cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>gnp cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>gnp suphedrn liq 15mg/5ml</i>	\$0 (Tier 3) DP
<i>gnp tussin liq dm</i>	\$0 (Tier 3) DP
<i>gnp tussin liq dm cough</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>gnp tussin liq dm max</i>	\$0 (Tier 3) DP
<i>gnp tussin syp cf</i>	\$0 (Tier 3) DP
<i>guaiaatuss ac syp 100-10/5</i>	\$0 (Tier 3) DP
<i>guaifenesin liquid 100 mg/5ml</i>	\$0 (Tier 3) DP
<i>guaifenesin syp 100-10/5</i>	\$0 (Tier 3) DP
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>hm cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
<i>hm tussin liq adlt dm</i>	\$0 (Tier 3) DP
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	\$0 (Tier 3) DP
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	\$0 (Tier 3) DP
<i>hydromet syp 5-1.5/5</i>	\$0 (Tier 3) DP
LOHIST-DM SYP 5-2-10MG	\$0 (Tier 3) DP
<i>lorata-dine tab d 24hr</i>	\$0 (Tier 3) DP
<i>loratadine-d tab 5-120mg</i>	\$0 (Tier 3) DP
<i>loratadine-d tab 10-240mg</i>	\$0 (Tier 3) DP
LORTUSS EX LIQ	\$0 (Tier 3) DP
M-CLEAR WC LIQ 100-6.3	\$0 (Tier 3) DP
MAR-COF CG LIQ 225-7.5	\$0 (Tier 3) DP
<i>medi-tussin syp dm</i>	\$0 (Tier 3) DP
<i>mucinex chld liq 100/5ml</i>	\$0 (Tier 3) DP
<i>mucus relief liq 100/5ml</i>	\$0 (Tier 3) DP
<i>mucus relief liq 400/20ml</i>	\$0 (Tier 3) DP
<i>nasal decong tab 10mg</i>	\$0 (Tier 3) DP
<i>nasal decong tab 30mg</i>	\$0 (Tier 3) DP
<i>nasal decong tab 120mg er</i>	\$0 (Tier 3) DP
NASALCROM SPR 5.2/ACT	\$0 (Tier 3) DP
NINJACOF-XG LIQ 200-8/5	\$0 (Tier 3) DP
<i>10peh/400gfn tab /20dm</i>	\$0 (Tier 3) DP
POLY-TUSSIN LIQ 10-4-10	\$0 (Tier 3) DP
PRO-RED AC SYP 5-1-9/5	\$0 (Tier 3) DP
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	\$0 (Tier 3) DP
<i>pseudoeph-chlorphen w/ hydrocodone soln 60-4-5 mg/5ml</i>	\$0 (Tier 3) DP
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>pseudoephedr tab 120mg er</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab 30 mg</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab 60 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>pseudoephedrine hcl tab er 12hr 120 mg</i>	\$0 (Tier 3) DP
<i>qc suphedrin tab 120mg sr</i>	\$0 (Tier 3) DP
<i>ra cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
REFENESEN TAB CHST CNG	\$0 (Tier 3) DP
<i>robafen dm syp 100-10/5</i>	\$0 (Tier 3) DP
<i>robafen syp 100/5ml</i>	\$0 (Tier 3) DP
RYDEX LIQ	\$0 (Tier 3) DP
<i>rynex pse liq</i>	\$0 (Tier 3) DP
<i>sb cgh contr liq dm</i>	\$0 (Tier 3) DP
<i>siltuss das liq 100/5ml</i>	\$0 (Tier 3) DP
<i>siltussin dm liq das</i>	\$0 (Tier 3) DP
<i>siltussin sa syp 100/5ml</i>	\$0 (Tier 3) DP
<i>siltussin-dm liq diabetic</i>	\$0 (Tier 3) DP
<i>siltussin-dm liq max st</i>	\$0 (Tier 3) DP
<i>siltussin-dm syp alc free</i>	\$0 (Tier 3) DP
<i>sm nasal dec tab 30mg</i>	\$0 (Tier 3) DP
<i>sm tussin cf liq</i>	\$0 (Tier 3) DP
<i>sm tussin dm syp 100-10/5</i>	\$0 (Tier 3) DP
<i>sm tussin syp dm</i>	\$0 (Tier 3) DP
<i>sudogest pe tab 10mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 30mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 60mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 120mg er</i>	\$0 (Tier 3) DP
TESSALON PER CAP 100MG	\$0 (Tier 3) DP
<i>trymine cg liq 225-7.5</i>	\$0 (Tier 3) DP
TUSNEL C SYP	\$0 (Tier 3) DP
<i>tusnel diabt liq 10-100/5</i>	\$0 (Tier 3) DP
TUSSICAPS CAP 10-8MG	\$0 (Tier 3) DP
<i>tussin adult liq 100/5ml</i>	\$0 (Tier 3) DP
<i>tussin adult liq cgh/cong</i>	\$0 (Tier 3) DP
<i>tussin adult liq cold</i>	\$0 (Tier 3) DP
<i>tussin cf liq</i>	\$0 (Tier 3) DP
<i>tussin cf liq cgh/cold</i>	\$0 (Tier 3) DP
<i>tussin chest syp 100/5ml</i>	\$0 (Tier 3) DP
<i>tussin dm liq</i>	\$0 (Tier 3) DP
<i>tussin dm liq 100-10/5</i>	\$0 (Tier 3) DP
<i>tussin dm liq max</i>	\$0 (Tier 3) DP
<i>tussin dm syp 100-10/5</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LEUKOTRIENE MODULATORS	
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium tab 10 mg (base equiv)</i>	\$0 (Tier 1)
<i>zafirlukast tab 10 mg</i>	\$0 (Tier 1)
<i>zafirlukast tab 20 mg</i>	\$0 (Tier 1)
MAST CELL STABILIZERS - DRUGS TO TREAT ALLERGIES	
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	\$0 (Tier 1) B/D
MISCELLANEOUS	
<i>acetylcysteine inhal soln 10%</i>	\$0 (Tier 1) B/D
<i>acetylcysteine inhal soln 20%</i>	\$0 (Tier 1) B/D
ARALAST NP INJ 500MG	\$0 (Tier 2) NDS, LA, PA
ARALAST NP INJ 1000MG	\$0 (Tier 2) NDS, LA, PA
AYR SALINE KIT NETI RNS	\$0 (Tier 3) DP
AYR SALINE KIT RINSE	\$0 (Tier 3) DP
DALIRESP TAB 250MCG	\$0 (Tier 2)
DALIRESP TAB 500MCG	\$0 (Tier 2)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 1) (generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 1) (generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	\$0 (Tier 1) (generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	\$0 (Tier 1) (generic of Adrenaclick)
ESBRIET CAP 267MG	\$0 (Tier 2) NDS, PA
ESBRIET TAB 267MG	\$0 (Tier 2) NDS, PA
ESBRIET TAB 801MG	\$0 (Tier 2) NDS, PA
KALYDECO PAK 25MG	\$0 (Tier 2) NDS, PA
KALYDECO PAK 50MG	\$0 (Tier 2) NDS, PA
KALYDECO PAK 75MG	\$0 (Tier 2) NDS, PA
KALYDECO TAB 150MG	\$0 (Tier 2) NDS, PA
NUCALA INJ 100MG	\$0 (Tier 2) NDS, LA, PA
NUCALA INJ 100MG/ML	\$0 (Tier 2) NDS, LA, PA
OFEV CAP 100MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
OFEV CAP 150MG	\$0 (Tier 2) NDS, PA
ORKAMBI GRA 100-125	\$0 (Tier 2) NDS, PA
ORKAMBI GRA 150-188	\$0 (Tier 2) NDS, PA
ORKAMBI TAB 100-125	\$0 (Tier 2) NDS, PA
ORKAMBI TAB 200-125	\$0 (Tier 2) NDS, PA
PROLASTIN-C INJ 1000MG	\$0 (Tier 2) NDS, LA, PA
PULMOZYME SOL 1MG/ML	\$0 (Tier 2) NDS, PA
SYMDEKO TAB 100-150	\$0 (Tier 2) NDS, LA, PA
THEO-24 CAP 100MG CR	\$0 (Tier 2)
THEO-24 CAP 200MG CR	\$0 (Tier 2)
THEO-24 CAP 300MG CR	\$0 (Tier 2)
THEO-24 CAP 400MG ER	\$0 (Tier 2)
<i>theophylline soln 80 mg/15ml</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 100 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 200 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 300 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 450 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 24hr 400 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 24hr 600 mg</i>	\$0 (Tier 1)
XOLAIR INJ 75/0.5	\$0 (Tier 2) NDS, LA, PA
XOLAIR INJ 150MG/ML	\$0 (Tier 2) NDS, LA, PA
XOLAIR SOL 150MG	\$0 (Tier 2) NDS, LA, PA
ZEMAIRA INJ 1000MG	\$0 (Tier 2) NDS, LA, PA

NASAL STEROIDS - DRUGS TO TREAT ALLERGIES

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

STERIOD INHALANTS - DRUGS TO TREAT ASTHMA

ARNUITY ELPT INH 50MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
ARNUITY ELPT INH 100MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
ARNUITY ELPT INH 200MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	\$0 (Tier 1) B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	\$0 (Tier 1) B/D
FLOVENT DISK AER 50MCG	\$0 (Tier 2) QL (120 inhalations / 30 days)
FLOVENT DISK AER 100MCG	\$0 (Tier 2) QL (120 inhalations / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
FLOVENT DISK AER 250MCG	\$0 (Tier 2) QL (240 inhalations / 30 days)
FLOVENT HFA AER 44MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
FLOVENT HFA AER 110MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
FLOVENT HFA AER 220MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
PULMICORT INH 90MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
PULMICORT INH 180MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)

**STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT
ASTHMA AND COPD**

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

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

<i>amnestem cap 10mg</i>	\$0 (Tier 1) PA
<i>amnestem cap 20mg</i>	\$0 (Tier 1) PA
<i>amnestem cap 40mg</i>	\$0 (Tier 1) PA
<i>avita cre 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>avita gel 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	\$0 (Tier 1)
<i>claravis cap 10mg</i>	\$0 (Tier 1) PA
<i>claravis cap 20mg</i>	\$0 (Tier 1) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>claravis cap 30mg</i>	\$0 (Tier 1) PA
<i>claravis cap 40mg</i>	\$0 (Tier 1) PA
<i>clindamycin phosphate gel 1%</i>	\$0 (Tier 1) QL (75 grams / 30 days)
<i>clindamycin phosphate lotion 1%</i>	\$0 (Tier 1)
<i>clindamycin phosphate soln 1%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>erythromycin gel 2%</i>	\$0 (Tier 1)
<i>erythromycin pads 2%</i>	\$0 (Tier 1)
<i>erythromycin soln 2%</i>	\$0 (Tier 1)
<i>isotretinoin cap 10 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 20 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 30 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 40 mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 10mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 20mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 30mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 40mg</i>	\$0 (Tier 1) PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	\$0 (Tier 1)
<i>tretinoin cream 0.1%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin cream 0.05%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin cream 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin gel 0.01%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin gel 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>zenatane cap 10mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 20mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 30mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 40mg</i>	\$0 (Tier 1) PA

DERMATOLOGY, ANTIBIOTICS

<i>bacitr zinc oin 500/gm</i>	\$0 (Tier 3) DP
<i>bacitracin oin 500/gm</i>	\$0 (Tier 3) DP
<i>bacitracin oint 500 unit/gm</i>	\$0 (Tier 3) DP
<i>bacitracin zinc oint 500 unit/gm</i>	\$0 (Tier 3) DP
<i>gentamicin sulfate cream 0.1%</i>	\$0 (Tier 1)
<i>gentamicin sulfate oint 0.1%</i>	\$0 (Tier 1)
<i>hm triple oin antibiotic</i>	\$0 (Tier 3) DP
<i>mupirocin oint 2%</i>	\$0 (Tier 1) QL (220 grams / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>neomycin-bacitracin-polymyxin oint</i>	\$0 (Tier 3) DP
<i>sb triple oin antibiot</i>	\$0 (Tier 3) DP
<i>silver sulfadiazine cream 1%</i>	\$0 (Tier 1)
<i>sm antibioti oin 500/gm</i>	\$0 (Tier 3) DP
<i>sm triple oin antibiot</i>	\$0 (Tier 3) DP
<i>ssd cre 1%</i>	\$0 (Tier 1)
SULFAMYLON CRE 85MG/GM	\$0 (Tier 2)
<i>tri-biozene oin</i>	\$0 (Tier 3) DP
<i>triple antib oin</i>	\$0 (Tier 3) DP
<i>triple antib oin max st</i>	\$0 (Tier 3) DP
<i>triple antib oin plus</i>	\$0 (Tier 3) DP

DERMATOLOGY, ANTIFUNGALS

<i>anti-fungal cre 1%</i>	\$0 (Tier 3) DP
<i>anti-fungal pow 1%</i>	\$0 (Tier 3) DP
<i>antifungal aer 1%</i>	\$0 (Tier 3) DP
<i>antifungal cre 1%</i>	\$0 (Tier 3) DP
<i>antifungal cre 2%</i>	\$0 (Tier 3) DP
<i>athlete foot cre 1%</i>	\$0 (Tier 3) DP
<i>athlete foot cre af</i>	\$0 (Tier 3) DP
<i>baza antifun cre 2%</i>	\$0 (Tier 3) DP
BENZOIN TIN	\$0 (Tier 3) DP
BENZOIN TIN PLAIN	\$0 (Tier 3) DP
<i>castellani paint</i>	\$0 (Tier 3) DP
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	\$0 (Tier 1) QL (90 grams / 30 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>clotrimazole cre 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole cream 1%</i>	\$0 (Tier 1)
<i>clotrimazole cream 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole soln 1%</i>	\$0 (Tier 1) QL (30 mL / 30 days)
<i>clotrimazole soln 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0 (Tier 1)
<i>fungoid-d cre 1%</i>	\$0 (Tier 3) DP
<i>jock itch aer 1%</i>	\$0 (Tier 3) DP
<i>ketoconazole cream 2%</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>miconazole nitrate cream 2%</i>	\$0 (Tier 3) DP
<i>nyamyc pow 100000</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>nystatin cream 100000 unit/gm</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>nystatin oint 100000 unit/gm</i>	\$0 (Tier 1)
<i>nystatin topical powder 100000 unit/gm</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>nystop pow 100000</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>podactin pow 1%</i>	\$0 (Tier 3) DP
<i>sm antifungl cre 1%</i>	\$0 (Tier 3) DP
<i>sm antifungl cre 2%</i>	\$0 (Tier 3) DP
<i>soothe&cool cre inzo 2%</i>	\$0 (Tier 3) DP
<i>terbinafine cre 1%</i>	\$0 (Tier 3) DP
<i>terbinafine hcl cream 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate cre 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate cream 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate powder 1%</i>	\$0 (Tier 3) DP

DERMATOLOGY, ANTIPSORIATICS

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

DERMATOLOGY, ANTISEBORRHEICS

<i>ketoconazole shampoo 2%</i>	\$0 (Tier 1)
<i>selenium sulfide lotion 2.5%</i>	\$0 (Tier 1)

DERMATOLOGY, CORTICOSTEROIDS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>betamethasone dipropionate augmented oint 0.05%</i>	\$0 (Tier 1)	
<i>betamethasone dipropionate cream 0.05%</i>	\$0 (Tier 1)	
<i>betamethasone dipropionate lotion 0.05%</i>	\$0 (Tier 1)	
<i>betamethasone dipropionate oint 0.05%</i>	\$0 (Tier 1)	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	\$0 (Tier 1)	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	\$0 (Tier 1)	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	\$0 (Tier 1)	
ENSTILAR AER	\$0 (Tier 2)	QL (120 grams / 30 days), PA
<i>fluocinolone acetonide cream 0.01%</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide cream 0.025%</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide oint 0.025%</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide soln 0.01%</i>	\$0 (Tier 1)	QL (90 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	\$0 (Tier 1)	QL (120 grams / 30 days)
<i>fluocinonide emulsified base cream 0.05%</i>	\$0 (Tier 1)	QL (120 grams / 30 days)
<i>fluocinonide gel 0.05%</i>	\$0 (Tier 1)	QL (60 grams / 30 days)
<i>fluocinonide oint 0.05%</i>	\$0 (Tier 1)	QL (60 grams / 30 days)
<i>fluocinonide soln 0.05%</i>	\$0 (Tier 1)	QL (60 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	\$0 (Tier 1)	
<i>fluticasone propionate oint 0.005%</i>	\$0 (Tier 1)	
<i>halobetasol propionate cream 0.05%</i>	\$0 (Tier 1)	QL (50 grams / 30 days)
<i>halobetasol propionate oint 0.05%</i>	\$0 (Tier 1)	QL (50 grams / 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	\$0 (Tier 1)	QL (45 grams / 30 days)
<i>hydrocortisone butyrate oint 0.1%</i>	\$0 (Tier 1)	QL (45 grams / 30 days)
<i>hydrocortisone cream 1%</i>	\$0 (Tier 1)	
<i>hydrocortisone cream 2.5%</i>	\$0 (Tier 1)	
<i>hydrocortisone lotion 2.5%</i>	\$0 (Tier 1)	
<i>hydrocortisone oint 2.5%</i>	\$0 (Tier 1)	
<i>mometasone furoate cream 0.1%</i>	\$0 (Tier 1)	
<i>mometasone furoate oint 0.1%</i>	\$0 (Tier 1)	
<i>mometasone furoate solution 0.1% (lotion)</i>	\$0 (Tier 1)	
TEXACORT SOL 2.5%	\$0 (Tier 2)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>triamcinolone acetonide cream 0.1%</i>	\$0 (Tier 1) QL (454 grams / 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide cream 0.025%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide lotion 0.1%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide lotion 0.025%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.1%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.5%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.025%</i>	\$0 (Tier 1)

DERMATOLOGY, LOCAL ANESTHETICS

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

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

ACESULFAME POW POTASSIU	\$0 (Tier 3) DP
ACETIC ACID SOL 3%	\$0 (Tier 3) DP
ACETIC ACID SOL GLACIAL	\$0 (Tier 3) DP
ACETYL-L-CAR POW HCL	\$0 (Tier 3) DP
ALLANTOIN POW	\$0 (Tier 3) DP
ALMOND OIL SWEET	\$0 (Tier 3) DP
ALUM AMMONIU POW	\$0 (Tier 3) DP
ALUMINUM CL CRY	\$0 (Tier 3) DP
ALUMINUM POW HYDROXID	\$0 (Tier 3) DP
<i>amlactin lot 12%</i>	\$0 (Tier 3) DP
AMMONIUM GRA CHLORIDE	\$0 (Tier 3) DP
AMMONIUM POW ALUMINUM	\$0 (Tier 3) DP
ARGININE HCL POW	\$0 (Tier 3) DP
ASCORBIC ACD GRA	\$0 (Tier 3) DP
ASCORBIC ACD POW	\$0 (Tier 3) DP
ASCORBYL POW PALMITAT	\$0 (Tier 3) DP
AZ CREAM CRE	\$0 (Tier 3) DP
BETAINE POW ANHYDROU	\$0 (Tier 3) DP

PA - Prior Authorization **QL** - Quantity Limits **ST** - Step Therapy **B/D** - Covered under Medicare B or D **LA** - Limited Access **NDS** - Non-Extended Days Supply **DP** - The drug is not a Part D drug.

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
BIOFLAVINOID POW LEMON	\$0 (Tier 3) DP
BIOFLAVONOID POW CITRUS	\$0 (Tier 3) DP
BISMUTH POW SUBNITRA	\$0 (Tier 3) DP
BISMUTH SUBC POW	\$0 (Tier 3) DP
BORIC ACID GRA	\$0 (Tier 3) DP
BORIC ACID POW	\$0 (Tier 3) DP
CALAMINE LOT	\$0 (Tier 3) DP
CALAMINE LOT 8-8%	\$0 (Tier 3) DP
CALAMINE LOT PHENOLAT	\$0 (Tier 3) DP
CALCIUM POW CITRATE	\$0 (Tier 3) DP
CALCIUM POW HYDROXID	\$0 (Tier 3) DP
CALCIUM POW SACCHARA	\$0 (Tier 3) DP
CAMPHOR CRY	\$0 (Tier 3) DP
<i>capsaicin cre 0.1%</i>	\$0 (Tier 3) DP
<i>capsaicin cream 0.025%</i>	\$0 (Tier 3) DP
CAPSAICIN LIQ 0.15%	\$0 (Tier 3) DP
CARBOMER POW HOMOPOLY	\$0 (Tier 3) DP
CARBOXYMETHY POW SODIUM	\$0 (Tier 3) DP
CHLOROFORM SOL	\$0 (Tier 3) DP
CHOLESTEROL POW ACETATE	\$0 (Tier 3) DP
CHRSIN POW	\$0 (Tier 3) DP
CITRIC ACID GRA ANHYDROU	\$0 (Tier 3) DP
CITRIC ACID GRA MONOHYDR	\$0 (Tier 3) DP
CITRIC ACID POW ANHYDROU	\$0 (Tier 3) DP
CLORPACTIN POW WCS-90	\$0 (Tier 3) DP
CLOVE OIL	\$0 (Tier 3) DP
COAL TAR SOL 20%	\$0 (Tier 3) DP
COCONUT OIL	\$0 (Tier 3) DP
COENZYME Q10 POW	\$0 (Tier 3) DP
CORN STARCH POW	\$0 (Tier 3) DP
COTTONSEED OIL	\$0 (Tier 3) DP
CREATINE POW MONOHYDR	\$0 (Tier 3) DP
CROTON OIL	\$0 (Tier 3) DP
D-VITAMIN E POW SUCCINAT	\$0 (Tier 3) DP
<i>diclofenac sodium gel 1%</i>	\$0 (Tier 1) QL (1000 grams / 30 days), PA
ETHOXY ETHNL LIQ REAGENT	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 95%	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 95% USP	\$0 (Tier 3) DP
ETHYL ALCOHO SOL SDA 95%	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ETHYL OLEATE LIQ	\$0 (Tier 3) DP
EUGENOL SOL	\$0 (Tier 3) DP
FERRIC POW SUBSULFA	\$0 (Tier 3) DP
FERRIC SUBSU SOL	\$0 (Tier 3) DP
<i>fluorouracil cream 5%</i>	\$0 (Tier 1) QL (40 grams / 30 days)
<i>fluorouracil soln 2%</i>	\$0 (Tier 1) QL (10 mL / 30 days)
<i>fluorouracil soln 5%</i>	\$0 (Tier 1) QL (10 mL / 30 days)
FORMALDEHYDE SOL 37%	\$0 (Tier 3) DP
FREE & CLEAR SHA	\$0 (Tier 3) DP
FULLERS POW EARTH	\$0 (Tier 3) DP
GLUCOSAMINE POW HCL	\$0 (Tier 3) DP
GLUCOSAMINE POW SULFATE	\$0 (Tier 3) DP
GLYCERIN LIQ	\$0 (Tier 3) DP
GLYCOLIC ACD CRY	\$0 (Tier 3) DP
GLYCOLIC ACD SOL 70%	\$0 (Tier 3) DP
GRAPE SEED OIL	\$0 (Tier 3) DP
GREEN TEA EX LIQ 90%	\$0 (Tier 3) DP
HYDROCHL ACD LIQ 37%	\$0 (Tier 3) DP
<i>hydrocortisone rectal cream 2.5%</i>	\$0 (Tier 1)
ICHTHAMMOL POW	\$0 (Tier 3) DP
<i>imiquimod cream 5%</i>	\$0 (Tier 1) QL (24 packets / 30 days)
INDOLE-3- POW CARBINOL	\$0 (Tier 3) DP
INOSITOL POW HEXANICO	\$0 (Tier 3) DP
IODINE CRY RESUBLIM	\$0 (Tier 3) DP
ISOPROPYL LIQ PALMITAT	\$0 (Tier 3) DP
JESSNERS SOL	\$0 (Tier 3) DP
KOJIC ACID POW	\$0 (Tier 3) DP
L-CITRULLINE POW	\$0 (Tier 3) DP
LAC-HYDRIN LOT 12%	\$0 (Tier 3) DP
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 1)
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 3) DP
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 1)
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 3) DP
LACTIC ACID SOL	\$0 (Tier 3) DP
LIPOIC ACID POW	\$0 (Tier 3) DP
LIPOVAN BASE CRE	\$0 (Tier 3) DP
MAG CITRATE POW TRIBASIC	\$0 (Tier 3) DP
MALIC ACID POW	\$0 (Tier 3) DP
METHYL SULF CRY	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>metronidazole cream 0.75%</i>	\$0 (Tier 1)
<i>metronidazole gel 0.75%</i>	\$0 (Tier 1)
<i>metronidazole lotion 0.75%</i>	\$0 (Tier 1)
NA PHOS MONO POW ANHYDROU	\$0 (Tier 3) DP
NEW SKIN AER	\$0 (Tier 3) DP
OIL-ALMOND OIL SWEET	\$0 (Tier 3) DP
OIL-COCONUT OIL	\$0 (Tier 3) DP
ORNITHINE POW HCL	\$0 (Tier 3) DP
OXALIC ACID CRY	\$0 (Tier 3) DP
PANRETIN GEL 0.1%	\$0 (Tier 2) NDS, QL (60 grams / 30 days)
PENTRAVAN CRE	\$0 (Tier 3) DP
PENTRAVAN CRE PLUS	\$0 (Tier 3) DP
PERUVIAN LIQ BALSAM	\$0 (Tier 3) DP
PHENOL LIQ	\$0 (Tier 3) DP
PHOSPHATIDYL POW 20%	\$0 (Tier 3) DP
PICATO GEL 0.05%	\$0 (Tier 2) QL (2 tubes / 30 days)
PICATO GEL 0.015%	\$0 (Tier 2) QL (3 tubes / 30 days)
<i>podofilox soln 0.5%</i>	\$0 (Tier 1)
POLYSORBATE SOL 20	\$0 (Tier 3) DP
POT GLUCONAT POW ANHYDROU	\$0 (Tier 3) DP
POT HYDROXID SOL 10%	\$0 (Tier 3) DP
POT HYDROXID SOL 20%	\$0 (Tier 3) DP
POT NITRATE GRA	\$0 (Tier 3) DP
POT NITRATE GRA PURIFIED	\$0 (Tier 3) DP
POTASSIUM CRY BROMIDE	\$0 (Tier 3) DP
POTASSIUM CRY IODIDE	\$0 (Tier 3) DP
POTASSIUM MIS HYDROXID	\$0 (Tier 3) DP
<i>procto-med cre hc 2.5%</i>	\$0 (Tier 1)
<i>procto-pak cre 1%</i>	\$0 (Tier 1)
<i>proctozone cre -hc 2.5%</i>	\$0 (Tier 1)
PX CALAMINE LOT	\$0 (Tier 3) DP
PYRUVIC ACID LIQ	\$0 (Tier 3) DP
RA CALAMINE LOT	\$0 (Tier 3) DP
RECTIV OIN 0.4%	\$0 (Tier 2) QL (30 grams / 30 days)
RED YEAST POW RICE	\$0 (Tier 3) DP
RESORCINOL POW	\$0 (Tier 3) DP
<i>rosadan cre 0.75%</i>	\$0 (Tier 1)
SAFFLOWER OIL	\$0 (Tier 3) DP
SM CALAMINE LOT	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
SM CALAMINE LOT PHENOLAT	\$0 (Tier 3) DP
SOD BROMIDE GRA	\$0 (Tier 3) DP
SOD METABISU GRA ANHYDR	\$0 (Tier 3) DP
SOD PERBORAT CRY	\$0 (Tier 3) DP
SOD PHOSPHAT GRA DIBASIC	\$0 (Tier 3) DP
SOD PROPION POW	\$0 (Tier 3) DP
SOD SULFITE POW ANHYDROU	\$0 (Tier 3) DP
SODIUM BORAT POW	\$0 (Tier 3) DP
SODIUM CITRA GRA DIHYDRAT	\$0 (Tier 3) DP
SODIUM MIS HYDROXID	\$0 (Tier 3) DP
SODIUM POW BICARBON	\$0 (Tier 3) DP
SOYBEAN OIL	\$0 (Tier 3) DP
SQUARIC ACID LIQ BUTANOL	\$0 (Tier 3) DP
SQUARIC ACID POW DI-N-BUT	\$0 (Tier 3) DP
STEVIA POW EXTRACT	\$0 (Tier 3) DP
SULFUR POW	\$0 (Tier 3) DP
SULFUR POW PRECIPIT	\$0 (Tier 3) DP
<i>tacrolimus oint 0.1%</i>	\$0 (Tier 1) QL (100 grams / 30 days)
<i>tacrolimus oint 0.03%</i>	\$0 (Tier 1) QL (100 grams / 30 days)
TALC POW	\$0 (Tier 3) DP
TANNIC ACID POW	\$0 (Tier 3) DP
TARGETIN GEL 1%	\$0 (Tier 2) NDS, QL (60 grams / 30 days), PA
TARTARIC ACD GRA	\$0 (Tier 3) DP
THYMOL CRY	\$0 (Tier 3) DP
TURPENTINE LIQ SPIRITS	\$0 (Tier 3) DP
UNDECYLENIC LIQ ACID	\$0 (Tier 3) DP
UREA BEA	\$0 (Tier 3) DP
UREA POW PEROXIDE	\$0 (Tier 3) DP
VALCHLOR GEL 0.016%	\$0 (Tier 2) NDS, QL (60 grams / 30 days), LA, PA
VEEGUM MIS LUMP	\$0 (Tier 3) DP
VITAMIN K-1 POW	\$0 (Tier 3) DP
XYLITOL POW	\$0 (Tier 3) DP
ZINC CHLORID GRA	\$0 (Tier 3) DP
ZINC OXIDE POW	\$0 (Tier 3) DP
<i>zostrix hp cre 0.1%</i>	\$0 (Tier 3) DP
ZOSTRIX NAT CRE 0.033%	\$0 (Tier 3) DP

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

<i>complete kit lice</i>	\$0 (Tier 3) DP
<i>gnp lice kit</i>	\$0 (Tier 3) DP
<i>lice killing sha</i>	\$0 (Tier 3) DP
<i>lice killing sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>lice treatmt lot 1%</i>	\$0 (Tier 3) DP
<i>lice treatmt sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>lice trtmnt liq</i>	\$0 (Tier 3) DP
<i>lice trtmnt liq 1%</i>	\$0 (Tier 3) DP
<i>licide sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>malathion lotion 0.5%</i>	\$0 (Tier 1)
<i>permethrin cream 5%</i>	\$0 (Tier 1)
<i>ra lice liq max st</i>	\$0 (Tier 3) DP
RID COMPLETE KIT LICE	\$0 (Tier 3) DP
RID ESS LICE KIT 0.33-4%	\$0 (Tier 3) DP
<i>rid lice kil sha 0.33-4%</i>	\$0 (Tier 3) DP
<i>rid licekill sha 0.33-4%</i>	\$0 (Tier 3) DP

DERMATOLOGY, WOUND CARE AGENTS

<i>acetic acid irrigation soln 0.25%</i>	\$0 (Tier 1)
REGANEX GEL 0.01%	\$0 (Tier 2) NDS, QL (30 grams / 30 days), PA
SANTYL OIN 250/GM	\$0 (Tier 2)
<i>sodium chloride irrigation soln 0.9%</i>	\$0 (Tier 1)
<i>water for irrigation, sterile irrigation soln</i>	\$0 (Tier 1)

MOUTH/THROAT/DENTAL AGENTS

<i>cevimeline hcl cap 30 mg</i>	\$0 (Tier 1)
<i>chlorhexidine gluconate soln 0.12%</i>	\$0 (Tier 1)
<i>clotrimazole troche 10 mg</i>	\$0 (Tier 1)
<i>lidocaine hcl viscous soln 2%</i>	\$0 (Tier 1)
<i>little teeth gel 7.5%</i>	\$0 (Tier 3) DP
<i>nystatin susp 100000 unit/ml</i>	\$0 (Tier 1)
ORASEP SPR	\$0 (Tier 3) DP
<i>periogard sol 0.12%</i>	\$0 (Tier 1)
<i>periomed con 0.63%</i>	\$0 (Tier 3) DP
<i>pilocarpine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>pilocarpine hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>triamcinolone acetonide dental paste 0.1%</i>	\$0 (Tier 1)

OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR

<i>acetic acid otic soln 2%</i>	\$0 (Tier 1)
CIPRODEX SUS 0.3-0.1%	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>flac oil 0.01%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide (otic) oil 0.01%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc otic soln 1%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	\$0 (Tier 1)
<i>ofloxacin otic soln 0.3%</i>	\$0 (Tier 1)

D. Index of Covered Drugs

1		
10peh/400gfn tab /20dm	133	
3		
3 day vaginl cre 2%	98	
8		
8 hour pain tab 650mg	1	
A		
abacavir sulfate soln 20 mg/ml (base equiv)	12	
abacavir sulfate tab 300 mg (base equiv)	12	
abacavir sulfate-lamivudine tab 600-300 mg	14	
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg	14	
ABELCET INJ 5MG/ML	11	
ABILIFY MAIN INJ 300MG	59	
ABILIFY MAIN INJ 400MG	59	
abiraterone acetate tab 250 mg	25	
ABRAXANE INJ 100MG	23	
ACACIA POW	113	
acamprosate calcium tab delayed release 333 mg	70	
acarbose tab 100 mg	74	
acarbose tab 25 mg	74	
acarbose tab 50 mg	74	
acebutolol hcl cap 200 mg	39	
acebutolol hcl cap 400 mg	39	
acephen sup 120mg	1	
acephen sup 325mg	1	
acephen sup 650mg	1	
ACESULFAME POW POTASSIU	142	
acetaminophen suppos 120 mg	1	
acetaminophen suppos 650 mg	1	
acetaminophen tab 325 mg	1	
acetaminophen tab er 650 mg	1	
acetaminophen w/ codeine soln 120-12 mg/5ml	4	
acetaminophen w/ codeine tab 300-15 mg	4	
acetaminophen w/ codeine tab 300-30 mg	4	
acetaminophen w/ codeine tab 300-60 mg	4	
acetaminophn sus 160/5ml	1	
acetazolamide cap er 12hr 500 mg	43	
		acetazolamide tab 125 mg
		acetazolamide tab 250 mg
		acetic acid irrigation soln 0.25%
		acetic acid otic soln 2%
		ACETIC ACID SOL 3%
		ACETIC ACID SOL GLACIAL
		acetylcysteine inhal soln 10%
		acetylcysteine inhal soln 20%
		ACETYL-L-CAR POW HCL
		acitretin cap 10 mg
		acitretin cap 17.5 mg
		acitretin cap 25 mg
		ACTHIB INJ
		ACTIMMUNE INJ 2MU/0.5
		acyclovir cap 200 mg
		acyclovir sodium iv soln 50 mg/ml
		acyclovir susp 200 mg/5ml
		acyclovir tab 400 mg
		acyclovir tab 800 mg
		ADACEL INJ
		adefovir dipivoxil tab 10 mg
		ADEMPAS TAB 0.5MG
		ADEMPAS TAB 1.5MG
		ADEMPAS TAB 1MG
		ADEMPAS TAB 2.5MG
		ADEMPAS TAB 2MG
		ADIPEX-P CAP 37.5MG
		ADIPEX-P TAB 37.5MG
		adriamycin inj 20mg
		ADULT 50+ CAP OCUVITE
		ADVAIR DISKU AER 100/50
		ADVAIR DISKU AER 250/50
		ADVAIR DISKU AER 500/50
		ADVAIR HFA AER 115/21
		ADVAIR HFA AER 230/21
		ADVAIR HFA AER 45/21
		advanced sus antacid
		AFINITOR DIS TAB 2MG
		AFINITOR DIS TAB 3MG
		AFINITOR DIS TAB 5MG
		AFINITOR TAB 10MG
		AFINITOR TAB 2.5MG
		AFINITOR TAB 5MG
		AFINITOR TAB 7.5MG
		AIMOVIG INJ 140MG/ML
		AIMOVIG INJ 70MG/ML

<i>ala-cort cre 1%</i>	140	<i>allergy cap 25mg</i>	129
<i>ala-cort cre 2.5%</i>	140	<i>allergy chld liq 12.5/5ml</i>	129
<i>albendazole tab 200 mg</i>	8	<i>allergy d tab 5-120mg</i>	132
<i>albuterol sulfate inhal aero 108 mcg/act</i> <i>(90mcg base equiv)</i>	131	<i>allergy med tab 25mg</i>	129
<i>albuterol sulfate soln nebu 0.083% (2.5</i> <i>mg/3ml)</i>	131	<i>allergy rel/ tab deconges</i>	132
<i>albuterol sulfate soln nebu 0.5% (5</i> <i>mg/ml)</i>	131	<i>allergy relf cap 25mg</i>	129
<i>albuterol sulfate soln nebu 0.63 mg/3ml</i> <i>(base equiv)</i>	131	<i>allergy relf liq 12.5/5ml</i>	129
<i>albuterol sulfate soln nebu 1.25 mg/3ml</i> <i>(base equiv)</i>	131	<i>allergy relf tab /nsl dec</i>	132
<i>albuterol sulfate syrup 2 mg/5ml</i>	131	<i>allergy relf tab 1.34mg</i>	129
<i>albuterol sulfate tab 2 mg</i>	131	<i>allergy relf tab 10mg</i>	129
<i>albuterol sulfate tab 4 mg</i>	131	<i>allergy relf tab 25mg</i>	129
<i>albuterol sulfate tab er 12hr 4 mg</i>	131	<i>allergy relf tab d-24</i>	132
<i>albuterol sulfate tab er 12hr 8 mg</i>	131	<i>allergy tab 10mg</i>	129
<i>alclometasone dipropionate cream 0.05%</i>	140	<i>allergy tab 4mg</i>	129
<i>alclometasone dipropionate oint 0.05%</i>	140	<i>allergy/cong tab 5-120mg</i>	132
<i>ALDURAZYME INJ 2.9MG/5M</i>	82	<i>allergy-d tab 5-120mg</i>	132
<i>ALECENSA CAP 150MG</i>	27	<i>allergy-time tab 4mg</i>	129
<i>alendronate sodium oral soln 70</i> <i>mg/75ml</i>	76	<i>aller-tec tab 10mg</i>	128
<i>alendronate sodium tab 10 mg</i>	76	<i>allgy comp-d tab 5-120mg</i>	132
<i>alendronate sodium tab 35 mg</i>	76	<i>allopurinol tab 100 mg</i>	1
<i>alendronate sodium tab 40 mg</i>	77	<i>allopurinol tab 300 mg</i>	1
<i>alendronate sodium tab 5 mg</i>	76	<i>almacone dbl sus strength</i>	89
<i>alendronate sodium tab 70 mg</i>	77	<i>almacone sus</i>	89
<i>alfuzosin hcl tab er 24hr 10 mg</i>	97	<i>ALMOND OIL SWEET</i>	142
<i>ALIMTA INJ 100MG</i>	22	<i>alose tron hcl tab 0.5 mg (base equiv)</i> .	95
<i>ALIMTA INJ 500MG</i>	22	<i>alose tron hcl tab 1 mg (base equiv)</i> ...	95
<i>ALINIA SUS 100/5ML</i>	8	<i>ALPHAGAN P SOL 0.1%</i>	127
<i>ALINIA TAB 500MG</i>	8	<i>alprazolam tab 0.25 mg</i>	46
<i>aliskiren fumarate tab 150 mg (base</i> <i>equivalent)</i>	44	<i>alprazolam tab 0.5 mg</i>	46
<i>aliskiren fumarate tab 300 mg (base</i> <i>equivalent)</i>	44	<i>alprazolam tab 1 mg</i>	46
<i>all day allg sol 1mg/ml</i>	128	<i>alprazolam tab 2 mg</i>	46
<i>all day allg sol 5mg/5ml</i>	128	<i>ALREX SUS 0.2%</i>	126
<i>all day allg tab 10mg</i>	128	<i>ALUM AMMONIU POW</i>	142
<i>ALLANTOIN POW</i>	142	<i>ALUM HYDROX SUS 320/5ML</i>	89
<i>aller/conges tab 10-240mg</i>	132	<i>ALUMINUM CL CRY</i>	142
<i>aller-chlor tab 4mg</i>	128	<i>ALUMINUM POW HYDROXID</i>	142
<i>allerclear tab 10mg</i>	128	<i>ALUNBRIG PAK</i>	27
<i>aller-ease tab 60mg</i>	128	<i>ALUNBRIG TAB 180MG</i>	27
		<i>ALUNBRIG TAB 30MG</i>	27
		<i>ALUNBRIG TAB 90MG</i>	27
		<i>alyacen tab 1/35</i>	77
		<i>amantadine hcl cap 100 mg</i>	58
		<i>amantadine hcl syrup 50 mg/5ml</i>	58
		<i>amantadine hcl tab 100 mg</i>	58
		<i>ambi 10peh/ tab 400gfn</i>	132
		<i>ambi 40pse/ tab 400gfn</i>	132
		<i>AMBISOME INJ 50MG</i>	11
		<i>ambrisentan tab 10 mg</i>	46

<i>ambrisentan tab 5 mg</i>	46	<i>40 mg</i>	31
<i>amethia lo tab</i>	77	<i>amlodipine besylate-olmesartan</i>	
<i>amethia tab</i>	77	<i>medoxomil tab 10-20 mg</i>	34
<i>amikacin sulfate inj 1 gm/4ml (250</i>		<i>amlodipine besylate-olmesartan</i>	
<i>mg/ml)</i>	8	<i>medoxomil tab 10-40 mg</i>	34
<i>amikacin sulfate inj 500 mg/2ml (250</i>		<i>amlodipine besylate-olmesartan</i>	
<i>mg/ml)</i>	8	<i>medoxomil tab 5-20 mg</i>	34
<i>amiloride & hydrochlorothiazide tab 5-50</i>		<i>amlodipine besylate-olmesartan</i>	
<i>mg</i>	43	<i>medoxomil tab 5-40 mg</i>	34
<i>amiloride hcl tab 5 mg</i>	43	<i>amlodipine besylate-valsartan tab 10-</i>	
<i>AMINOSYN II INJ 10%</i>	108	<i>160 mg</i>	34
<i>AMINOSYN-PF INJ 10%</i>	108	<i>amlodipine besylate-valsartan tab 10-</i>	
<i>AMINOSYN-PF INJ 7%</i>	108	<i>320 mg</i>	34
<i>amiodarone hcl inj 150 mg/3ml (50</i>		<i>amlodipine besylate-valsartan tab 5-160</i>	
<i>mg/ml)</i>	36	<i>mg</i>	34
<i>amiodarone hcl inj 450 mg/9ml (50</i>		<i>amlodipine besylate-valsartan tab 5-320</i>	
<i>mg/ml)</i>	36	<i>mg</i>	34
<i>amiodarone hcl inj 900 mg/18ml (50</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>mg/ml)</i>	36	<i>tab 10-160-12.5 mg</i>	34
<i>amiodarone hcl tab 100 mg</i>	36	<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>amiodarone hcl tab 200 mg</i>	36	<i>tab 10-160-25 mg</i>	34
<i>amiodarone hcl tab 400 mg</i>	36	<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>AMITIZA CAP 24MCG</i>	95	<i>tab 10-320-25 mg</i>	34
<i>AMITIZA CAP 8MCG</i>	95	<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>amitriptyline hcl tab 10 mg</i>	54	<i>tab 5-160-12.5 mg</i>	34
<i>amitriptyline hcl tab 100 mg</i>	54	<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>amitriptyline hcl tab 150 mg</i>	54	<i>tab 5-160-25 mg</i>	34
<i>amitriptyline hcl tab 25 mg</i>	54	<i>AMMONIUM GRA CHLORIDE</i>	142
<i>amitriptyline hcl tab 50 mg</i>	54	<i>AMMONIUM POW ALUMINUM</i>	142
<i>amitriptyline hcl tab 75 mg</i>	54	<i>amnestem cap 10mg</i>	137
<i>amlactin lot 12%</i>	142	<i>amnestem cap 20mg</i>	137
<i>amlodipine besylate tab 10 mg (base</i>		<i>amnestem cap 40mg</i>	137
<i>equivalent)</i>	41	<i>amoxapine tab 100 mg</i>	54
<i>amlodipine besylate tab 2.5 mg (base</i>		<i>amoxapine tab 150 mg</i>	54
<i>equivalent)</i>	41	<i>amoxapine tab 25 mg</i>	54
<i>amlodipine besylate tab 5 mg (base</i>		<i>amoxapine tab 50 mg</i>	54
<i>equivalent)</i>	41	<i>amoxicillin & k clavulanate chew tab 200-</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>28.5 mg</i>	19
<i>10-20 mg</i>	31	<i>amoxicillin & k clavulanate chew tab 400-</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>57 mg</i>	19
<i>10-40 mg</i>	31	<i>amoxicillin & k clavulanate for susp 200-</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>28.5 mg/5ml</i>	19
<i>2.5-10 mg</i>	31	<i>amoxicillin & k clavulanate for susp 250-</i>	
<i>amlodipine besylate-benazepril hcl cap 5-</i>		<i>62.5 mg/5ml</i>	19
<i>10 mg</i>	31	<i>amoxicillin & k clavulanate for susp 400-</i>	
<i>amlodipine besylate-benazepril hcl cap 5-</i>		<i>57 mg/5ml</i>	19
<i>20 mg</i>	31	<i>amoxicillin & k clavulanate for susp 600-</i>	
<i>amlodipine besylate-benazepril hcl cap 5-</i>		<i>42.9 mg/5ml</i>	19

<i>amoxicillin & k clavulanate tab 250-125 mg</i>	19	<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	65
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	19	<i>amphotericin b for iv soln 50 mg</i>	11
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	19	<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	20
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	19	<i>ampicillin & sulbactam sodium for inj 15 (10-5) gm</i>	20
<i>amoxicillin (trihydrate) cap 250 mg</i>	19	<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	20
<i>amoxicillin (trihydrate) cap 500 mg</i>	19	<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	20
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	19	<i>ampicillin cap 500 mg</i>	20
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	19	<i>ampicillin sodium for inj 1 gm</i>	20
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	19	<i>ampicillin sodium for inj 10 gm</i>	20
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	19	<i>ampicillin sodium for inj 125 mg</i>	20
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	19	<i>ampicillin sodium for inj 2 gm</i>	20
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	19	<i>ampicillin sodium for inj 250 mg</i>	20
<i>amoxicillin (trihydrate) tab 500 mg</i>	19	<i>ampicillin sodium for inj 500 mg</i>	20
<i>amoxicillin (trihydrate) tab 875 mg</i>	20	<i>ampicillin sodium for iv soln 1 gm</i>	20
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	65	<i>ampicillin sodium for iv soln 10 gm</i>	20
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	65	<i>ampicillin sodium for iv soln 2 gm</i>	20
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	65	<i>ANADROL-50 TAB 50MG</i>	73
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	65	<i>anagrelide hcl cap 0.5 mg</i>	101
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	65	<i>anagrelide hcl cap 1 mg</i>	101
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	65	<i>anastrozole tab 1 mg</i>	25
<i>amphetamine-dextroamphetamine tab 10 mg</i>	65	<i>ANDRODERM DIS 2MG/24HR</i>	73
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	65	<i>ANDRODERM DIS 4MG/24HR</i>	73
<i>amphetamine-dextroamphetamine tab 15 mg</i>	65	<i>animal shape chw</i>	117
<i>amphetamine-dextroamphetamine tab 20 mg</i>	66	<i>animal shape chw complete</i>	117
<i>amphetamine-dextroamphetamine tab 30 mg</i>	66	<i>ANIMAL SHAPE CHW IRON</i>	117
<i>amphetamine-dextroamphetamine tab 5 mg</i>	65	<i>ANORO ELLIPT AER 62.5-25</i>	128
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		<i>antacid fast sus relief</i>	89
		<i>antacid plus sus anti-gas</i>	89
		<i>antacid plus sus gas rel</i>	89
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		<i>antacid sus max st</i>	89
		<i>antacid sus mint crm</i>	89
		<i>antacid sus reg st</i>	89
		<i>antacid/sime sus ds</i>	89
		<i>anti-diarrhe cap 2mg</i>	90
		<i>anti-diarrhe tab 2mg</i>	90
		<i>antifungal aer 1%</i>	139
		<i>antifungal cre 1%</i>	139
		<i>anti-fungal cre 1%</i>	139
		<i>antifungal cre 2%</i>	139
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<i>aprepitant capsule 40 mg</i>	90	<i>ascorbic acid chew tab 500 mg</i>	118
<i>aprepitant capsule 80 mg</i>	90	<i>ascorbic acid tab 1000 mg</i>	118
<i>aprepitant capsule therapy pack 80 &</i> <i>125 mg</i>	91	<i>ascorbic acid tab 250 mg</i>	118
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APTIOM TAB 800MG.....	47	<i>aspirin low tab 81mg ec</i>	1
APTIVUS CAP 250MG.....	12	ASPIRIN SUP 600MG	1
APTIVUS SOL	12	<i>aspirin tab 325 mg</i>	1
AQUADEKS CHW.....	117	<i>aspirin tab 325mg</i>	1
<i>aquadeks dro</i>	117	<i>aspirin tab 325mg ec</i>	1
AQUASOL A INJ 50000/ML	117	<i>aspirin tab delayed release 325 mg</i>	1
<i>aqueous e dro 15/0.3ml</i>	117	<i>aspirin-dipyridamole cap er 12hr 25-200</i> <i>mg</i>	102
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ARALAST NP INJ 500MG	135	<i>atazanavir sulfate cap 200 mg (base</i> <i>equiv)</i>	12
<i>aranelle tab</i>	77	<i>atazanavir sulfate cap 300 mg (base</i> <i>equiv)</i>	12
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<i>aripiprazole oral solution 1 mg/ml</i>	60	<i>atenolol tab 100 mg</i>	39
<i>aripiprazole orally disintegrating tab 10</i> <i>mg</i>	60	<i>atenolol tab 25 mg</i>	39
<i>aripiprazole orally disintegrating tab 15</i> <i>mg</i>	60	<i>atenolol tab 50 mg</i>	39
<i>aripiprazole tab 10 mg</i>	60	<i>athlete foot cre 1%</i>	139
<i>aripiprazole tab 15 mg</i>	60	<i>athlete foot cre af</i>	139
<i>aripiprazole tab 2 mg</i>	60	<i>atomoxetine hcl cap 10 mg (base equiv)</i>	66
<i>aripiprazole tab 20 mg</i>	60	<i>atomoxetine hcl cap 100 mg (base</i> <i>equiv)</i>	66
<i>aripiprazole tab 30 mg</i>	60	<i>atomoxetine hcl cap 18 mg (base equiv)</i>	66
<i>aripiprazole tab 5 mg</i>	60	<i>atomoxetine hcl cap 25 mg (base equiv)</i>	66
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ARISTADA INJ 882MG/3	60		
ARISTADA INJ INITIO.....	60		
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<i>armodafinil tab 200 mg</i>	70		
<i>armodafinil tab 250 mg</i>	70		
<i>armodafinil tab 50 mg</i>	70		
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<i>atomoxetine hcl cap 80 mg (base equiv)</i>	66
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<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	37
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	37
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	37
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<i>atovaquone-proguanil hcl tab 250-100 mg</i>	11
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	11
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AYR SALINE KIT RINSE	135
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<i>azathioprine tab 50 mg</i>	105
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	129
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	129
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<i>azithromycin for susp 200 mg/5ml</i>	18
<i>azithromycin iv for soln 500 mg</i>	18
<i>azithromycin powd pack for susp 1 gm</i>	18
<i>azithromycin tab 250 mg</i>	18
<i>azithromycin tab 500 mg</i>	18
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<i>bacitracin oint 500 unit/gm</i>	138
<i>bacitracin ophth oint 500 unit/gm</i>	125
<i>bacitracin zinc oint 500 unit/gm</i>	138
<i>bacitracin-polymyxin b ophth oint</i>	125
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	125
<i>baclofen tab 10 mg</i>	70
<i>baclofen tab 20 mg</i>	70
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<i>banophen cap 50mg</i>	129
<i>banophen liq 12.5/5ml</i>	129
<i>banophen tab 25mg</i>	129
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BANZEL TAB 200MG	47
BANZEL TAB 400MG	47
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<i>benazepril hcl tab 20 mg</i>	32	<i>bethanechol chloride tab 10 mg</i>	97
<i>benazepril hcl tab 40 mg</i>	32	<i>bethanechol chloride tab 25 mg</i>	97
<i>benazepril hcl tab 5 mg</i>	32	<i>bethanechol chloride tab 5 mg</i>	97
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BENLYSTA INJ 200MG/ML	105	BEVESPI AER 9-4.8MCG	128
BENLYSTA INJ 400MG	105	<i>bexarotene cap 75 mg</i>	30
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<i>benzonatate cap 100 mg</i>	132	BICILLIN L-A INJ 1200000	20
<i>benzonatate cap 200 mg</i>	132	BICILLIN L-A INJ 2400000	20
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<i>betamethasone dipropionate augmented</i> <i>gel 0.05%</i>	140	<i>bismatrol sus 262/15ml</i>	90
<i>betamethasone dipropionate augmented</i> <i>lotion 0.05%</i>	140	BISMUTH POW SUBGALLA	90
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<i>betamethasone dipropionate lotion</i> <i>0.05%</i>	141	<i>bismuth subsalicylate chew tab 262 mg</i>	90
<i>betamethasone dipropionate oint 0.05%</i>	141	<i>bisoprolol & hydrochlorothiazide tab 10-</i> <i>6.25 mg</i>	39
<i>betamethasone valerate cream 0.1%</i> <i>(base equivalent)</i>	141	<i>bisoprolol & hydrochlorothiazide tab 2.5-</i> <i>6.25 mg</i>	39
<i>betamethasone valerate lotion 0.1%</i> <i>(base equivalent)</i>	141	<i>bisoprolol & hydrochlorothiazide tab 5-</i> <i>6.25 mg</i>	39
<i>betamethasone valerate oint 0.1% (base</i> <i>equivalent)</i>	141	<i>bisoprolol fumarate tab 10 mg</i>	40
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<i>bumetanide tab 1 mg</i>	43	BYSTOLIC TAB 10MG	40
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<i>mg/0.3ml (1:2000)</i>	135	<i>escitalopram oxalate soln 5 mg/5ml</i>	
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<i>eszopiclone tab 2 mg</i>	66
<i>eszopiclone tab 3 mg</i>	67
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<i>ethambutol hcl tab 400 mg</i>	15
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<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	78
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<i>etodolac cap 300 mg</i>	3
<i>etodolac tab 400 mg</i>	3
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<i>ezetimibe-simvastatin tab 10-40 mg</i>	38
<i>ezetimibe-simvastatin tab 10-80 mg</i>	38
<i>EZFE 200 CAP 200MG</i>	100
<i>EZFE FORTE CAP</i>	120
F	
<i>FABRAZYME INJ 35MG</i>	82
<i>FABRAZYME INJ 5MG</i>	82
<i>falmina tab</i>	78
<i>famciclovir tab 125 mg</i>	15
<i>famciclovir tab 250 mg</i>	15
<i>famciclovir tab 500 mg</i>	15
<i>famotidine for susp 40 mg/5ml</i>	92
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	92
<i>famotidine inj 20 mg/2ml</i>	92
<i>famotidine inj 200 mg/20ml</i>	92
<i>famotidine inj 40 mg/4ml</i>	92
<i>famotidine tab 20 mg</i>	92
<i>famotidine tab 40 mg</i>	92
<i>FANAPT PAK</i>	60
<i>FANAPT TAB 10MG</i>	61
<i>FANAPT TAB 12MG</i>	61
<i>FANAPT TAB 1MG</i>	61
<i>FANAPT TAB 2MG</i>	61
<i>FANAPT TAB 4MG</i>	61
<i>FANAPT TAB 6MG</i>	61
<i>FANAPT TAB 8MG</i>	61
<i>FARXIGA TAB 10MG</i>	74
<i>FARXIGA TAB 5MG</i>	74
<i>FARYDAK CAP 10MG</i>	24
<i>FARYDAK CAP 15MG</i>	24
<i>FARYDAK CAP 20MG</i>	24
<i>FASLODEX INJ 250/5ML</i>	25
<i>FAT EMULSION PLANT BASED IV EMULSION 20%</i>	108
<i>FATTYBLEND MIS</i>	114
<i>fayosim tab</i>	78
<i>FDC BLUE 1 POW</i>	114
<i>FDC BLUE 1 POW AL LAKE</i>	114
<i>FDC BLUE 2 POW</i>	114
<i>FDC GREEN #3 POW</i>	114
<i>FDC RED #3 POW</i>	114
<i>FDC RED #40 POW AL LAKE</i>	114
<i>FDC RED 40 POW</i>	114
<i>FDC YELLOW 5 POW</i>	114
<i>FDC YELLOW 5 POW AL LAKE</i>	114
<i>FDC YELLOW 6 POW</i>	114

FE SULFATE POW.....	100	<i>elemental fe)</i>	100
<i>felbamate susp 600 mg/5ml</i>	49	<i>ferrous gluconate tab 324 mg (37.5 mg</i>	
<i>felbamate tab 400 mg</i>	49	<i>elemental iron)</i>	100
<i>felbamate tab 600 mg</i>	49	FERROUS SULF SYP 300/5ML.....	100
<i>felodipine tab er 24hr 10 mg</i>	42	FERROUS SULF TAB 324MG EC.....	100
<i>felodipine tab er 24hr 2.5 mg</i>	42	<i>ferrous sulfate elixir 220 mg/5ml (44</i>	
<i>felodipine tab er 24hr 5 mg</i>	42	<i>mg/5ml elemental fe)</i>	100
<i>femynor tab 0.25-35</i>	78	<i>ferrous sulfate soln 75 mg/ml (15 mg/ml</i>	
<i>fenofibrate micronized cap 134 mg</i>	38	<i>elemental fe)</i>	101
<i>fenofibrate micronized cap 200 mg</i>	38	<i>ferrous sulfate tab 325 mg (65 mg</i>	
<i>fenofibrate micronized cap 67 mg</i>	38	<i>elemental fe)</i>	101
<i>fenofibrate tab 145 mg</i>	38	<i>ferrous sulfate tab ec 325 mg (65 mg fe</i>	
<i>fenofibrate tab 160 mg</i>	38	<i>equivalent)</i>	101
<i>fenofibrate tab 48 mg</i>	38	<i>ferrousul tab 325mg</i>	101
<i>fenofibrate tab 54 mg</i>	38	FETZIMA CAP 120MG.....	56
<i>fentanyl citrate lozenge on a handle 1200</i>		FETZIMA CAP 20MG.....	56
<i>mcg</i>	4	FETZIMA CAP 40MG.....	56
<i>fentanyl citrate lozenge on a handle 1600</i>		FETZIMA CAP 80MG.....	56
<i>mcg</i>	4	FETZIMA CAP TITRATIO.....	56
<i>fentanyl citrate lozenge on a handle 200</i>		FEVERALL INF SUP 80MG.....	1
<i>mcg</i>	4	<i>feverall sup 120mg</i>	1
<i>fentanyl citrate lozenge on a handle 400</i>		<i>feverall sup 325mg</i>	1
<i>mcg</i>	4	<i>feverall sup 650mg</i>	1
<i>fentanyl citrate lozenge on a handle 600</i>		<i>fexofenadine hcl tab 180 mg</i>	130
<i>mcg</i>	4	<i>fexofenadine hcl tab 60 mg</i>	130
<i>fentanyl citrate lozenge on a handle 800</i>		<i>fexofenadine tab 180mg</i>	130
<i>mcg</i>	4	<i>fexofenadine tab 60mg</i>	130
<i>fentanyl td patch 72hr 100 mcg/hr</i>	5	FIASP FLEX INJ TOUCH.....	73
<i>fentanyl td patch 72hr 12 mcg/hr</i>	4	FIASP INJ 100/ML.....	73
<i>fentanyl td patch 72hr 25 mcg/hr</i>	4	<i>finasteride tab 5 mg</i>	97
<i>fentanyl td patch 72hr 50 mcg/hr</i>	4	FIRAZYR INJ 30MG/3ML.....	102
<i>fentanyl td patch 72hr 75 mcg/hr</i>	5	<i>flac oil 0.01%</i>	147
FERAHEME INJ 510/17ML.....	100	FLAVORX LIQ.....	114
<i>ferate tab 27mg</i>	100	<i>flecainide acetate tab 100 mg</i>	36
FERGON TAB 27MG.....	100	<i>flecainide acetate tab 150 mg</i>	37
<i>ferosul elx 220/5ml</i>	100	<i>flecainide acetate tab 50 mg</i>	36
<i>ferosul tab 325mg</i>	100	FLOVENT DISK AER 100MCG.....	136
FERRETTS IPS SOL.....	100	FLOVENT DISK AER 250MCG.....	136
FERRETTS TAB 325MG.....	100	FLOVENT DISK AER 50MCG.....	136
<i>ferrex 150 cap 150mg</i>	100	FLOVENT HFA AER 110MCG.....	137
FERRIC POW SUBSULFA.....	143	FLOVENT HFA AER 220MCG.....	137
FERRIC SUBSU SOL.....	144	FLOVENT HFA AER 44MCG.....	137
FERRIMIN 150 TAB.....	100	<i>fluconazole for susp 10 mg/ml</i>	11
FERRLECIT INJ 12.5MG/M.....	100	<i>fluconazole for susp 40 mg/ml</i>	11
<i>ferrous fumarate tab 324 mg (106 mg</i>		<i>fluconazole in nacl 0.9% inj 200</i>	
<i>elemental fe)</i>	100	<i>mg/100ml</i>	11
FERROUS GLUC TAB 324MG.....	100	<i>fluconazole in nacl 0.9% inj 400</i>	
<i>ferrous gluconate tab 240 mg (27 mg</i>		<i>mg/200ml</i>	11

<i>fluconazole tab 100 mg</i>	11	<i>fluphenazine hcl tab 5 mg</i>	61
<i>fluconazole tab 150 mg</i>	11	<i>flurbiprofen sodium ophth soln 0.03%</i>	
<i>fluconazole tab 200 mg</i>	11		126
<i>fluconazole tab 50 mg</i>	11	<i>flurbiprofen tab 100 mg</i>	3
<i>flucytosine cap 250 mg</i>	11	<i>flurbiprofen tab 50 mg</i>	3
<i>flucytosine cap 500 mg</i>	11	<i>flutamide cap 125 mg</i>	25
<i>fludrocortisone acetate tab 0.1 mg</i>	83	<i>fluticasone propionate cream 0.05%</i> ..	141
<i>flunisolide nasal soln 25 mcg/act</i>		<i>fluticasone propionate nasal susp 50</i>	
<i>(0.025%)</i>	136	<i>mcg/act</i>	136
<i>fluocinolone acetonide (otic) oil 0.01%</i>		<i>fluticasone propionate oint 0.005%</i> ..	141
.....	147	<i>fluvoxamine maleate tab 100 mg</i>	47
<i>fluocinolone acetonide cream 0.01%</i> ..	141	<i>fluvoxamine maleate tab 25 mg</i>	47
<i>fluocinolone acetonide cream 0.025%</i>	141	<i>fluvoxamine maleate tab 50 mg</i>	47
<i>fluocinolone acetonide oil 0.01% (body</i>		FOLGARD TAB.....	120
<i>oil)</i>	141	<i>folic acid inj 5 mg/ml</i>	120
<i>fluocinolone acetonide oil 0.01% (scalp</i>		<i>folic acid tab 1 mg</i>	120
<i>oil)</i>	141	<i>folic acid tab 400 mcg</i>	120
<i>fluocinolone acetonide oint 0.025%</i> ..	141	<i>folic acid tab 400mcg</i>	120
<i>fluocinolone acetonide soln 0.01%</i>	141	<i>folic acid tab 800 mcg</i>	120
<i>fluocinonide cream 0.05%</i>	141	FOLITAB 500 TAB.....	101
<i>fluocinonide emulsified base cream</i>		<i>fondaparinux sodium subcutaneous inj</i>	
<i>0.05%</i>	141	<i>10 mg/0.8ml</i>	99
<i>fluocinonide gel 0.05%</i>	141	<i>fondaparinux sodium subcutaneous inj</i>	
<i>fluocinonide oint 0.05%</i>	141	<i>2.5 mg/0.5ml</i>	99
<i>fluocinonide soln 0.05%</i>	141	<i>fondaparinux sodium subcutaneous inj 5</i>	
<i>fluorometholone ophth susp 0.1%</i>	126	<i>mg/0.4ml</i>	99
<i>fluorouracil cream 5%</i>	144	<i>fondaparinux sodium subcutaneous inj</i>	
<i>fluorouracil iv soln 1 gm/20ml (50</i>		<i>7.5 mg/0.6ml</i>	99
<i>mg/ml)</i>	22	FORMALDEHYDE SOL 37%	144
<i>fluorouracil iv soln 2.5 gm/50ml (50</i>		FORTEO SOL 600/2.4	85
<i>mg/ml)</i>	22	<i>fosamprenavir calcium tab 700 mg (base</i>	
<i>fluorouracil iv soln 5 gm/100ml (50</i>		<i>equiv)</i>	12
<i>mg/ml)</i>	22	FOSFREE TAB	120
<i>fluorouracil iv soln 500 mg/10ml (50</i>		<i>fosinopril sodium & hydrochlorothiazide</i>	
<i>mg/ml)</i>	22	<i>tab 10-12.5 mg</i>	32
<i>fluorouracil soln 2%</i>	144	<i>fosinopril sodium & hydrochlorothiazide</i>	
<i>fluorouracil soln 5%</i>	144	<i>tab 20-12.5 mg</i>	32
<i>fluoxetine hcl cap 10 mg</i>	56	<i>fosinopril sodium tab 10 mg</i>	32
<i>fluoxetine hcl cap 20 mg</i>	56	<i>fosinopril sodium tab 20 mg</i>	32
<i>fluoxetine hcl cap 40 mg</i>	56	<i>fosinopril sodium tab 40 mg</i>	32
<i>fluoxetine hcl solution 20 mg/5ml</i>	56	FREAMINE HBC INJ 6.9%	108
<i>fluphenazine decanoate inj 25 mg/ml</i> ..	61	FREAMINE III INJ 10%.....	108
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	61	FREE & CLEAR SHA.....	144
<i>fluphenazine hcl inj 2.5 mg/ml</i>	61	FRUCTOSE GRA	114
<i>fluphenazine hcl oral conc 5 mg/ml</i>	61	FULLERS POW EARTH	144
<i>fluphenazine hcl tab 1 mg</i>	61	<i>fungoid-d cre 1%</i>	139
<i>fluphenazine hcl tab 10 mg</i>	61	<i>furosemide inj 10 mg/ml</i>	43
<i>fluphenazine hcl tab 2.5 mg</i>	61	<i>furosemide oral soln 10 mg/ml</i>	43

<i>furosemide oral soln 8 mg/ml</i>	43
<i>furosemide tab 20 mg</i>	43
<i>furosemide tab 40 mg</i>	43
<i>furosemide tab 80 mg</i>	43
FUSION CAP.....	101
FUZEON INJ 90MG	12
<i>fyavolv tab 0.5-2.5</i>	83
FYCOMPA SUS 0.5MG/ML.....	49
FYCOMPA TAB 10MG	49
FYCOMPA TAB 12MG	49
FYCOMPA TAB 2MG	49
FYCOMPA TAB 4MG	49
FYCOMPA TAB 6MG	49
FYCOMPA TAB 8MG	49

G

<i>gabapentin cap 100 mg</i>	50
<i>gabapentin cap 300 mg</i>	50
<i>gabapentin cap 400 mg</i>	50
<i>gabapentin oral soln 250 mg/5ml</i>	50
<i>gabapentin tab 600 mg</i>	50
<i>gabapentin tab 800 mg</i>	50
<i>galantamine hydrobromide cap er 24hr</i> <i>16 mg</i>	53
<i>galantamine hydrobromide cap er 24hr</i> <i>24 mg</i>	53
<i>galantamine hydrobromide cap er 24hr 8</i> <i>mg</i>	53
<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	53
<i>galantamine hydrobromide tab 12 mg</i> .	53
<i>galantamine hydrobromide tab 4 mg</i> ...	53
<i>galantamine hydrobromide tab 8 mg</i> ...	53
GAMASTAN S/D INJ.....	103
GAMMAGARD INJ 10GM/100	104
GAMMAGARD INJ 1GM/10ML	103
GAMMAGARD INJ 2.5GM/25	103
GAMMAGARD INJ 20GM/200	104
GAMMAGARD INJ 30GM/300	104
GAMMAGARD INJ 5GM/50ML	103
GAMMAGARD SD INJ 10GM HU	104
GAMMAGARD SD INJ 5GM HU.....	104
GAMMAKED INJ 10GM/100.....	104
GAMMAKED INJ 1GM/10ML	104
GAMMAKED INJ 2.5GM/25	104
GAMMAKED INJ 20GM/200.....	104
GAMMAKED INJ 5GM/50ML	104
GAMMAPLEX INJ 10%.....	104
GAMMAPLEX INJ 5%	104

GAMUNEX-C INJ 10GM/100	104
GAMUNEX-C INJ 1GM/10ML.....	104
GAMUNEX-C INJ 2.5GM/25	104
GAMUNEX-C INJ 20GM/200	104
GAMUNEX-C INJ 40/400ML.....	104
GAMUNEX-C INJ 5GM/50ML.....	104
<i>ganciclovir sodium for inj 500 mg</i>	15
GARDASIL 9 INJ.....	106
<i>gatifloxacin ophth soln 0.5%</i>	126
GATTEX KIT 5MG	95
GAUZE PADS 2	73
<i>gavilyte-c sol</i>	93
<i>gavilyte-g sol</i>	93
<i>gavilyte-n sol flav pk</i>	93
GELUSIL CHW.....	89
<i>gemcitabine hcl for inj 1 gm</i>	22
<i>gemcitabine hcl for inj 2 gm</i>	22
<i>gemcitabine hcl for inj 200 mg</i>	22
<i>gemcitabine hcl inj 1 gm/26.3ml (38</i> <i>mg/ml) (base equiv)</i>	22
<i>gemcitabine hcl inj 2 gm/52.6ml (38</i> <i>mg/ml) (base equiv)</i>	22
<i>gemcitabine hcl inj 200 mg/5.26ml (38</i> <i>mg/ml) (base equiv)</i>	22
<i>gemfibrozil tab 600 mg</i>	38
<i>generlac sol 10gm/15</i>	93
<i>gengraf cap 100mg</i>	105
<i>gengraf cap 25mg</i>	105
<i>gengraf sol 100mg/ml</i>	105
GENOTROPIN INJ 0.2MG	85
GENOTROPIN INJ 0.4MG	85
GENOTROPIN INJ 0.6MG	85
GENOTROPIN INJ 0.8MG	85
GENOTROPIN INJ 1.2MG	85
GENOTROPIN INJ 1.4MG	85
GENOTROPIN INJ 1.6MG	85
GENOTROPIN INJ 1.8MG	85
GENOTROPIN INJ 12MG	86
GENOTROPIN INJ 1MG.....	85
GENOTROPIN INJ 2MG.....	85
GENOTROPIN INJ 5MG.....	85
<i>gentak oin 0.3% op</i>	126
<i>gentamicin in saline inj 0.8 mg/ml</i>	8
<i>gentamicin in saline inj 1 mg/ml</i>	8
<i>gentamicin in saline inj 1.2 mg/ml</i>	8
<i>gentamicin in saline inj 1.6 mg/ml</i>	8
<i>gentamicin in saline inj 2 mg/ml</i>	8
<i>gentamicin sulfate cream 0.1%</i>	138

<i>gentamicin sulfate inj 10 mg/ml</i>	8	<i>glyburide tab 5 mg</i>	75
<i>gentamicin sulfate inj 40 mg/ml</i>	8	<i>glyburide-metformin tab 1.25-250 mg</i> ..	75
<i>gentamicin sulfate oint 0.1%</i>	138	<i>glyburide-metformin tab 2.5-500 mg</i> ..	75
<i>gentamicin sulfate ophth soln 0.3%</i> ..	126	<i>glyburide-metformin tab 5-500 mg</i>	75
<i>gentle laxat sup 10mg</i>	93	GLYCERIN LIQ	144
<i>gentle laxat tab 5mg ec</i>	93	<i>glycerin suppos 1 gm</i>	93
GENVOYA TAB	14	GLYCINE POW	97
GEODON INJ 20MG	61	GLYCOLIC ACD CRY	144
<i>geriaton liq</i>	120	GLYCOLIC ACD SOL 70%	144
GERIATRIC LIQ VITAMIN	120	<i>glycopyrrolate tab 1 mg</i>	92
GILENYA CAP 0.5MG	69	<i>glycopyrrolate tab 2 mg</i>	92
GILOTRIF TAB 20MG	28	<i>glydo gel 2%</i>	142
GILOTRIF TAB 30MG	28	<i>gnp all day tab allergy</i>	130
GILOTRIF TAB 40MG	28	<i>gnp allergy cap 25mg</i>	130
<i>glatiramer acetate soln prefilled syringe</i> <i>20 mg/ml</i>	69	<i>gnp allergy tab 180mg</i>	130
<i>glatiramer acetate soln prefilled syringe</i> <i>40 mg/ml</i>	70	<i>gnp allergy tab 25mg</i>	130
<i>glatopa inj 20mg/ml</i>	70	<i>gnp allergy tab 4mg</i>	130
<i>glatopa inj 40mg/ml</i>	70	<i>gnp antacid sus anti-gas</i>	89
GLEOSTINE CAP 100MG	22	<i>gnp aspirin tab 325mg ec</i>	1
GLEOSTINE CAP 10MG	22	<i>gnp b-100 tab</i>	120
GLEOSTINE CAP 40MG	22	<i>gnp b-50 tab balanced</i>	120
<i>glimepiride tab 1 mg</i>	74	<i>gnp bisa-lax tab 5mg ec</i>	93
<i>glimepiride tab 2 mg</i>	74	<i>gnp ca/mg/zn tab</i>	112
<i>glimepiride tab 4 mg</i>	74	<i>gnp ca/vit d chw minerals</i>	112
<i>glipizide tab 10 mg</i>	74	<i>gnp calcium tab 500/d</i>	112
<i>glipizide tab 5 mg</i>	74	<i>gnp calcium tab 600/d</i>	112
<i>glipizide tab er 24hr 10 mg</i>	74	<i>gnp calcium tab cit +d3</i>	112
<i>glipizide tab er 24hr 2.5 mg</i>	74	<i>gnp century tab</i>	120
<i>glipizide tab er 24hr 5 mg</i>	74	<i>gnp century tab cardio</i>	120
<i>glipizide xl tab 10mg</i>	75	GNP CENTURY TAB ENERGY	120
<i>glipizide xl tab 2.5mg</i>	74	<i>gnp century tab mature</i>	120
<i>glipizide xl tab 5mg</i>	74	<i>gnp century tab senior</i>	120
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	75	<i>gnp century tab ultimate</i>	120
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	75	<i>gnp co q10 cap 100mg</i>	114
<i>glipizide-metformin hcl tab 5-500 mg</i> ..	75	<i>gnp co q10 cap 60mg</i>	114
GLUCAGEN INJ HYPOKIT	85	<i>gnp cough dm sus 30mg/5ml</i>	132
GLUCAGON KIT 1MG	85	<i>gnp dayhist tab 1.34mg</i>	130
GLUCOSAMINE POW HCL	144	<i>gnp glycerin sup 1.2gm</i>	93
GLUCOSAMINE POW SULFATE	144	<i>gnp healthy tab eyes</i>	120
<i>glyburide micronized tab 1.5 mg</i>	75	<i>gnp iron tab 45mg</i>	101
<i>glyburide micronized tab 3 mg</i>	75	<i>gnp iron tab 65mg</i>	101
<i>glyburide micronized tab 6 mg</i>	75	<i>gnp k-pec sus 262/15ml</i>	90
<i>glyburide tab 1.25 mg</i>	75	<i>gnp laxative sup 10mg</i>	93
<i>glyburide tab 2.5 mg</i>	75	<i>gnp laxative tab 25mg</i>	93
		<i>gnp laxative tab 5mg ec</i>	93
		<i>gnp lice kit</i>	146
		<i>gnp little chw ones</i>	120
		<i>gnp magnesi u tab 250mg</i>	112

<i>gnp niacin tab 250mg tr</i>	120
<i>gnp nicotine gum 2mg mint</i>	71
<i>gnp nicotine gum 2mg orig</i>	71
<i>gnp nicotine gum 4mg mint</i>	71
<i>gnp nicotine loz 2mg mint</i>	71
<i>gnp nicotine loz 4mg mint</i>	71
<i>gnp nicotine loz mini 2mg</i>	71
<i>gnp one dail tab maximum</i>	120
<i>gnp opti-vit tab</i>	120
<i>gnp pediatri sol electrol</i>	107
GNP PRENATAL TAB 28-0.8MG	120
<i>gnp suphedrn liq 15mg/5ml</i>	132
<i>gnp tussin liq dm</i>	132
<i>gnp tussin liq dm cough</i>	132
<i>gnp tussin liq dm max</i>	133
<i>gnp tussin syp cf</i>	133
<i>gnp vit b1 tab 100mg</i>	120
<i>gnp vit b-12 tab 1000 cr</i>	120
<i>gnp vit b-12 tab 500mcg</i>	120
<i>gnp vit b-6 tab 100mg</i>	120
<i>gnp vit c chw 500mg</i>	120
<i>gnp vit c loz 60mg</i>	120
<i>gnp vit c tab 1000mg</i>	120
<i>gnp vit c tab 250mg</i>	120
<i>gnp vit d tab 1000unit</i>	120
<i>gnp vit e cap 1000unit</i>	120
<i>gnp vit e cap 200unit</i>	120
<i>gnp vit e cap 400unit</i>	120
<i>gnp zinc tab 50mg</i>	112
<i>gnp zoochews chw gummies</i>	120
GOLYTELY SOL	94
GOWEY TIN TINCTURE	114
<i>granisetron hcl inj 1 mg/ml</i>	91
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	91
<i>granisetron hcl tab 1 mg</i>	91
GRAPE LIQ FLAVOR	114
GRAPE SEED OIL	144
GRAPE SYP	114
GREEN TEA EX LIQ 90%	144
<i>griseofulvin microsize susp 125 mg/5ml</i>	11
<i>griseofulvin microsize tab 500 mg</i>	11
<i>griseofulvin ultramicrosize tab 125 mg</i> 11	
<i>griseofulvin ultramicrosize tab 250 mg</i> 11	
<i>guaiaatuss ac syp 100-10/5</i>	133
<i>guaifenesin liquid 100 mg/5ml</i>	133
<i>guaifenesin syp 100-10/5</i>	133

<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	133
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	66
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	66
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	66
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	66
H	
<i>h2q cap 100mg</i>	114
HAEGARDA INJ 2000UNIT	102
HAEGARDA INJ 3000UNIT	102
<i>hailey 24 tab fe</i>	78
<i>halobetasol propionate cream 0.05%</i> 141	
<i>halobetasol propionate oint 0.05% ...</i> 141	
<i>haloperidol decanoate im soln 100 mg/ml</i>	61
<i>haloperidol decanoate im soln 50 mg/ml</i>	61
<i>haloperidol lactate inj 5 mg/ml</i>	61
<i>haloperidol lactate oral conc 2 mg/ml</i> . 61	
<i>haloperidol tab 0.5 mg</i>	61
<i>haloperidol tab 1 mg</i>	61
<i>haloperidol tab 10 mg</i>	61
<i>haloperidol tab 2 mg</i>	61
<i>haloperidol tab 20 mg</i>	61
<i>haloperidol tab 5 mg</i>	61
HARVONI TAB 90-400MG	15
HAVRIX INJ 1440UNIT	106
HAVRIX INJ 720UNIT	106
<i>healthy eyes cap supervis</i>	120
<i>healthy eyes tab</i>	121
<i>heather tab 0.35mg</i>	78
HEMOCYTE TAB 324MG	101
HEP SOD/NACL INJ 25000UNT	99
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	99
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	99
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	99
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	99
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	99
<i>heparin sodium (porcine)-dextrose iv sol</i>	

20000 unit/500ml-5%	99	hydralazine hcl tab 100 mg	44
heparin sodium (porcine)-dextrose iv sol		hydralazine hcl tab 25 mg	44
25000 unit/500ml-5%	99	hydralazine hcl tab 50 mg	44
HEPARIN/NACL INJ 25000UNT	99	HYDROCHL ACD LIQ 37%	144
hepatamine sol 8%	108	hydrochlorothiazide cap 12.5 mg	43
HERCEP HYLEC SOL 60-10000	24	hydrochlorothiazide tab 12.5 mg	43
HERCEPTIN INJ 150MG	24	hydrochlorothiazide tab 25 mg	44
HERCEPTIN INJ 440MG	24	hydrochlorothiazide tab 50 mg	44
HETLIOZ CAP 20MG	67	hydrocodone w/ homatropine syrup 5-	
HIBERIX SOL 10MCG	106	1.5 mg/5ml	133
hm allergy tab 25mg	130	hydrocodone w/ homatropine tab 5-1.5	
hm allergy tab 4mg	130	mg	133
hm antacid sus anti-gas	89	hydrocodone-acetaminophen soln 7.5-	
hm aspirin tab 325mg	1	325 mg/15ml	5
hm coq10 cap 100mg	114	hydrocodone-acetaminophen tab 10-325	
hm coq10 cap 50mg	114	mg	5
hm cough dm sus 30mg/5ml	133	hydrocodone-acetaminophen tab 5-325	
hm epsom gra salt	94	mg	5
hm iron tab 65mg	101	hydrocodone-acetaminophen tab 7.5-325	
hm niacin tab 250mg	121	mg	5
hm nicotine dis 14mg/24h	71	hydrocodone-ibuprofen tab 7.5-200 mg	5
hm nicotine dis 21mg/24h	71	hydrocortisone butyrate cream 0.1%	141
hm nicotine gum 2mg mint	71	hydrocortisone butyrate oint 0.1% ...	141
hm nicotine gum 4mg mint	71	hydrocortisone cream 1%	141
hm nicotine loz 2mg mint	71	hydrocortisone cream 2.5%	141
hm nicotine loz 4mg mint	71	hydrocortisone enema 100 mg/60ml ..	92
hm triple oin antibiot	138	hydrocortisone lotion 2.5%	141
hm tussin liq adlt dm	133	hydrocortisone oint 2.5%	141
hm vit b1 tab 100mg	121	hydrocortisone rectal cream 2.5%	144
hm vitamin e cap 1000unit	121	hydrocortisone tab 10 mg	83
hm vitamin e cap 200unit	121	hydrocortisone tab 20 mg	83
HRT BASE CRE	114	hydrocortisone tab 5 mg	83
HUMIRA INJ 10/0.1ML	102	hydromet syp 5-1.5/5	133
HUMIRA INJ 10MG/0.2	102	hydromorphone hcl liqd 1 mg/ml	5
HUMIRA INJ 20/0.2ML	102	hydromorphone hcl preservative free (pf)	
HUMIRA INJ 40/0.4ML	103	inj 10 mg/ml	5
HUMIRA KIT 20MG/0.4	103	hydromorphone hcl tab 2 mg	5
HUMIRA KIT 40MG/0.8	103	hydromorphone hcl tab 4 mg	5
HUMIRA PEDIA INJ CROHNS	103	hydromorphone hcl tab 8 mg	5
HUMIRA PEN INJ 40/0.4ML	103	HYDROPHILIC OIN	114
HUMIRA PEN INJ 40MG/0.8	103	HYDROUS CRE EMULSIFI	114
HUMIRA PEN INJ CD/UC/HS	103	hydroxocobalamin acetate inj 1000	
HUMIRA PEN INJ PS/UV	103	mcg/ml (base equivalent)	121
HUMIRA PEN KIT CD/UC/HS	103	hydroxychloroquine sulfate tab 200 mg	
HUMIRA PEN KIT PS/UV	103		103
HUMULIN R INJ U-500	73	hydroxyurea cap 500 mg	30
hydralazine hcl inj 20 mg/ml	44	hydroxyzine hcl im soln 25 mg/ml	130
hydralazine hcl tab 10 mg	44	hydroxyzine hcl im soln 50 mg/ml	130

<i>hydroxyzine hcl syrup 10 mg/5ml</i>	130
<i>hydroxyzine hcl tab 10 mg</i>	130
<i>hydroxyzine hcl tab 25 mg</i>	130
<i>hydroxyzine hcl tab 50 mg</i>	130
<i>hydroxyzine pamoate cap 25 mg</i>	130
<i>hydroxyzine pamoate cap 50 mg</i>	130
HYSINGLA ER TAB 100 MG.....	5
HYSINGLA ER TAB 120 MG.....	5
HYSINGLA ER TAB 20 MG.....	5
HYSINGLA ER TAB 30 MG.....	5
HYSINGLA ER TAB 40 MG.....	5
HYSINGLA ER TAB 60 MG.....	5
HYSINGLA ER TAB 80 MG.....	5

I

<i>ibandronate sodium tab 150 mg (base equivalent)</i>	77
IBRANCE CAP 100MG	24
IBRANCE CAP 125MG	24
IBRANCE CAP 75MG	24
<i>ibuprofen dro 50/1.25</i>	3
<i>ibuprofen ib chw 100mg</i>	3
<i>ibuprofen jr chw 100mg</i>	3
<i>ibuprofen sus 100/5ml</i>	3
<i>ibuprofen susp 100 mg/5ml</i>	3
<i>ibuprofen tab 400 mg</i>	3
<i>ibuprofen tab 600 mg</i>	3
<i>ibuprofen tab 800 mg</i>	3
ICAPS AREDS TAB FORMULA	121
<i>icaps cap</i>	121
<i>icaps lutein cap /omega-3</i>	121
ICAPS LUTEIN TAB ZEAXANTH.....	121
<i>icaps mv tab</i>	121
ICAPS PLUS TAB	121
ICAR PEDS SUS GRAPE.....	121
ICAR-C TAB.....	121
ICHTHAMMOL POW	144
ICLUSIG TAB 15MG.....	28
ICLUSIG TAB 45MG.....	28
IDHIFA TAB 100MG.....	24
IDHIFA TAB 50MG.....	24
<i>iferex 150 cap</i>	101
ILEVRO DRO 0.3% OP	126
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	28
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	28
IMBRUVICA CAP 140MG.....	28
IMBRUVICA CAP 70MG	28

IMBRUVICA TAB 140MG	28
IMBRUVICA TAB 280MG	28
IMBRUVICA TAB 420MG	28
IMBRUVICA TAB 560MG	28
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	9
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	9
<i>imipramine hcl tab 10 mg</i>	56
<i>imipramine hcl tab 25 mg</i>	56
<i>imipramine hcl tab 50 mg</i>	56
<i>imiquimod cream 5%</i>	144
IMOVAX RABIE INJ 2.5/ML	106
<i>incassia tab 0.35mg</i>	79
INCRELEX INJ 40MG/4ML	86
INCRUSE ELPT INH 62.5MCG	128
<i>indapamide tab 1.25 mg</i>	44
<i>indapamide tab 2.5 mg</i>	44
INDOLE-3- POW CARBINOL	144
INFANRIX INJ	106
INFUVITE INJ.....	121
INFUVITE INJ ADULT	121
INFUVITE INJ PEDIATRI	121
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INSULIN SAFETY NEEDLES	73
INSULIN SYRINGE.....	73
INTEGRA CAP	101
INTELENCE TAB 100MG	12
INTELENCE TAB 200MG	12
INTELENCE TAB 25MG	12
INTRALIPID INJ 30%	108
INTRON A INJ 10MU	105
INTRON A INJ 18MU	105
INTRON A INJ 25MU	105
INTRON A INJ 50MU	105
<i>introvale tab</i>	79
INVEGA SUST INJ 117/0.75.....	61
INVEGA SUST INJ 156MG/ML.....	61
INVEGA SUST INJ 234/1.5	62
INVEGA SUST INJ 39/0.25	61
INVEGA SUST INJ 78/0.5ML	61
INVEGA TRINZ INJ 273MG.....	62
INVEGA TRINZ INJ 410MG.....	62
INVEGA TRINZ INJ 546MG.....	62
INVEGA TRINZ INJ 819MG.....	62

INVIRASE TAB 500MG	12	<i>mg</i>	45
IODINE CRY RESUBLIM.....	144	<i>isosorbide mononitrate tab er 24hr 30</i>	
IONOSOL-MB INJ D5W	109	<i>mg</i>	45
IPOL INJ INACTIVE.....	106	<i>isosorbide mononitrate tab er 24hr 60</i>	
<i>ipratropium bromide inhal soln 0.02%</i>		<i>mg</i>	45
.....	128	<i>isotretinoin cap 10 mg</i>	138
<i>ipratropium bromide nasal soln 0.03%</i>		<i>isotretinoin cap 20 mg</i>	138
<i>(21 mcg/spray)</i>	128	<i>isotretinoin cap 30 mg</i>	138
<i>ipratropium bromide nasal soln 0.06%</i>		<i>isotretinoin cap 40 mg</i>	138
<i>(42 mcg/spray)</i>	128	<i>isradipine cap 2.5 mg</i>	42
<i>ipratropium-albuterol nebu soln 0.5-</i>		<i>isradipine cap 5 mg</i>	42
<i>2.5(3) mg/3ml</i>	128	<i>itraconazole cap 100 mg</i>	11
<i>irbesartan tab 150 mg</i>	36	<i>ivermectin tab 3 mg</i>	9
<i>irbesartan tab 300 mg</i>	36	<i>i-vite prote tab</i>	121
<i>irbesartan tab 75 mg</i>	36	<i>i-vite tab</i>	121
<i>irbesartan-hydrochlorothiazide tab 150-</i>		IXIARO INJ.....	106
<i>12.5 mg</i>	34	J	
<i>irbesartan-hydrochlorothiazide tab 300-</i>		JADENU SPRKL GRA 180MG.....	77
<i>12.5 mg</i>	34	JADENU SPRKL GRA 360MG.....	77
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<i>irinotecan hcl inj 100 mg/5ml (20</i>		JADENU TAB 180MG	77
<i>mg/ml)</i>	31	JADENU TAB 360MG	77
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>		JADENU TAB 90MG.....	77
.....	31	JAKAFI TAB 10MG	28
<i>irinotecan hcl inj 500 mg/25ml (20</i>		JAKAFI TAB 15MG	28
<i>mg/ml)</i>	31	JAKAFI TAB 20MG	28
<i>iron 100 tab plus</i>	101	JAKAFI TAB 25MG	28
<i>iron 100/c tab 100-250</i>	101	JAKAFI TAB 5MG	28
ISENTRESS CHW 100MG.....	12	<i>jantoven tab 10mg</i>	99
ISENTRESS CHW 25MG	12	<i>jantoven tab 1mg</i>	99
ISENTRESS HD TAB 600MG.....	12	<i>jantoven tab 2.5mg</i>	99
ISENTRESS POW 100MG.....	12	<i>jantoven tab 2mg</i>	99
ISENTRESS TAB 400MG.....	12	<i>jantoven tab 3mg</i>	99
<i>isibloom tab</i>	79	<i>jantoven tab 4mg</i>	99
ISOLYTE-P INJ /D5W	109	<i>jantoven tab 5mg</i>	99
ISOLYTE-S INJ.....	109	<i>jantoven tab 6mg</i>	99
<i>isoniazid syrup 50 mg/5ml</i>	15	<i>jantoven tab 7.5mg</i>	99
<i>isoniazid tab 100 mg</i>	15	JANUMET TAB 50-1000	75
<i>isoniazid tab 300 mg</i>	15	JANUMET TAB 50-500MG	75
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<i>isosorbide dinitrate tab 10 mg</i>	45	JANUMET XR TAB 50-1000	75
<i>isosorbide dinitrate tab 20 mg</i>	45	JANUMET XR TAB 50-500MG.....	75
<i>isosorbide dinitrate tab 30 mg</i>	45	JANUVIA TAB 100MG	75
<i>isosorbide dinitrate tab 5 mg</i>	45	JANUVIA TAB 25MG.....	75
<i>isosorbide dinitrate tab er 40 mg</i>	45	JANUVIA TAB 50MG.....	75
<i>isosorbide mononitrate tab 10 mg</i>	45	JARDIANCE TAB 10MG	75
<i>isosorbide mononitrate tab 20 mg</i>	45	JARDIANCE TAB 25MG	75
<i>isosorbide mononitrate tab er 24hr 120</i>		<i>jasmiel tab 3-0.02mg</i>	79

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JENTADUETO TAB XR	76
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<i>jinteli tab 1mg-5mcg</i>	83
<i>jock itch aer 1%</i>	139
<i>jolivette tab 0.35mg</i>	79
<i>juleber tab</i>	79
JULUCA TAB 50-25MG	14
<i>junel 1.5/30 tab</i>	79
<i>junel 1/20 tab</i>	79
<i>junel fe 24 tab 1/20</i>	79
<i>junel fe tab 1.5/30</i>	79
<i>junel fe tab 1/20</i>	79
JUXTAPID CAP 10MG	38
JUXTAPID CAP 20MG	38
JUXTAPID CAP 30MG	38
JUXTAPID CAP 40MG	39
JUXTAPID CAP 5MG	38
JUXTAPID CAP 60MG	39
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KADCYLA INJ 100MG	24
KADCYLA INJ 160MG	24
<i>kaitlib fe chw</i>	79
KALETRA TAB 100-25MG	14
KALETRA TAB 200-50MG	14
KALYDECO PAK 25MG	135
KALYDECO PAK 50MG	135
KALYDECO PAK 75MG	135
KALYDECO TAB 150MG	135
KAOLIN POW COLLOID	90
<i>kao-tin sus 262/15ml</i>	90
KARAYA GUM	114
<i>kariva tab 28 day</i>	79
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	109
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	109
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.33% inj</i>	109
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	109
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	109
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	109

<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	109
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	109
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	109
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	109
KCL/D5W/NACL INJ 0.15/0.2	110
KCL/D5W/NACL INJ 0.3/0.9%	109
<i>kelnor 1/50 tab</i>	79
<i>kelnor tab 1/35</i>	79
<i>ketoconazole cream 2%</i>	139
<i>ketoconazole shampoo 2%</i>	140
<i>ketoconazole tab 200 mg</i>	11
KETO-DIASTIX TES	86
<i>ketorolac tromethamine ophth soln 0.4%</i>	126
<i>ketorolac tromethamine ophth soln 0.5%</i>	126
KEYTRUDA INJ 100MG/4M	24
KINRIX INJ	106
KISQALI 200 PAK FEMARA	24
KISQALI 400 PAK FEMARA	24
KISQALI 600 PAK FEMARA	24
KISQALI TAB 200DOSE	24
KISQALI TAB 400DOSE	24
KISQALI TAB 600DOSE	24
<i>klor-con 10 tab 10meq er</i>	107
<i>klor-con 8 tab 8meq er</i>	107
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KORLYM TAB 300MG	86
<i>kurvelo tab 0.15/30</i>	79
KUVAN POW 100MG	82
KUVAN POW 500MG	82
KUVAN TAB 100MG	82
L	
<i>labetalol hcl tab 100 mg</i>	40
<i>labetalol hcl tab 200 mg</i>	40
<i>labetalol hcl tab 300 mg</i>	40
LAC-HYDRIN LOT 12%	144
<i>lactated ringer's solution</i>	110
<i>lactic acid (ammonium lactate) cream 12%</i>	144
<i>lactic acid (ammonium lactate) lotion 12%</i>	144
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<i>lactulose (encephalopathy) solution 10</i>		LENVIMA CAP 10 MG	28
<i>gm/15ml</i>	94	LENVIMA CAP 12MG	28
<i>lactulose solution 10 gm/15ml</i>	94	LENVIMA CAP 14 MG	28
<i>lamivudine oral soln 10 mg/ml</i>	12	LENVIMA CAP 18 MG	28
<i>lamivudine tab 100 mg (hbv)</i>	15	LENVIMA CAP 20 MG	28
<i>lamivudine tab 150 mg</i>	12	LENVIMA CAP 24 MG	28
<i>lamivudine tab 300 mg</i>	13	LENVIMA CAP 4MG	28
<i>lamivudine-zidovudine tab 150-300 mg</i>		LENVIMA CAP 8 MG	28
.....	14	<i>lessina tab</i>	79
<i>lamotrigine tab 100 mg</i>	50	<i>letrozole tab 2.5 mg</i>	25
<i>lamotrigine tab 150 mg</i>	50	<i>leucovorin calcium for inj 100 mg</i>	30
<i>lamotrigine tab 200 mg</i>	50	<i>leucovorin calcium for inj 200 mg</i>	30
<i>lamotrigine tab 25 mg</i>	50	<i>leucovorin calcium for inj 350 mg</i>	30
<i>lamotrigine tab chewable dispersible 25</i>		<i>leucovorin calcium for inj 50 mg</i>	30
<i>mg</i>	50	<i>leucovorin calcium for inj 500 mg</i>	30
<i>lamotrigine tab chewable dispersible 5</i>		<i>leucovorin calcium inj 500 mg/50ml (10</i>	
<i>mg</i>	50	<i>mg/ml)</i>	30
<i>lamotrigine tab er 24hr 100 mg</i>	50	<i>leucovorin calcium tab 10 mg</i>	30
<i>lamotrigine tab er 24hr 200 mg</i>	50	<i>leucovorin calcium tab 15 mg</i>	31
<i>lamotrigine tab er 24hr 25 mg</i>	50	<i>leucovorin calcium tab 25 mg</i>	31
<i>lamotrigine tab er 24hr 250 mg</i>	50	<i>leucovorin calcium tab 5 mg</i>	30
<i>lamotrigine tab er 24hr 300 mg</i>	50	LEUKERAN TAB 2MG.....	22
<i>lamotrigine tab er 24hr 50 mg</i>	50	<i>leuprolide acetate inj kit 5 mg/ml</i>	25
<i>lansoprazole cap delayed release 15 mg</i>		<i>levalbuterol hcl soln nebu 0.31 mg/3ml</i>	
.....	96	<i>(base equiv)</i>	131
<i>lansoprazole cap delayed release 30 mg</i>		<i>levalbuterol hcl soln nebu 0.63 mg/3ml</i>	
.....	96	<i>(base equiv)</i>	131
L-ARGININE POW.....	115	<i>levalbuterol hcl soln nebu 1.25 mg/3ml</i>	
<i>larin fe tab 1.5/30</i>	79	<i>(base equiv)</i>	131
<i>larin fe tab 1/20</i>	79	<i>levalbuterol hcl soln nebu conc 1.25</i>	
<i>larin tab 1.5/30</i>	79	<i>mg/0.5ml (base equiv)</i>	131
<i>larin tab 1/20</i>	79	<i>levalbuterol tartrate inhal aerosol 45</i>	
LASTACFT SOL 0.25%	127	<i>mcg/act (base equiv)</i>	131
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LATUDA TAB 40MG	62	<i>1000 mg/100ml</i>	50
LATUDA TAB 60MG	62	<i>levetiracetam in sodium chloride iv soln</i>	
LATUDA TAB 80MG	62	<i>1500 mg/100ml</i>	50
<i>laxative sup 10mg</i>	94	<i>levetiracetam in sodium chloride iv soln</i>	
<i>laxative tab 25mg</i>	94	<i>500 mg/100ml</i>	50
<i>layolis fe chw</i>	79	<i>levetiracetam inj 500 mg/5ml (100</i>	
L-CITRULLINE POW	144	<i>mg/ml)</i>	50
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LECITHIN GRA.....	115	<i>levetiracetam tab 1000 mg</i>	50
<i>leflunomide tab 10 mg</i>	103	<i>levetiracetam tab 250 mg</i>	50

<i>levetiracetam tab 500 mg</i>	50	<i>levo-t tab 50mcg</i>	87
<i>levetiracetam tab 750 mg</i>	50	<i>levo-t tab 75mcg</i>	87
<i>levetiracetam tab er 24hr 500 mg</i>	50	<i>levo-t tab 88mcg</i>	87
<i>levetiracetam tab er 24hr 750 mg</i>	50	<i>levothyroxine sodium tab 100 mcg</i>	87
<i>levobunolol hcl ophth soln 0.5%</i>	127	<i>levothyroxine sodium tab 112 mcg</i>	87
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	82	<i>levothyroxine sodium tab 125 mcg</i>	87
<i>levocarnitine tab 330 mg</i>	82	<i>levothyroxine sodium tab 137 mcg</i>	87
<i>levocetirizine dihydrochloride soln 2.5</i> <i>mg/5ml (0.5 mg/ml)</i>	130	<i>levothyroxine sodium tab 150 mcg</i>	87
<i>levocetirizine dihydrochloride tab 5 mg</i>	130	<i>levothyroxine sodium tab 175 mcg</i>	88
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	19	<i>levothyroxine sodium tab 200 mcg</i>	88
<i>levofloxacin in d5w iv soln 500</i> <i>mg/100ml</i>	19	<i>levothyroxine sodium tab 25 mcg</i>	87
<i>levofloxacin in d5w iv soln 750</i> <i>mg/150ml</i>	19	<i>levothyroxine sodium tab 300 mcg</i>	88
<i>levofloxacin iv soln 25 mg/ml</i>	19	<i>levothyroxine sodium tab 50 mcg</i>	87
<i>levofloxacin oral soln 25 mg/ml</i>	19	<i>levothyroxine sodium tab 75 mcg</i>	87
<i>levofloxacin tab 250 mg</i>	19	<i>levothyroxine sodium tab 88 mcg</i>	87
<i>levofloxacin tab 500 mg</i>	19	<i>levoxyl tab 100mcg</i>	88
<i>levofloxacin tab 750 mg</i>	19	<i>levoxyl tab 112mcg</i>	88
<i>levonest tab</i>	79	<i>levoxyl tab 125mcg</i>	88
<i>levonor-eth est tab 0.15-</i> <i>0.02/0.025/0.03 mg &eth est 0.01 mg</i> 79		<i>levoxyl tab 137mcg</i>	88
<i>levonorgestrel & ethinyl estradiol (91-</i> <i>day) tab 0.15-0.03 mg</i>	79	<i>levoxyl tab 150mcg</i>	88
<i>levonorgestrel & ethinyl estradiol tab 0.1</i> <i>mg-20 mcg</i>	79	<i>levoxyl tab 175mcg</i>	88
<i>levonorgestrel & ethinyl estradiol tab</i> <i>0.15 mg-30 mcg</i>	79	<i>levoxyl tab 200mcg</i>	88
<i>levonorgestrel-eth estra tab 0.05-</i> <i>30/0.075-40/0.125-30mg-mcg</i>	79	<i>levoxyl tab 25mcg</i>	88
<i>levonorg-eth est tab 0.1-0.02mg(84) &</i> <i>eth est tab 0.01mg(7)</i>	79	<i>levoxyl tab 50mcg</i>	88
<i>levonorg-eth est tab 0.15-0.03mg(84) &</i> <i>eth est tab 0.01mg(7)</i>	79	<i>levoxyl tab 75mcg</i>	88
<i>levora-28 tab 0.15/30</i>	79	<i>levoxyl tab 88mcg</i>	88
<i>levo-t tab 100mcg</i>	87	<i>LEXIVA SUS 50MG/ML</i>	13
<i>levo-t tab 112mcg</i>	87	<i>L-GLUTAMINE POW</i>	115
<i>levo-t tab 125mcg</i>	87	<i>L-GLUTATHION CRY</i>	115
<i>levo-t tab 137mcg</i>	87	<i>lice killing sha</i>	147
<i>levo-t tab 150mcg</i>	87	<i>lice killing sha 0.33-4%</i>	147
<i>levo-t tab 175mcg</i>	87	<i>lice treatmt lot 1%</i>	147
<i>levo-t tab 200 mcg</i>	87	<i>lice treatmt sha 0.33-4%</i>	147
<i>levo-t tab 25mcg</i>	87	<i>lice trtmnt liq</i>	147
<i>levo-t tab 300 mcg</i>	87	<i>lice trtmnt liq 1%</i>	147
		<i>licide sha 0.33-4%</i>	147
		<i>lidocaine hcl local inj 0.5%</i>	7
		<i>lidocaine hcl local inj 1%</i>	7
		<i>lidocaine hcl local inj 2%</i>	7
		<i>lidocaine hcl local preservative free (pf)</i> <i>inj 0.5%</i>	7
		<i>lidocaine hcl local preservative free (pf)</i> <i>inj 1%</i>	7
		<i>lidocaine hcl local preservative free (pf)</i> <i>inj 1.5%</i>	7
		<i>lidocaine hcl soln 4%</i>	142
		<i>lidocaine hcl urethral/mucosal gel 2%</i>	142
		<i>lidocaine hcl viscous soln 2%</i>	147

<i>lidocaine oint 5%</i>	142	<i>loperamide hcl cap 2 mg</i>	95
<i>lidocaine patch 5%</i>	142	<i>lopinavir-ritonavir soln 400-100 mg/5ml</i> <i>(80-20 mg/ml)</i>	14
<i>lidocaine-prilocaine cream 2.5-2.5%</i> .	142	<i>loratadine sol 5mg/5ml</i>	130
<i>linezolid for susp 100 mg/5ml</i>	9	<i>loratadine syp 5mg/5ml</i>	130
<i>linezolid in sodium chloride iv soln 600</i> <i>mg/300ml-0.9%</i>	9	<i>loratadine tab 10 mg</i>	130
<i>linezolid iv soln 600 mg/300ml (2</i> <i>mg/ml)</i>	9	<i>loratadine tab 10mg</i>	130
<i>linezolid tab 600 mg</i>	9	<i>lorata-dine tab d 24hr</i>	133
LINZESS CAP 145MCG	95	<i>loratadine-d tab 10-240mg</i>	133
LINZESS CAP 290MCG	95	<i>loratadine-d tab 5-120mg</i>	133
LINZESS CAP 72MCG	95	<i>lorazepam conc 2 mg/ml</i>	47
<i>liothyronine sodium tab 25 mcg</i>	88	<i>lorazepam inj 2 mg/ml</i>	47
<i>liothyronine sodium tab 5 mcg</i>	88	<i>lorazepam inj 4 mg/ml</i>	47
<i>liothyronine sodium tab 50 mcg</i>	88	<i>lorazepam tab 0.5 mg</i>	47
LIP BALM OIN BASE	115	<i>lorazepam tab 1 mg</i>	47
LIP BALM OIN NATURAL.....	115	<i>lorazepam tab 2 mg</i>	47
LIPOBASE CRE.....	115	LORBRENA TAB 100MG	28
LIPOIC ACID POW	144	LORBRENA TAB 25MG	28
LIPOIL OIL	115	LORTUSS EX LIQ.....	133
LIPOVAN BASE CRE.....	115, 144	<i>loryna tab 3-0.02mg</i>	79
<i>lisinopril & hydrochlorothiazide tab 10-</i> <i>12.5 mg</i>	32	<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-12.5 mg</i>	35
<i>lisinopril & hydrochlorothiazide tab 20-</i> <i>12.5 mg</i>	32	<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-25 mg</i>	35
<i>lisinopril & hydrochlorothiazide tab 20-25</i> <i>mg</i>	32	<i>losartan potassium & hydrochlorothiazide</i> <i>tab 50-12.5 mg</i>	35
<i>lisinopril tab 10 mg</i>	32	<i>losartan potassium tab 100 mg</i>	36
<i>lisinopril tab 2.5 mg</i>	32	<i>losartan potassium tab 25 mg</i>	36
<i>lisinopril tab 20 mg</i>	32	<i>losartan potassium tab 50 mg</i>	36
<i>lisinopril tab 30 mg</i>	33	LOTEMAX GEL 0.5%	126
<i>lisinopril tab 40 mg</i>	33	LOTEMAX OIN 0.5%	126
<i>lisinopril tab 5 mg</i>	32	<i>loteprednol etabonate ophth susp 0.5%</i>	126
L-ISOLEUCINE POW	115	<i>lovastatin tab 10 mg</i>	37
<i>lithium carbonate cap 150 mg</i>	69	<i>lovastatin tab 20 mg</i>	37
<i>lithium carbonate cap 300 mg</i>	69	<i>lovastatin tab 40 mg</i>	37
<i>lithium carbonate cap 600 mg</i>	69	<i>loxapine succinate cap 10 mg</i>	62
<i>lithium carbonate tab 300 mg</i>	69	<i>loxapine succinate cap 25 mg</i>	62
<i>lithium carbonate tab er 300 mg</i>	69	<i>loxapine succinate cap 5 mg</i>	62
<i>lithium carbonate tab er 450 mg</i>	69	<i>loxapine succinate cap 50 mg</i>	62
LITHIUM SOL 8MEQ/5ML.....	69	LOZIBASE MIS	115
<i>little teeth gel 7.5%</i>	147	L-TYROSINE POW	115
L-METHIONINE POW	115	LUMIGAN SOL 0.01%	127
LOHIST-DM SYP 5-2-10MG.....	133	LUMIZYME INJ 50MG	82
LOLLIBASE POW	115	LUPR DEP-PED INJ 11.25MG	86
LONSURF TAB 15-6.14	30	LUPR DEP-PED INJ 15MG	86
LONSURF TAB 20-8.19	30	LUPR DEP-PED INJ 3M 30MG	86
<i>loperamide cap 2mg</i>	90	LUPR DEP-PED INJ 7.5MG	86

LUPRON DEPOT INJ 11.25MG	25
LUPRON DEPOT INJ 3.75MG	25
<i>lutra tab</i>	79
L-VALINE POW	115
LYNPARZA TAB 100MG	24
LYNPARZA TAB 150MG	24
LYRICA CAP 100MG	50
LYRICA CAP 150MG	51
LYRICA CAP 200MG	51
LYRICA CAP 225MG	51
LYRICA CAP 25MG	50
LYRICA CAP 300MG	51
LYRICA CAP 50MG	50
LYRICA CAP 75MG	50
LYRICA CR TAB 165MG	69
LYRICA CR TAB 330MG	69
LYRICA CR TAB 82.5MG	69
LYRICA SOL 20MG/ML	51
LYSODREN TAB 500MG	25
<i>lyza tab 0.35mg</i>	79

M

M.V.I PEDIAT INJ	121
MAG CARBONAT POW HEAVY	112
MAG CITRATE POW TRIBASIC	144
<i>mag-al plus liq</i>	89
<i>mag-al plus liq xs</i>	89
MAGDELAY TAB 70MG	112
<i>mag-g tab 500mg</i>	112
MAGN CHLORID POW	112
MAGN OXIDE POW HEAVY	89
MAGN OXIDE POW LIGHT	89
MAGNEBIND TAB 200	112
MAGNEBIND TAB 300	112
<i>magnesium gluconate tab 500 mg (27 mg elemental mg)</i>	112
<i>magnesium oxide tab 400 mg</i>	89
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	112
<i>magnesium oxide tab 400 mg (241.3 mg elemental mg)</i>	112
<i>magnesium oxide tab 500 mg (mg supplement)</i>	112
MAGNESIUM POW HYDROXID	112
MAGNESIUM SU INJ 20/500ML	107
MAGNESIUM SU INJ 2GM/50ML	107
MAGNESIUM SU INJ 40G/1000	107
MAGNESIUM SU INJ 4G/100ML	107
MAGNESIUM SU INJ 80MG/ML	107

<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	107
<i>magnesium sulfate inj 50%</i>	107
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	107
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	107
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	107
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	107
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	107
<i>magnesium tab 250 mg</i>	112
<i>magnesium tab 250mg</i>	112
MAGONATE LIQ 1000/5ML	112
<i>magonate tab 500mg</i>	112
<i>malathion lotion 0.5%</i>	147
MALIC ACID POW	144
<i>manganese chloride inj 0.1 mg/ml</i> ...	112
<i>mapap cap 500mg</i>	2
<i>mapap liq 160/5ml</i>	2
<i>mapap tab 325mg</i>	2
<i>maprotiline hcl tab 25 mg</i>	56
<i>maprotiline hcl tab 50 mg</i>	56
<i>maprotiline hcl tab 75 mg</i>	56
MAR-COF CG LIQ 225-7.5	133
<i>marlissa tab 0.15/30</i>	80
MARPLAN TAB 10MG	56
MATULANE CAP 50MG	30
MAVYRET TAB 100-40MG	15
M-CLEAR WC LIQ 100-6.3	133
<i>meclizine hcl tab 12.5 mg</i>	91
<i>meclizine hcl tab 25 mg</i>	91
<i>medi-bismuth chw 262mg</i>	90
<i>medi-natural tab 8.6-50mg</i>	94
<i>medi-natural tab 8.6mg</i>	94
<i>medi-phedryl cap 25mg</i>	130
<i>medi-profen sus 40mg/ml</i>	3
<i>medi-tabs tab 500mg</i>	2
<i>medi-tussin syp dm</i>	133
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	80
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	80
<i>medroxyprogesterone acetate tab 10 mg</i>	87
<i>medroxyprogesterone acetate tab 2.5</i>	

<i>mg</i>	87	<i>methadone hcl soln 5 mg/5ml</i>	5
<i>medroxyprogesterone acetate tab 5 mg</i>	87	<i>methadone hcl tab 10 mg</i>	5
<i>mefloquine hcl tab 250 mg</i>	12	<i>methadone hcl tab 5 mg</i>	5
<i>mega multi tab men</i>	121	<i>methazolamide tab 25 mg</i>	44
<i>mega multi tab women</i>	121	<i>methazolamide tab 50 mg</i>	44
MEGA MULTIVI TAB MEN.....	121	<i>methenamine hippurate tab 1 gm</i>	9
MEGA MULTIVI TAB WOMEN.....	121	<i>methimazole tab 10 mg</i>	88
<i>megestrol acetate susp 40 mg/ml</i>	25	<i>methimazole tab 5 mg</i>	88
<i>megestrol acetate susp 625 mg/5ml</i> ...	25	<i>methocarbamol tab 500 mg</i>	70
<i>megestrol acetate tab 20 mg</i>	25	<i>methocarbamol tab 750 mg</i>	70
<i>megestrol acetate tab 40 mg</i>	25	<i>methotrexate sodium for inj 1 gm</i>	22
MEKINIST TAB 0.5MG.....	28	<i>methotrexate sodium inj 250 mg/10ml</i> (25 mg/ml)	23
MEKINIST TAB 2MG	29	<i>methotrexate sodium inj 50 mg/2ml (25</i> <i>mg/ml)</i>	22
MEKTOVI TAB 15MG.....	29	<i>methotrexate sodium inj pf 1000</i> <i>mg/40ml (25 mg/ml)</i>	23
<i>melodetta chw 24 fe</i>	80	<i>methotrexate sodium inj pf 250 mg/10ml</i> (25 mg/ml)	23
<i>meloxicam tab 15 mg</i>	3	<i>methotrexate sodium inj pf 50 mg/2ml</i> (25 mg/ml)	23
<i>meloxicam tab 7.5 mg</i>	3	<i>methotrexate sodium tab 2.5 mg (base</i> <i>equiv)</i>	103
<i>memantine hcl cap er 24hr 14 mg</i>	53	METHYL SULF CRY.....	144
<i>memantine hcl cap er 24hr 21 mg</i>	53	METHYLCELLUL GEL 2%.....	115
<i>memantine hcl cap er 24hr 28 mg</i>	53	METHYLCELLUL GEL 3%.....	115
<i>memantine hcl cap er 24hr 7 mg</i>	53	METHYLCELLUL POW 1500CPS.....	115
<i>memantine hcl oral solution 2 mg/ml</i> ..	53	METHYLCELLUL POW 4000CPS.....	115
<i>memantine hcl tab 10 mg</i>	53	METHYLPARABE POW.....	115
<i>memantine hcl tab 5 mg</i>	53	<i>methylphenidate hcl soln 10 mg/5ml</i> ..	66
<i>memantine hcl tab 5 mg (28) & 10 mg</i> (21) titration pak	53	<i>methylphenidate hcl soln 5 mg/5ml</i>	66
MENACTRA INJ	106	<i>methylphenidate hcl tab 10 mg</i>	66
MENVEO INJ.....	106	<i>methylphenidate hcl tab 20 mg</i>	66
MEPHYTON TAB 5MG.....	121	<i>methylphenidate hcl tab 5 mg</i>	66
<i>mercaptapurine tab 50 mg</i>	22	<i>methylphenidate hcl tab er 10 mg</i>	66
<i>meropenem iv for soln 1 gm</i>	9	<i>methylphenidate hcl tab er 20 mg</i>	66
<i>meropenem iv for soln 500 mg</i>	9	<i>methylprednisolone acetate inj susp 40</i> <i>mg/ml</i>	84
<i>mesalamine cap dr 400 mg</i>	92	<i>methylprednisolone acetate inj susp 80</i> <i>mg/ml</i>	84
<i>mesalamine enema 4 gm</i>	92	<i>methylprednisolone sod succ for inj 1000</i> <i>mg (base equiv)</i>	84
<i>mesalamine rectal enema 4 gm &</i> <i>cleanser wipe kit</i>	93	<i>methylprednisolone sod succ for inj 125</i> <i>mg (base equiv)</i>	84
<i>mesalamine suppos 1000 mg</i>	93	<i>methylprednisolone sod succ for inj 40</i> <i>mg (base equiv)</i>	84
<i>mesalamine tab delayed release 1.2 gm</i>	93	<i>methylprednisolone tab 16 mg</i>	84
MESNEX TAB 400MG	31	<i>methylprednisolone tab 32 mg</i>	84
<i>metformin hcl tab 1000 mg</i>	76		
<i>metformin hcl tab 500 mg</i>	76		
<i>metformin hcl tab 850 mg</i>	76		
<i>metformin hcl tab er 24hr 500 mg</i>	76		
<i>metformin hcl tab er 24hr 750 mg</i>	76		
<i>methadone con 10mg/ml</i>	5		
<i>methadone hcl soln 10 mg/5ml</i>	5		

<i>methylprednisolone tab 4 mg</i>	84	<i>miconazole 3 kit combo pk</i>	98
<i>methylprednisolone tab 8 mg</i>	84	<i>miconazole 7 cre 2%</i>	98
<i>methylprednisolone tab therapy pack 4</i>		<i>miconazole 7 cre tube/kit</i>	98
<i>mg (21)</i>	84	<i>miconazole 7 sup 100mg</i>	98
<i>metoclopramide hcl inj 5 mg/ml (base</i>		<i>miconazole nitrate cream 2%</i>	139
<i>equivalent)</i>	91	<i>miconazole nitrate vaginal cream 2%</i> .	98
<i>metoclopramide hcl soln 5 mg/5ml (10</i>		<i>miconazole nitrate vaginal suppos 100</i>	
<i>mg/10ml) (base equiv)</i>	91	<i>mg</i>	98
<i>metoclopramide hcl tab 10 mg (base</i>		<i>MICRODERM CRE BASE</i>	115
<i>equivalent)</i>	91	<i>MICROSOME CRE BASE</i>	115
<i>metoclopramide hcl tab 5 mg (base</i>		<i>midodrine hcl tab 10 mg</i>	45
<i>equivalent)</i>	91	<i>midodrine hcl tab 2.5 mg</i>	44
<i>metolazone tab 10 mg</i>	44	<i>midodrine hcl tab 5 mg</i>	45
<i>metolazone tab 2.5 mg</i>	44	<i>miglustat cap 100 mg</i>	82
<i>metolazone tab 5 mg</i>	44	<i>milantex sus ex st</i>	90
<i>metoprolol & hydrochlorothiazide tab</i>		<i>milantex sus original</i>	90
<i>100-25 mg</i>	39	<i>mili tab 0.25/35</i>	80
<i>metoprolol & hydrochlorothiazide tab</i>		<i>MINERAL OIL</i>	94
<i>100-50 mg</i>	39	<i>MINERAL OIL HEAVY</i>	94
<i>metoprolol & hydrochlorothiazide tab 50-</i>		<i>MINERAL OIL LIGHT</i>	94
<i>25 mg</i>	39	<i>minitran dis 0.1mg/hr</i>	45
<i>metoprolol succinate tab er 24hr 100 mg</i>		<i>minitran dis 0.2mg/hr</i>	45
<i>(tartrate equiv)</i>	40	<i>minitran dis 0.4mg/hr</i>	45
<i>metoprolol succinate tab er 24hr 200 mg</i>		<i>minitran dis 0.6mg/hr</i>	45
<i>(tartrate equiv)</i>	40	<i>minocycline hcl cap 100 mg</i>	21
<i>metoprolol succinate tab er 24hr 25 mg</i>		<i>minocycline hcl cap 50 mg</i>	21
<i>(tartrate equiv)</i>	40	<i>minocycline hcl cap 75 mg</i>	21
<i>metoprolol succinate tab er 24hr 50 mg</i>		<i>minoxidil tab 10 mg</i>	45
<i>(tartrate equiv)</i>	40	<i>minoxidil tab 2.5 mg</i>	45
<i>metoprolol tartrate iv soln 5 mg/5ml ...</i>	40	<i>mintox plus chw</i>	90
<i>metoprolol tartrate iv soln cart inj 5</i>		<i>mintox sus</i>	90
<i>mg/5ml (1 mg/ml)</i>	40	<i>mintox sus max st</i>	90
<i>metoprolol tartrate tab 100 mg</i>	40	<i>mirtazapine orally disintegrating tab 15</i>	
<i>metoprolol tartrate tab 25 mg</i>	40	<i>mg</i>	56
<i>metoprolol tartrate tab 50 mg</i>	40	<i>mirtazapine orally disintegrating tab 30</i>	
<i>metronidazole cream 0.75%</i>	144	<i>mg</i>	56
<i>metronidazole gel 0.75%</i>	144	<i>mirtazapine orally disintegrating tab 45</i>	
<i>metronidazole in nacl 0.79% iv soln 500</i>		<i>mg</i>	56
<i>mg/100ml</i>	9	<i>mirtazapine tab 15 mg</i>	56
<i>metronidazole lotion 0.75%</i>	144	<i>mirtazapine tab 30 mg</i>	56
<i>metronidazole tab 250 mg</i>	9	<i>mirtazapine tab 45 mg</i>	56
<i>metronidazole tab 500 mg</i>	10	<i>mirtazapine tab 7.5 mg</i>	56
<i>metronidazole vaginal gel 0.75%</i>	98	<i>misoprostol tab 100 mcg</i>	95
<i>MG SO4/D5W INJ 10MG/ML</i>	107	<i>misoprostol tab 200 mcg</i>	95
<i>mi-acid sus</i>	89	<i>MITIGARE CAP 0.6MG</i>	1
<i>mi-acid sus max st</i>	90	<i>M-M-R II INJ</i>	106
<i>mibelas 24 chw fe</i>	80	<i>M-NATAL PLUS TAB</i>	121
<i>miconazole 3 kit combinat</i>	98	<i>moexipril hcl tab 15 mg</i>	33

<i>moexipril hcl tab 7.5 mg</i>	33	<i>mucus relief liq 100/5ml</i>	133
<i>molindone hcl tab 10 mg</i>	62	<i>mucus relief liq 400/20ml</i>	133
<i>molindone hcl tab 25 mg</i>	62	<i>mult vitamin tab essent</i>	121
<i>molindone hcl tab 5 mg</i>	62	<i>mult vitamin tab mens</i>	121
<i>mometasone furoate cream 0.1%</i>	141	<i>mult vitamin tab womens</i>	121
<i>mometasone furoate oint 0.1%</i>	141	MULTAQ TAB 400MG	37
<i>mometasone furoate solution 0.1% (lotion)</i>	141	<i>multi-delyn liq</i>	121
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	135	MULTI-DELYN LIQ /IRON	121
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	135	<i>multilex tab</i>	121
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	135	<i>multilex-t&m tab</i>	121
<i>montelukast sodium tab 10 mg (base equiv)</i>	135	<i>multiple vitamins w/ minerals tab</i>	121
MORPHINE SUL INJ 10MG/ML	6	<i>multi-vitamn tab</i>	121
MORPHINE SUL INJ 150/30ML	6	<i>mupirocin oint 2%</i>	138
MORPHINE SUL INJ 2MG/ML	6	MYCAMINE INJ 100MG	11
MORPHINE SUL INJ 4MG/ML	6	MYCAMINE INJ 50MG	11
MORPHINE SUL INJ 5MG/ML	6	<i>mycophenolate mofetil cap 250 mg</i> ..	105
MORPHINE SUL INJ 8MG/ML	6	<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	105
<i>morphine sulfate inj 10 mg/ml</i>	6	<i>mycophenolate mofetil tab 500 mg</i> ..	105
<i>morphine sulfate inj 8 mg/ml</i>	6	<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	105
<i>morphine sulfate iv soln 1 mg/ml</i>	6	<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	105
<i>morphine sulfate iv soln pf 10 mg/ml</i> ...	6	<i>myorisan cap 10mg</i>	138
<i>morphine sulfate iv soln pf 4 mg/ml</i>	6	<i>myorisan cap 20mg</i>	138
<i>morphine sulfate iv soln pf 8 mg/ml</i>	6	<i>myorisan cap 30mg</i>	138
<i>morphine sulfate oral soln 10 mg/5ml</i> ..	6	<i>myorisan cap 40mg</i>	138
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	6	MYRBETRIQ TAB 25MG	97
<i>morphine sulfate oral soln 20 mg/5ml</i> ..	6	MYRBETRIQ TAB 50MG	97
<i>morphine sulfate tab 15 mg</i>	6	N	
<i>morphine sulfate tab 30 mg</i>	6	NA PHOS MONO POW ANHYDROU	145
<i>morphine sulfate tab er 100 mg</i>	6	<i>nabumetone tab 500 mg</i>	3
<i>morphine sulfate tab er 15 mg</i>	6	<i>nabumetone tab 750 mg</i>	3
<i>morphine sulfate tab er 200 mg</i>	6	<i>nadolol tab 20 mg</i>	40
<i>morphine sulfate tab er 30 mg</i>	6	<i>nadolol tab 40 mg</i>	40
<i>morphine sulfate tab er 60 mg</i>	6	<i>nadolol tab 80 mg</i>	40
MOVANTIK TAB 12.5MG	95	NAFCILLIN INJ 10GM	20
MOVANTIK TAB 25MG	95	<i>nafcillin sodium for inj 1 gm</i>	20
MOXEZA SOL 0.5%	126	<i>nafcillin sodium for inj 2 gm</i>	20
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	126	<i>nafcillin sodium for iv soln 1 gm</i>	20
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	19	<i>nafcillin sodium for iv soln 10 gm</i>	20
<i>mucinex allr tab 180mg</i>	130	<i>nafcillin sodium for iv soln 2 gm</i>	20
<i>mucinex chld liq 100/5ml</i>	133	NAGLAZYME INJ 1MG/ML	82
		<i>nail-ex tab 2.5mg</i>	121
		<i>nalbuphine hcl inj 10 mg/ml</i>	4
		<i>nalbuphine hcl inj 20 mg/ml</i>	4
		<i>naloxone hcl inj 0.4 mg/ml</i>	71
		<i>naloxone hcl inj 4 mg/10ml</i>	72

<i>naloxone hcl soln cartridge 0.4 mg/ml</i> ..72	<i>10000-0.025mg-unt-mg/ml</i> 126
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<i>naltrexone hcl tab 50 mg</i>72	<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i> 125
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<i>naproxen dr tab 500mg</i> 3	NEUPRO DIS 1MG/24HR..... 59
<i>naproxen sodium tab 275 mg</i> 3	NEUPRO DIS 2MG/24HR..... 59
<i>naproxen sodium tab 550 mg</i> 3	NEUPRO DIS 3MG/24HR..... 59
<i>naproxen tab 250 mg</i> 3	NEUPRO DIS 4MG/24HR..... 59
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<i>naproxen tab 500 mg</i> 3	NEUPRO DIS 8MG/24HR..... 59
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<i>naratriptan hcl tab 2.5 mg (base equiv)</i>68	<i>nevirapine tab 200 mg</i> 13
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<i>nasal decong tab 10mg</i>133	<i>nevirapine tab er 24hr 400 mg</i> 13
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<i>nasal decong tab 30mg</i>133	NEXAVAR TAB 200MG 29
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<i>nat fiber pow therapy</i>94	<i>niacin cap er 500 mg</i> 122
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<i>nateglinide tab 120 mg</i>76	<i>niacin tab 500 mg</i> 122
<i>nateglinide tab 60 mg</i>76	<i>niacin tab er 1000 mg (antihyperlipidemic)</i> 39
NATPARA INJ 100MCG86	<i>niacin tab er 500 mg</i> 122
NATPARA INJ 25MCG.....86	<i>niacin tab er 500 mg (antihyperlipidemic)</i> 39
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<i>nefazodone hcl tab 150 mg</i>56	<i>nicardipine hcl cap 20 mg</i> 42
<i>nefazodone hcl tab 200 mg</i>56	<i>nicardipine hcl cap 30 mg</i> 42
<i>nefazodone hcl tab 250 mg</i>56	NICE DISTILL LIQ WATER..... 115
<i>nefazodone hcl tab 50 mg</i>56	<i>nicorelief gum 2mg mint</i> 72
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<i>neomycin-polymy-gramicid op sol 1.75-</i>	

<i>nicorelief gum 4mg orig</i>	72	NITYR TAB 5MG	82
<i>nicotine pol loz 4mg mint</i>	72	<i>non-aspirin sus 160/5ml</i>	2
<i>nicotine polacrilex gum 2 mg</i>	72	<i>non-aspirin tab 325mg</i>	2
<i>nicotine polacrilex gum 4 mg</i>	72	<i>non-aspirin tab 500mg</i>	2
<i>nicotine polacrilex lozenge 2 mg</i>	72	<i>non-aspirin tab 500mg/rr</i>	2
<i>nicotine polacrilex lozenge 4 mg</i>	72	<i>norelgestromin-ethinyl estradiol td ptwk</i>	
<i>nicotine td dis 7mg/24hr</i>	72	<i>150-35 mcg/24hr</i>	80
<i>nicotine td patch 24hr 14 mg/24hr</i>	72	<i>norethindrone & ethinyl estradiol-fe chew</i>	
<i>nicotine td patch 24hr 21 mg/24hr</i>	72	<i>tab 0.4 mg-35 mcg</i>	80
<i>nicotine td patch 24hr 7 mg/24hr</i>	72	<i>norethindrone & ethinyl estradiol-fe chew</i>	
NICOTROL INH	72	<i>tab 0.8 mg-25 mcg</i>	80
NICOTROL NS SPR 10MG/ML	72	<i>norethindrone ace & ethinyl estradiol tab</i>	
<i>nifedipine tab er 24hr 30 mg</i>	42	<i>1 mg-20 mcg</i>	80
<i>nifedipine tab er 24hr 60 mg</i>	42	<i>norethindrone ace & ethinyl estradiol tab</i>	
<i>nifedipine tab er 24hr 90 mg</i>	42	<i>1.5 mg-30 mcg</i>	80
<i>nifedipine tab er 24hr osmotic release 30</i>		<i>norethindrone ace & ethinyl estradiol-fe</i>	
<i>mg</i>	42	<i>tab 1 mg-20 mcg</i>	80
<i>nifedipine tab er 24hr osmotic release 60</i>		<i>norethindrone ace & ethinyl estradiol-fe</i>	
<i>mg</i>	42	<i>tab 1.5 mg-30 mcg</i>	80
<i>nifedipine tab er 24hr osmotic release 90</i>		<i>norethindrone ace-eth estradiol-fe chew</i>	
<i>mg</i>	42	<i>tab 1 mg-20 mcg (24)</i>	80
<i>nikki tab 3-0.02mg</i>	80	<i>norethindrone ace-ethinyl estradiol-fe</i>	
<i>nilutamide tab 150 mg</i>	25	<i>tab 1 mg-20 mcg (24)</i>	80
<i>nimodipine cap 30 mg</i>	42	<i>norethindrone acetate tab 5 mg</i>	87
NINJACOF-XG LIQ 200-8/5	133	<i>norethindrone acetate-ethinyl estradiol</i>	
NINLARO CAP 2.3MG	24	<i>tab 0.5 mg-2.5 mcg</i>	83
NINLARO CAP 3MG	24	<i>norethindrone acetate-ethinyl estradiol</i>	
NINLARO CAP 4MG	24	<i>tab 1 mg-5 mcg</i>	83
NITRO-BID OIN 2%	45	<i>norethindrone ac-ethinyl estrad-fe tab 1-</i>	
NITRO-DUR DIS 0.3MG/HR	45	<i>20/1-30/1-35 mg-mcg</i>	80
NITRO-DUR DIS 0.8MG/HR	45	<i>norethindrone tab 0.35 mg</i>	80
<i>nitrofurantoin macrocrystalline cap 100</i>		<i>norethindrone-eth estradiol tab 0.5-</i>	
<i>mg</i>	10	<i>35/1-35/0.5-35 mg-mcg</i>	80
<i>nitrofurantoin macrocrystalline cap 50</i>		<i>norgestimate & ethinyl estradiol tab 0.25</i>	
<i>mg</i>	10	<i>mg-35 mcg</i>	80
<i>nitrofurantoin monohydrate</i>		<i>norgestimate-eth estrad tab 0.18-</i>	
<i>macrocrystalline cap 100 mg</i>	10	<i>25/0.215-25/0.25-25 mg-mcg</i>	80
<i>nitroglycerin sl tab 0.3 mg</i>	45	<i>norgestimate-eth estrad tab 0.18-</i>	
<i>nitroglycerin sl tab 0.4 mg</i>	45	<i>35/0.215-35/0.25-35 mg-mcg</i>	80
<i>nitroglycerin sl tab 0.6 mg</i>	45	<i>norgestrel & ethinyl estradiol tab 0.3 mg-</i>	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i> ..	45	<i>30 mcg</i>	80
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i> ..	45	<i>norlyroc tab 0.35mg</i>	80
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i> ..	45	NORMOSOL -M INJ /D5W	110
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i> ..	45	NORMOSOL -R INJ /D5W	110
<i>nitroglycerin tl soln 0.4 mg/spray (400</i>		NORMOSOL-R INJ PH 7.4	110
<i>mcg/spray)</i>	45	NORPACE CAP 100MG CR	37
NITYR TAB 10MG	82	NORPACE CAP 150MG CR	37
NITYR TAB 2MG	82	NORTHERA CAP 100MG	45

NORTHERA CAP 200MG	45		139
NORTHERA CAP 300MG	45	<i>nystop pow 100000</i>	140
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<i>nortrel tab 1/35</i>	81	OCTAGAM INJ 10/100ML	104
<i>nortrel tab 7/7/7</i>	81	OCTAGAM INJ 10GM	104
<i>nortriptyline hcl cap 10 mg</i>	56	OCTAGAM INJ 1GM	104
<i>nortriptyline hcl cap 25 mg</i>	56	OCTAGAM INJ 2.5GM	104
<i>nortriptyline hcl cap 50 mg</i>	56	OCTAGAM INJ 20/200ML	104
<i>nortriptyline hcl cap 75 mg</i>	56	OCTAGAM INJ 25GM	104
<i>nortriptyline hcl soln 10 mg/5ml</i>	56	OCTAGAM INJ 2GM/20ML	104
NORVIR POW 100MG	13	OCTAGAM INJ 5GM	104
NORVIR SOL 80MG/ML	13	OCTAGAM INJ 5GM/50ML	104
NOVAFERRUM CAP 50MG	101	<i>octreotide acetate inj 100 mcg/ml (0.1</i>	
NOVAFERRUM DRO 15MG/ML	101	<i>mg/ml)</i>	86
NOVAFERRUM LIQ 125	101	<i>octreotide acetate inj 1000 mcg/ml (1</i>	
NOVOLIN INJ 70/30	74	<i>mg/ml)</i>	86
NOVOLIN INJ FLEXPEN	74	<i>octreotide acetate inj 200 mcg/ml (0.2</i>	
NOVOLIN N INJ U-100	74	<i>mg/ml)</i>	86
NOVOLIN R INJ U-100	74	<i>octreotide acetate inj 50 mcg/ml (0.05</i>	
NOVOLOG INJ 100/ML	74	<i>mg/ml)</i>	86
NOVOLOG INJ FLEXPEN	74	<i>octreotide acetate inj 500 mcg/ml (0.5</i>	
NOVOLOG INJ PENFILL	74	<i>mg/ml)</i>	86
NOVOLOG MIX INJ 70/30	74	OCUVITE CAP ADULT	122
NOVOLOG MIX INJ FLEXPEN	74	<i>ocuvite tab lutein</i>	122
NOXAFIL SUS 40MG/ML	11	<i>ocuvite xtra tab</i>	122
NOXAFIL TAB 100MG	11	ODEFSEY TAB	14
NUCALA INJ 100MG	135	ODOMZO CAP 200MG	24
NUCALA INJ 100MG/ML	135	OFEV CAP 100MG	135
NUCYNTA ER TAB 100MG	6	OFEV CAP 150MG	135
NUCYNTA ER TAB 150MG	6	<i>ofloxacin ophth soln 0.3%</i>	126
NUCYNTA ER TAB 200MG	6	<i>ofloxacin otic soln 0.3%</i>	148
NUCYNTA ER TAB 250MG	6	OIL-ALMOND OIL SWEET	145
NUCYNTA ER TAB 50MG	6	OIL-COCONUT OIL	145
NUEDEXTA CAP 20-10MG	69	<i>olanzapine for im inj 10 mg</i>	62
<i>nu-iron 150 cap 150mg</i>	101	<i>olanzapine orally disintegrating tab 10</i>	
NULOJIX INJ 250MG	105	<i>mg</i>	62
NULYTELY SOL FLAV PKS	94	<i>olanzapine orally disintegrating tab 15</i>	
NUPLAZID CAP 34MG	62	<i>mg</i>	62
NUPLAZID TAB 10MG	62	<i>olanzapine orally disintegrating tab 20</i>	
<i>nutr-e-sol liq 400/15ml</i>	122	<i>mg</i>	62
NUVARING MIS	81	<i>olanzapine orally disintegrating tab 5 mg</i>	
<i>nyamyc pow 100000</i>	139		62
NYMALIZE SOL 60/20ML	42	<i>olanzapine tab 10 mg</i>	62
<i>nystatin cream 100000 unit/gm</i>	139	<i>olanzapine tab 15 mg</i>	62
<i>nystatin oint 100000 unit/gm</i>	139	<i>olanzapine tab 2.5 mg</i>	62
<i>nystatin susp 100000 unit/ml</i>	147	<i>olanzapine tab 20 mg</i>	62
<i>nystatin tab 500000 unit</i>	11	<i>olanzapine tab 5 mg</i>	62
<i>nystatin topical powder 100000 unit/gm</i>		<i>olanzapine tab 7.5 mg</i>	62

<i>olmesartan medoxomil tab 20 mg</i>	36	<i>OPCON-A SOL OP</i>	122
<i>olmesartan medoxomil tab 40 mg</i>	36	<i>OPSUMIT TAB 10MG</i>	46
<i>olmesartan medoxomil tab 5 mg</i>	36	<i>ORA-BLEND SF SUS</i>	115
<i>olmesartan medoxomil-</i>		<i>ORA-BLEND SUS</i>	115
<i>hydrochlorothiazide tab 20-12.5 mg</i>	35	<i>ORA-HESIVE PST BASE</i>	115
<i>olmesartan medoxomil-</i>		<i>oral electrolyte solution</i>	107
<i>hydrochlorothiazide tab 40-12.5 mg</i>	35	<i>oralyte sol</i>	107
<i>olmesartan medoxomil-</i>		<i>oralyte sol freeze</i>	107
<i>hydrochlorothiazide tab 40-25 mg</i>	35	<i>ORANGE CONC LIQ</i>	115
<i>olmesartan-amlodipine-</i>		<i>ORA-PLUS LIQ</i>	115
<i>hydrochlorothiazide tab 20-5-12.5 mg</i> .	35	<i>ORASEP SPR</i>	147
<i>olmesartan-amlodipine-</i>		<i>ORA-SWEET SF SYP</i>	115
<i>hydrochlorothiazide tab 40-10-12.5 mg</i>		<i>ORA-SWEET SYP</i>	115
.....	35	<i>ORFADIN CAP 10MG</i>	82
<i>olmesartan-amlodipine-</i>		<i>ORFADIN CAP 20MG</i>	82
<i>hydrochlorothiazide tab 40-10-25 mg</i> ..	35	<i>ORFADIN CAP 2MG</i>	82
<i>olmesartan-amlodipine-</i>		<i>ORFADIN CAP 5MG</i>	82
<i>hydrochlorothiazide tab 40-5-12.5 mg</i> .	35	<i>ORFADIN SUS 4MG/ML</i>	82
<i>olmesartan-amlodipine-</i>		<i>ORKAMBI GRA 100-125</i>	136
<i>hydrochlorothiazide tab 40-5-25 mg</i>	35	<i>ORKAMBI GRA 150-188</i>	136
<i>olopatadine hcl ophth soln 0.2% (base</i>		<i>ORKAMBI TAB 100-125</i>	136
<i>equivalent)</i>	127	<i>ORKAMBI TAB 200-125</i>	136
<i>omeprazole cap delayed release 10 mg</i> 96		<i>ORNITHINE POW HCL</i>	145
<i>omeprazole cap delayed release 20 mg</i> 96		<i>orsythia tab</i>	81
<i>omeprazole cap delayed release 40 mg</i> 96		<i>oseltamivir phosphate cap 30 mg (base</i>	
<i>once daily tab</i>	122	<i>equiv)</i>	16
<i>once daily tab iron</i>	122	<i>oseltamivir phosphate cap 45 mg (base</i>	
<i>ONCOVITE TAB</i>	122	<i>equiv)</i>	16
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>		<i>oseltamivir phosphate cap 75 mg (base</i>	
.....	91	<i>equiv)</i>	16
<i>ondansetron hcl inj 40 mg/20ml (2</i>		<i>oseltamivir phosphate for susp 6 mg/ml</i>	
<i>mg/ml)</i>	91	<i>(base equiv)</i>	16
<i>ondansetron hcl oral soln 4 mg/5ml</i>	91	<i>oxacillin sodium for inj 1 gm (base</i>	
<i>ondansetron hcl tab 24 mg</i>	91	<i>equivalent)</i>	20
<i>ondansetron hcl tab 4 mg</i>	91	<i>oxacillin sodium for inj 10 gm (base</i>	
<i>ondansetron hcl tab 8 mg</i>	91	<i>equivalent)</i>	20
<i>ondansetron orally disintegrating tab 4</i>		<i>oxacillin sodium for inj 2 gm (base</i>	
<i>mg</i>	91	<i>equivalent)</i>	20
<i>ondansetron orally disintegrating tab 8</i>		<i>OXALIC ACID CRY</i>	145
<i>mg</i>	91	<i>oxaliplatin for iv inj 100 mg</i>	30
<i>one daily tab</i>	122	<i>oxaliplatin for iv inj 50 mg</i>	30
<i>one daily tab maximum</i>	122	<i>oxaliplatin iv soln 100 mg/20ml</i>	30
<i>one daily tab men 50+</i>	122	<i>oxaliplatin iv soln 50 mg/10ml</i>	30
<i>one daily tab mens</i>	122	<i>oxandrolone tab 10 mg</i>	73
<i>one daily tab mens 50+</i>	122	<i>oxandrolone tab 2.5 mg</i>	73
<i>one daily tab pls iron</i>	122	<i>oxcarbazepine susp 300 mg/5ml (60</i>	
<i>one daily tab wom 50+</i>	122	<i>mg/ml)</i>	51
<i>one daily tab womens</i>	122	<i>oxcarbazepine tab 150 mg</i>	51

<i>oxcarbazepine tab 300 mg</i>	51		23
<i>oxcarbazepine tab 600 mg</i>	51	<i>paclitaxel iv conc 300 mg/50ml (6</i>	
<i>oxybutynin chloride syrup 5 mg/5ml</i> ...	97	<i>mg/ml)</i>	23
<i>oxybutynin chloride tab 5 mg</i>	97	<i>pain & fever sol 160/5ml</i>	2
<i>oxybutynin chloride tab er 24hr 10 mg</i>	97	<i>pain & fever sus 160/5ml</i>	2
<i>oxybutynin chloride tab er 24hr 15 mg</i>	97	<i>pain & fever tab 325mg</i>	2
<i>oxybutynin chloride tab er 24hr 5 mg</i> ..	97	<i>pain & fever tab 500mg</i>	2
<i>oxycodone hcl cap 5 mg</i>	6	<i>pain relief sus 160/5ml</i>	2
<i>oxycodone hcl conc 100 mg/5ml (20</i>		<i>pain relief tab 500mg</i>	2
<i>mg/ml)</i>	6	<i>pain relief tab 500mg/rr</i>	2
<i>oxycodone hcl soln 5 mg/5ml</i>	7	<i>pain relief tab 650mg</i>	2
<i>oxycodone hcl tab 10 mg</i>	7	<i>pain relieve sus 160/5ml</i>	2
<i>oxycodone hcl tab 15 mg</i>	7	<i>pain relieve tab 325mg</i>	2
<i>oxycodone hcl tab 20 mg</i>	7	<i>pain relieve tab 500mg</i>	2
<i>oxycodone hcl tab 30 mg</i>	7	<i>pain relieve tab 500mg/rr</i>	2
<i>oxycodone hcl tab 5 mg</i>	7	<i>paliperidone tab er 24hr 1.5 mg</i>	62
<i>oxycodone w/ acetaminophen tab 10-325</i>		<i>paliperidone tab er 24hr 3 mg</i>	62
<i>mg</i>	7	<i>paliperidone tab er 24hr 6 mg</i>	62
<i>oxycodone w/ acetaminophen tab 2.5-</i>		<i>paliperidone tab er 24hr 9 mg</i>	62
<i>325 mg</i>	7	<i>pamidronate disodium for inj 30 mg</i> ...	77
<i>oxycodone w/ acetaminophen tab 5-325</i>		<i>pamidronate disodium for inj 90 mg</i> ...	77
<i>mg</i>	7	<i>pamidronate disodium iv soln 3 mg/ml</i>	77
<i>oxycodone w/ acetaminophen tab 7.5-</i>		<i>pamidronate disodium iv soln 9 mg/ml</i>	77
<i>325 mg</i>	7	<i>PAMIDRONATE INJ 6MG/ML</i>	77
<i>OXYCONTIN TAB 10MG CR</i>	7	<i>PANRETIN GEL 0.1%</i>	145
<i>OXYCONTIN TAB 15MG CR</i>	7	<i>pantoprazole sodium ec tab 20 mg (base</i>	
<i>OXYCONTIN TAB 20MG CR</i>	7	<i>equiv)</i>	96
<i>OXYCONTIN TAB 30MG CR</i>	7	<i>pantoprazole sodium ec tab 40 mg (base</i>	
<i>OXYCONTIN TAB 40MG CR</i>	7	<i>equiv)</i>	96
<i>OXYCONTIN TAB 60MG CR</i>	7	<i>pantoprazole sodium for iv soln 40 mg</i>	
<i>OXYCONTIN TAB 80MG CR</i>	7	<i>(base equiv)</i>	96
<i>oysco 500 tab 500mg</i>	112	<i>PANZYGA SOL 10/100ML</i>	104
<i>oysco 500+d chw</i>	112	<i>PANZYGA SOL 1GM/10ML</i>	104
<i>oysco 500+d tab</i>	112	<i>PANZYGA SOL 2.5/25ML</i>	104
<i>oyst cal/d tab 500mg</i>	112	<i>PANZYGA SOL 20/200ML</i>	104
<i>oyst shell/d tab 500mg</i>	112	<i>PANZYGA SOL 30/300ML</i>	104
<i>oyster shell calcium tab 500 mg</i>	112	<i>PANZYGA SOL 5GM/50ML</i>	104
<i>oyster shell tab 500mg</i>	112	<i>paricalcitol cap 1 mcg</i>	122
<i>OZEMPIC INJ 2/1.5ML</i>	74	<i>paricalcitol cap 2 mcg</i>	122
P		<i>paricalcitol cap 4 mcg</i>	122
<i>pacerone tab 100mg</i>	37	<i>paromomycin sulfate cap 250 mg</i>	8
<i>pacerone tab 200mg</i>	37	<i>paroxetine hcl tab 10 mg</i>	56
<i>pacerone tab 400mg</i>	37	<i>paroxetine hcl tab 20 mg</i>	56
<i>paclitaxel iv conc 100 mg/16.7ml (6</i>		<i>paroxetine hcl tab 30 mg</i>	56
<i>mg/ml)</i>	23	<i>paroxetine hcl tab 40 mg</i>	56
<i>paclitaxel iv conc 150 mg/25ml (6</i>		<i>PASER GRA 4GM</i>	15
<i>mg/ml)</i>	23	<i>PAXIL SUS 10MG/5ML</i>	57
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>		<i>PAZEO DRO 0.7%</i>	127

PCCA BASE CRE 7542.....	115	<i>peptic self chw 262mg</i>	90
PCCA MBK MIS FAT ACID	115	<i>perindopril erbumine tab 2 mg</i>	33
PECTIN POW	90	<i>perindopril erbumine tab 4 mg</i>	33
<i>ped elctrlt sol freezer</i>	107	<i>perindopril erbumine tab 8 mg</i>	33
<i>ped elctrlt sol fruit</i>	107	<i>periogard sol 0.12%</i>	147
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REXULTI TAB 0.5MG.....	63	RITUXAN INJ 500MG.....	24
REXULTI TAB 1MG	63	RITUXAN INJ HYCELA	24
REXULTI TAB 2MG	63	<i>rivastigmine tartrate cap 1.5 mg (base</i>	
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REXULTI TAB 4MG	63		
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RHOPRESSA SOL 0.02%	127		
<i>ribasphere cap 200mg</i>	16		
<i>ribasphere tab 200mg</i>	16		

<i>equivalent</i>)	54	RYDEX LIQ	134
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	54	<i>rynex pse liq</i>	134
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	54	S	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	54	SACCHARIN POW	116
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	54	SACCHARIN POW SODIUM	116
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	54	SAFFLOWER OIL	116, 145
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	54	SALTSTABLE CRE	116
<i>rivelsa tab</i>	81	SANDIMMUNE SOL 100MG/ML	105
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	68	SANTYL OIN 250/GM	147
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	68	SAPHRIS SUB 10MG	64
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	68	SAPHRIS SUB 2.5MG	64
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	68	SAPHRIS SUB 5MG	64
<i>robafen dm syp 100-10/5</i>	134	<i>sb antacid sus anti-gas</i>	90
<i>robafen syp 100/5ml</i>	134	<i>sb cgh contr liq dm</i>	134
<i>ropinirole hydrochloride tab 0.25 mg</i> ...	59	<i>sb docusate tab 8.6-50mg</i>	94
<i>ropinirole hydrochloride tab 0.5 mg</i>	59	<i>sb fib lax pow 33%</i>	94
<i>ropinirole hydrochloride tab 1 mg</i>	59	<i>sb laxative sup 10mg</i>	94
<i>ropinirole hydrochloride tab 2 mg</i>	59	<i>sb triple oin antibiot</i>	138
<i>ropinirole hydrochloride tab 3 mg</i>	59	<i>scopolamine td patch 72hr 1 mg/3days</i>	92
<i>ropinirole hydrochloride tab 4 mg</i>	59	<i>selegiline hcl cap 5 mg</i>	59
<i>ropinirole hydrochloride tab 5 mg</i>	59	<i>selegiline hcl tab 5 mg</i>	59
<i>rosadan cre 0.75%</i>	145	<i>selenium sulfide lotion 2.5%</i>	140
<i>rosuvastatin calcium tab 10 mg</i>	38	SELZENTRY SOL 20MG/ML	13
<i>rosuvastatin calcium tab 20 mg</i>	38	SELZENTRY TAB 150MG	13
<i>rosuvastatin calcium tab 40 mg</i>	38	SELZENTRY TAB 25MG	13
<i>rosuvastatin calcium tab 5 mg</i>	38	SELZENTRY TAB 300MG	13
ROTARIX SUS.....	106	SELZENTRY TAB 75MG	13
ROTATEQ SOL	106	<i>senna-lax tab 8.6mg</i>	94
<i>roweepra tab 1000mg</i>	52	<i>senna-s tab 8.6-50mg</i>	94
<i>roweepra tab 500mg</i>	52	<i>senna-tabs tab 8.6mg</i>	95
<i>roweepra tab 750mg</i>	52	<i>senna-time s tab 8.6-50mg</i>	95
<i>roweepra xr tab 500mg xr</i>	52	<i>senna-time tab 8.6mg</i>	95
<i>roweepra xr tab 750mg xr</i>	52	<i>senno tab 8.6mg</i>	95
RUBRACA TAB 200MG	24	<i>sennosides syrup 8.8 mg/5ml</i>	95
RUBRACA TAB 250MG	24	<i>sennosides-docusate sodium tab 8.6-50 mg</i>	95
RUBRACA TAB 300MG	24	<i>sentry tab</i>	123
<i>rulox sus</i>	90	<i>sentry tab senior</i>	123
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		<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	57
		<i>sertraline hcl tab 100 mg</i>	57
		<i>sertraline hcl tab 25 mg</i>	57
		<i>sertraline hcl tab 50 mg</i>	57
		<i>sevelamer carbonate packet 0.8 gm</i> ...	87
		<i>sevelamer carbonate packet 2.4 gm</i> ...	87
		<i>sevelamer carbonate tab 800 mg</i>	87

<i>sharobel tab 0.35mg</i>	81	<i>sm antifungl cre 2%</i>	140
SHEA BUTTER MIS	116	<i>sm aspirin tab 325mg</i>	2
SHINGRIX INJ 50MCG	106	<i>sm aspirin tab 325mg ec</i>	2
SIGNIFOR INJ 0.3MG/ML	86	<i>sm balanced tab b-100</i>	123
SIGNIFOR INJ 0.6MG/ML	86	<i>sm balanced tab b-50</i>	123
SIGNIFOR INJ 0.9MG/ML	86	<i>sm ca/mg/zn tab</i>	112
<i>silace liq 10mg/ml</i>	95	SM CALAMINE LOT	145
<i>silace syp 60/15ml</i>	95	SM CALAMINE LOT PHENOLAT	145
<i>siladryl alr liq 12.5/5ml</i>	131	<i>sm calcium chw</i>	112
<i>sildenafil citrate tab 20 mg</i>	46	<i>sm calcium/d tab 600-400</i>	113
SILENOR TAB 3MG	67	<i>sm complete tab</i>	123
SILENOR TAB 6MG	67	<i>sm complete tab adv form</i>	123
<i>siltuss das liq 100/5ml</i>	134	<i>sm complete tab senior</i>	123
<i>siltussin dm liq das</i>	134	<i>sm coq-10 cap 50mg</i>	116
<i>siltussin sa syp 100/5ml</i>	134	SM CORAL CAL TAB 1000MG	113
<i>siltussin-dm liq diabetic</i>	134	<i>sm fiber pow 28.3%</i>	95
<i>siltussin-dm liq max st</i>	134	<i>sm fiber pow 48.57%</i>	95
<i>siltussin-dm syp alc free</i>	134	<i>sm fiber pow 58.6%</i>	95
<i>silver sulfadiazine cream 1%</i>	139	<i>sm folic acd tab 400mcg</i>	123
SIMBRINZA SUS 1-0.2%	127	<i>sm ibuprofen tab 100mg jr</i>	3
SIMPLE SYP	116	<i>sm iron slow tab 160mg cr</i>	101
<i>simvastatin tab 10 mg</i>	38	<i>sm iron tab 325mg</i>	101
<i>simvastatin tab 20 mg</i>	38	<i>sm laxative sup 10mg</i>	95
<i>simvastatin tab 40 mg</i>	38	<i>sm micon 7 sup 100mg</i>	98
<i>simvastatin tab 5 mg</i>	38	<i>sm multiple tab vit/iron</i>	123
<i>simvastatin tab 80 mg</i>	38	<i>sm multiple tab vitamins</i>	123
<i>sirolimus oral soln 1 mg/ml</i>	105	<i>sm nasal dec tab 30mg</i>	134
<i>sirolimus tab 0.5 mg</i>	105	<i>sm nicotine gum 2mg</i>	72
<i>sirolimus tab 1 mg</i>	105	<i>sm nicotine gum 2mg mint</i>	72
<i>sirolimus tab 2 mg</i>	105	<i>sm nicotine gum 4mg</i>	72
SIRTURO TAB 100MG	15	<i>sm nicotine gum 4mg mint</i>	72
SIVEXTRO INJ 200MG	10	<i>sm nicotine loz 2mg mint</i>	72
SIVEXTRO TAB 200MG	10	<i>sm nicotine loz 4mg mint</i>	72
<i>slo-niacin tab 250mg cr</i>	123	<i>sm opti-vita tab</i>	123
SLO-NIACIN TAB 500MG CR	123	SM PRENATAL TAB VITAMINS	123
SLO-NIACIN TAB 750MG CR	123	<i>sm triple oin antibiot</i>	139
SLOW REL FE TAB 143MG CR	101	<i>sm tussin cf liq</i>	134
<i>slow release tab 47.5mg</i>	101	<i>sm tussin dm syp 100-10/5</i>	134
<i>sm all day tab allergy</i>	131	<i>sm tussin syp dm</i>	134
<i>sm allergy tab 25mg rlf</i>	131	<i>sm vit b-12 tab 1000 tr</i>	123
<i>sm allergy tab 4mg</i>	131	<i>sm vit b-12 tab 100mcg</i>	123
<i>sm animal chw shapes</i>	123	<i>sm vit b-12 tab 500mcg</i>	123
<i>sm antacid sus advanced</i>	90	<i>sm vit b-6 tab 100mg</i>	123
<i>sm antacid sus anti-gas</i>	90	<i>sm vit c/rh tab 1000mg</i>	123
<i>sm antacid/ sus antigas</i>	90	<i>sm vitamin c chw 500mg</i>	123
<i>sm antibioti oin 500/gm</i>	139	<i>sm vitamin c tab 1000mg</i>	124
<i>sm anti-diar tab 2mg</i>	90	<i>sm vitamin c tab 250mg</i>	124
<i>sm antifungl cre 1%</i>	140	<i>sm vitamin e cap 1000unit</i>	124

<i>sm vitamin e cap 200unit</i>	124	SOMAVERT INJ 10MG	86
<i>sm vitamin e cap 400unit</i>	124	SOMAVERT INJ 15MG	86
<i>sm zinc tab 50mg</i>	113	SOMAVERT INJ 20MG	86
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SOD BENZOATE POW	116	SOMAVERT INJ 30MG	86
SOD BROMIDE GRA.....	145	<i>soothe&cool cre inzo 2%</i>	140
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SOD FLUORIDE POW	108	<i>sorine tab 160mg</i>	37
SOD LAURYL POW SULFATE	116	<i>sorine tab 240mg</i>	37
SOD METABISU GRA ANHYDR	145	<i>sorine tab 80mg</i>	37
SOD PERBORAT CRY	146	<i>sotalol hcl (afib/af) tab 120 mg</i>	37
SOD PHOSPHAT GRA DIBASIC.....	146	<i>sotalol hcl (afib/af) tab 160 mg</i>	37
SOD PROPION POW	146	<i>sotalol hcl (afib/af) tab 80 mg</i>	37
SOD SACCHARI GRA	117	<i>sotalol hcl tab 120 mg</i>	37
SOD SULFITE POW ANHYDROU.....	146	<i>sotalol hcl tab 160 mg</i>	37
SODIUM BORAT POW	146	<i>sotalol hcl tab 240 mg</i>	37
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>		<i>sotalol hcl tab 80 mg</i>	37
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<i>sodium chloride irrigation soln 0.9%</i> .	147	SPERMACETI MIS	117
<i>sodium chloride iv soln 0.45%</i>	110	<i>spironolactone & hydrochlorothiazide tab</i>	
<i>sodium chloride iv soln 0.9%</i>	110	<i>25-25 mg</i>	44
<i>sodium chloride iv soln 3%</i>	110	<i>spironolactone tab 100 mg</i>	33
<i>sodium chloride iv soln 5%</i>	110	<i>spironolactone tab 25 mg</i>	33
<i>sodium chloride tab 1 gm</i>	110	<i>spironolactone tab 50 mg</i>	33
SODIUM CITRA GRA DIHYDRAT	146	<i>sprintec 28 tab 28 day</i>	81
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<i>sodium phenylbutyrate oral powder 3</i>		SPRITAM TAB 750MG.....	52
<i>gm/teaspoonful</i>	82	SPRYCEL TAB 100MG.....	29
<i>sodium phenylbutyrate tab 500 mg</i>	82	SPRYCEL TAB 140MG.....	29
<i>sodium phosphates inj 45 mm/15ml</i>		SPRYCEL TAB 20MG.....	29
<i>(phos) 60 meq/15ml (na)</i>	108	SPRYCEL TAB 50MG.....	29
<i>sodium polystyrene sulfonate oral susp</i>		SPRYCEL TAB 70MG.....	29
<i>15 gm/60ml</i>	77	SPRYCEL TAB 80MG.....	29
<i>sodium polystyrene sulfonate powder</i> ..	77	SQUARIC ACID LIQ BUTANOL	146
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SOLTAMOX SOL 10MG/5ML	25	<i>stavudine cap 15 mg</i>	13
SOLU-CORTEF INJ 1000MG	84	<i>stavudine cap 20 mg</i>	13
SOLU-CORTEF INJ 100MG.....	84	<i>stavudine cap 30 mg</i>	13
SOLU-CORTEF INJ 250MG.....	84	<i>stavudine cap 40 mg</i>	13
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SOMATULINE INJ 90/0.3ML.....	86	<i>stim laxat tab 5mg ec</i>	95

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STIVARGA TAB 40MG	29	<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml.....</i>	68
<i>stomach relf chw 262mg.....</i>	90	<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml.....</i>	68
<i>stomach relf sus 262/15ml.....</i>	90	<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	68
<i>stomach relf tab 262mg.....</i>	90	<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	68
<i>stool softnr cap 100mg.....</i>	95	<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	68
<i>stool softnr cap 250mg.....</i>	95	<i>sumatriptan succinate tab 100 mg</i>	68
<i>stool softnr syp 60/15ml.....</i>	95	<i>sumatriptan succinate tab 25 mg</i>	68
<i>stool softnr tab 8.6-50mg</i>	95	<i>sumatriptan succinate tab 50 mg</i>	68
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<i>sudogest tab 30mg</i>	134	SUTENT CAP 25MG.....	29
<i>sudogest tab 60mg</i>	134	SUTENT CAP 37.5MG	29
<i>sulfacetamide sodium lotion 10% (acne)</i>	138	SUTENT CAP 50MG.....	29
<i>sulfacetamide sodium ophth oint 10%</i>	126	SYLATRON KIT 200MCG	30
<i>sulfacetamide sodium ophth soln 10%</i>	126	SYLATRON KIT 300MCG	30
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....</i>	125	SYLATRON KIT 600MCG	30
SULFADIAZINE TAB 500MG	8	SYMBICORT AER 160-4.5	137
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<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	10	SYMDEKO TAB 100-150	136
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	10	SYMFI LO TAB.....	14
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	10	SYMFI TAB	14
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<i>sulfasalazine tab 500 mg</i>	93	SYMPAZAN MIS 20MG.....	52
<i>sulfasalazine tab delayed release 500 mg</i>	93	SYMPAZAN MIS 5MG	52
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<i>sulindac tab 200 mg.....</i>	3	SYNJARDY TAB	76
<i>sumatriptan nasal spray 20 mg/act</i>	68	SYNJARDY TAB 12.5-500.....	76
<i>sumatriptan nasal spray 5 mg/act.....</i>	68	SYNJARDY TAB 5-1000MG.....	76
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<i>tab-a-vite tab /iron</i>	124
<i>tab-a-vite tab beta car</i>	124
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<i>tacrolimus cap 1 mg</i>	105
<i>tacrolimus cap 5 mg</i>	105
<i>tacrolimus oint 0.03%</i>	146
<i>tacrolimus oint 0.1%</i>	146
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<i>tactinal tab 325mg</i>	2
<i>tactinal tab 500mg</i>	2
TAFINLAR CAP 50MG	29
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<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	25
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	25
<i>tamsulosin hcl cap 0.4 mg</i>	97
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TAXOTERE INJ 80MG/4ML	23
<i>tazarotene cream 0.1%</i>	140
<i>tazicef inj 1gm</i>	18
<i>tazicef inj 2gm</i>	18
<i>tazicef inj 6gm</i>	18
TAZORAC CRE 0.05%	140
<i>taztia xt cap 120mg/24</i>	42
<i>taztia xt cap 180mg/24</i>	42
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<i>telmisartan tab 20 mg</i>	36
<i>telmisartan tab 40 mg</i>	36
<i>telmisartan tab 80 mg</i>	36
<i>telmisartan-amlodipine tab 40-10 mg</i> .	35
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<i>terazosin hcl cap 1 mg (base equivalent)</i>	33
<i>terazosin hcl cap 10 mg (base equivalent)</i>	33
<i>terazosin hcl cap 2 mg (base equivalent)</i>	33
<i>terazosin hcl cap 5 mg (base equivalent)</i>	33
<i>terbinafine cre 1%</i>	140
<i>terbinafine hcl cream 1%</i>	140
<i>terbinafine hcl tab 250 mg</i>	11
<i>terbutaline sulfate tab 2.5 mg</i>	131
<i>terbutaline sulfate tab 5 mg</i>	131

<i>terconazole vaginal cream 0.4%</i>	98	<i>thioridazine hcl tab 100 mg</i>	64
<i>terconazole vaginal cream 0.8%</i>	98	<i>thioridazine hcl tab 25 mg</i>	64
<i>terconazole vaginal suppos 80 mg</i>	98	<i>thioridazine hcl tab 50 mg</i>	64
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<i>testosterone cypionate im inj in oil 200 mg/ml</i>	73	<i>thiothixene cap 2 mg</i>	64
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<i>tetrabenazine tab 25 mg</i>	69	<i>tiagabine hcl tab 16 mg</i>	52
<i>tetracycline hcl cap 250 mg</i>	21	<i>tiagabine hcl tab 2 mg</i>	52
<i>tetracycline hcl cap 500 mg</i>	21	<i>tiagabine hcl tab 4 mg</i>	52
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THALOMID CAP 150MG	26	<i>timolol maleate ophth gel forming soln 0.25%</i>	127
THALOMID CAP 200MG	26	<i>timolol maleate ophth gel forming soln 0.5%</i>	127
THALOMID CAP 50MG	26	<i>timolol maleate ophth soln 0.25%</i>	128
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THEO-24 CAP 400MG ER.....	136	<i>timolol maleate tab 20 mg</i>	41
<i>theophylline soln 80 mg/15ml</i>	136	<i>timolol maleate tab 5 mg</i>	41
<i>theophylline tab er 12hr 100 mg</i>	136	TIVICAY TAB 10MG.....	13
<i>theophylline tab er 12hr 200 mg</i>	136	TIVICAY TAB 25MG.....	13
<i>theophylline tab er 12hr 300 mg</i>	136	TIVICAY TAB 50MG.....	13
<i>theophylline tab er 12hr 450 mg</i>	136	<i>tizanidine hcl tab 2 mg (base equivalent)</i>	70
<i>theophylline tab er 24hr 400 mg</i>	136	<i>tizanidine hcl tab 4 mg (base equivalent)</i>	70
<i>theophylline tab er 24hr 600 mg</i>	136	TOBRADEX OIN 0.3-0.1%	125
THERA M PLUS TAB	124	TOBRADEX ST SUS 0.3-0.05.....	125
<i>thera tab</i>	124	<i>tobramycin nebu soln 300 mg/5ml</i>	8
THERA TAB	124	<i>tobramycin ophth soln 0.3%</i>	126
<i>thera-m tab</i>	124	<i>tobramycin sulfate for inj 1.2 gm</i>	8
THERA-M TAB.....	124	<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	8
THERAPEUTIC SOL	124	<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	8
<i>therapeutic- tab m</i>	124	<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	8
<i>therems tab</i>	124	<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	8
THEREMS-H TAB	124	<i>tobramycin-dexamethasone ophth susp</i>	
THEREMS-M TAB.....	124		
<i>thiamine hcl inj 100 mg/ml</i>	124		
THIAMINE HCL POW	124		
<i>thiamine hcl tab 100 mg</i>	124		
<i>thiamine hcl tab 50 mg</i>	124		
<i>thioridazine hcl tab 10 mg</i>	64		

0.3-0.1%	125	treprostinil inj soln 20 mg/20ml (1	
tolnaftate cre 1%	140	mg/ml)	46
tolnaftate cream 1%	140	treprostinil inj soln 200 mg/20ml (10	
tolnaftate powder 1%	140	mg/ml)	46
tolterodine tartrate cap er 24hr 2 mg ..	97	treprostinil inj soln 50 mg/20ml (2.5	
tolterodine tartrate cap er 24hr 4 mg ..	97	mg/ml)	46
tolterodine tartrate tab 1 mg	97	TRESIBA FLEX INJ 100UNIT	74
tolterodine tartrate tab 2 mg	97	TRESIBA FLEX INJ 200UNIT	74
topiramate sprinkle cap 15 mg	52	TRESIBA INJ 100UNIT	74
topiramate sprinkle cap 25 mg	52	tretinoin cap 10 mg	30
topiramate tab 100 mg	52	tretinoin cream 0.025%	138
topiramate tab 200 mg	52	tretinoin cream 0.05%	138
topiramate tab 25 mg	52	tretinoin cream 0.1%	138
topiramate tab 50 mg	52	tretinoin gel 0.01%	138
toposar inj 100/5ml	31	tretinoin gel 0.025%	138
toposar inj 1gm/50ml	31	triamcinolone acetone cream 0.025%	
toremifene citrate tab 60 mg (base			141
equivalent)	26	triamcinolone acetone cream 0.1%	141
torsemide tab 10 mg	44	triamcinolone acetone cream 0.5%	141
torsemide tab 100 mg	44	triamcinolone acetone dental paste	
torsemide tab 20 mg	44	0.1%	147
torsemide tab 5 mg	44	triamcinolone acetone lotion 0.025%	
total b/c tab	124		142
TOVIAZ TAB 4MG	97	triamcinolone acetone lotion 0.1% .	142
TOVIAZ TAB 8MG	97	triamcinolone acetone oint 0.025%	142
TPN ELECTROL INJ	108	triamcinolone acetone oint 0.1% ..	142
TRADJENTA TAB 5MG	76	triamcinolone acetone oint 0.5% ..	142
tramadol hcl tab 50 mg	4	triamterene & hydrochlorothiazide cap	
tramadol-acetaminophen tab 37.5-325		37.5-25 mg	44
mg	4	triamterene & hydrochlorothiazide tab	
trandolapril tab 1 mg	33	37.5-25 mg	44
trandolapril tab 2 mg	33	triamterene & hydrochlorothiazide tab	
trandolapril tab 4 mg	33	75-50 mg	44
tranexamic acid iv soln 1000 mg/10ml		tri-biozene oin	139
(100 mg/ml)	102	tri-buff asa tab 325mg	2
tranexamic acid tab 650 mg	102	TRICARE TAB PRENATAL	124
tranylcypromine sulfate tab 10 mg	57	trientine hcl cap 250 mg	77
TRAVASOL INJ 10%	109	tri-estaryll tab	81
TRAVATAN Z DRO 0.004%	128	trifluoperazine hcl tab 1 mg (base	
trazodone hcl tab 100 mg	57	equivalent)	64
trazodone hcl tab 150 mg	57	trifluoperazine hcl tab 10 mg (base	
trazodone hcl tab 50 mg	57	equivalent)	64
TRECATOR TAB 250MG	15	trifluoperazine hcl tab 2 mg (base	
TRELEGY AER ELLIPTA	128	equivalent)	64
TRELSTAR MIX INJ 11.25MG	26	trifluoperazine hcl tab 5 mg (base	
TRELSTAR MIX INJ 3.75MG	26	equivalent)	64
treprostinil inj soln 100 mg/20ml (5		trifluridine ophth soln 1%	126
mg/ml)	46	trihexyphenidyl hcl elixir 0.4 mg/ml....	59

<i>trihexyphenidyl hcl tab 2 mg</i>	59	<i>tussin dm liq</i>	134
<i>trihexyphenidyl hcl tab 5 mg</i>	59	<i>tussin dm liq 100-10/5</i>	134
<i>tri-legest tab fe</i>	81	<i>tussin dm liq max</i>	134
<i>tri-lo- tab sprintec</i>	81	<i>tussin dm syp 100-10/5</i>	134
<i>trilyte sol</i>	95	TUTTI FRUTTI CON	117
<i>trimethoprim tab 100 mg</i>	10	TWINRIX INJ	106
<i>tri-mili tab</i>	81	TYBOST TAB 150MG	13
<i>trimipramine maleate cap 100 mg</i>	57	<i>tydemy tab</i>	81
<i>trimipramine maleate cap 25 mg</i>	57	TYKERB TAB 250MG	29
<i>trimipramine maleate cap 50 mg</i>	57	TYMLOS INJ	86
TRINTELLIX TAB 10MG	57	TYPHIM VI INJ	107
TRINTELLIX TAB 20MG	57	U	
TRINTELLIX TAB 5MG	57	U-BASE CRE	117
<i>triple antib oin</i>	139	UNDECYLENIC LIQ ACID	146
<i>triple antib oin max st</i>	139	UNIBASE CRE	117
<i>triple antib oin plus</i>	139	UNICOMPLEX-M TAB	124
<i>tri-previfem tab</i>	81	<i>unithroid tab 100mcg</i>	88
<i>tri-sprintec tab</i>	81	<i>unithroid tab 112mcg</i>	88
TRIUMEQ TAB	14	<i>unithroid tab 125mcg</i>	88
<i>trivora-28 tab</i>	81	<i>unithroid tab 137mcg</i>	88
<i>tri-vylibra tab</i>	81	<i>unithroid tab 150mcg</i>	89
<i>tri-vylibra tab lo</i>	81	<i>unithroid tab 175mcg</i>	89
TROCHIBASE MIS	117	<i>unithroid tab 200mcg</i>	89
TROCHIBASE MIS CLASSIC	117	<i>unithroid tab 25mcg</i>	88
TROCHIBASE S MIS	117	<i>unithroid tab 300mcg</i>	89
TROGARZO INJ 150MG/ML	13	<i>unithroid tab 50mcg</i>	88
TROLAMINE LIQ	117	<i>unithroid tab 75mcg</i>	88
TROPHAMINE INJ 10%	109	<i>unithroid tab 88mcg</i>	88
<i>trosium chloride tab 20 mg</i>	97	UREA BEA	146
TRULICITY INJ 0.75/0.5	74	UREA POW PEROXIDE	146
TRULICITY INJ 1.5/0.5	74	URO-MAG CAP 140MG	90
TRUMENBA INJ	106	<i>ursodiol cap 300 mg</i>	96
TRUVADA TAB 100-150	14	<i>ursodiol tab 250 mg</i>	96
TRUVADA TAB 133-200	14	<i>ursodiol tab 500 mg</i>	96
TRUVADA TAB 167-250	15	V	
TRUVADA TAB 200-300	15	<i>valacyclovir hcl tab 1 gm</i>	16
<i>trymine cg liq 225-7.5</i>	134	<i>valacyclovir hcl tab 500 mg</i>	16
<i>tulana tab 0.35mg</i>	81	VALCHLOR GEL 0.016%	146
TURPENTINE LIQ SPIRITS	146	<i>valganciclovir hcl for soln 50 mg/ml</i> (base equiv)	16
TUSNEL C SYP	134	<i>valganciclovir hcl tab 450 mg (base</i> equivalent)	16
<i>tusnel diabt liq 10-100/5</i>	134	<i>valproate sodium inj 100 mg/ml</i>	52
TUSSICAPS CAP 10-8MG	134	<i>valproate sodium oral soln 250 mg/5ml</i> (base equiv)	52
<i>tussin adult liq 100/5ml</i>	134	<i>valproic acid cap 250 mg</i>	52
<i>tussin adult liq cgh/cong</i>	134	<i>valsartan tab 160 mg</i>	36
<i>tussin adult liq cold</i>	134	<i>valsartan tab 320 mg</i>	36
<i>tussin cf liq</i>	134		
<i>tussin cf liq cgh/cold</i>	134		
<i>tussin chest syp 100/5ml</i>	134		

<i>valsartan tab 40 mg</i>	36	<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	57
<i>valsartan tab 80 mg</i>	36	<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	57
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	35	<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	57
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	35	<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	57
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	35	<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	57
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	35	<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	57
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	35	VENOFER INJ 20MG/ML	101
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	10	VENTAVIS SOL 10MCG/ML	46
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	10	VENTAVIS SOL 20MCG/ML	46
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	10	VENTOLIN HFA AER	131
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	10	<i>verapamil hcl cap er 24hr 100 mg</i>	42
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	10	<i>verapamil hcl cap er 24hr 120 mg</i>	42
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	10	<i>verapamil hcl cap er 24hr 180 mg</i>	42
VANCOMYCIN INJ 1 GM	10	<i>verapamil hcl cap er 24hr 200 mg</i>	42
VANCOMYCIN INJ 500MG	10	<i>verapamil hcl cap er 24hr 240 mg</i>	42
VANCOMYCIN INJ 750MG	10	<i>verapamil hcl cap er 24hr 300 mg</i>	42
<i>vandazole gel 0.75%</i>	98	<i>verapamil hcl cap er 24hr 360 mg</i>	42
VANIBASE CRE	117	<i>verapamil hcl iv soln 2.5 mg/ml</i>	43
VAQTA INJ 25/0.5ML	107	<i>verapamil hcl tab 120 mg</i>	43
VAQTA INJ 50UNT/ML	107	<i>verapamil hcl tab 40 mg</i>	43
VARIVAX INJ	107	<i>verapamil hcl tab 80 mg</i>	43
VASCEPA CAP 0.5GM	39	<i>verapamil hcl tab er 120 mg</i>	43
VASCEPA CAP 1GM	39	<i>verapamil hcl tab er 180 mg</i>	43
VEEGUM MIS LUMP	146	<i>verapamil hcl tab er 240 mg</i>	43
VELCADE INJ 3.5MG	25	VERSACLOZ SUS 50MG/ML	64
<i>velivet pak</i>	81	VERSATILE CRE BASE	117
VEMLIDY TAB 25MG	16	VERSIGEL CRE	117
VENCLEXTA TAB 100MG	25	VERZENIO TAB 100MG	25
VENCLEXTA TAB 10MG	25	VERZENIO TAB 150MG	25
VENCLEXTA TAB 50MG	25	VERZENIO TAB 200MG	25
VENCLEXTA TAB START PK	25	VERZENIO TAB 50MG	25
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	57	VICTOZA INJ 18MG/3ML	74
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	57	VIDEX EC CAP 125MG	13
		VIDEX SOL 2GM	13
		VIDEX SOL 4GM	13
		<i>vienva tab 0.1-20</i>	81
		<i>vigabatrin powd pack 500 mg</i>	52
		<i>vigabatrin tab 500 mg</i>	52
		<i>vigadrone pow 500mg</i>	52
		VIIIBRYD KIT STARTER	57
		VIIIBRYD TAB 10MG	57
		VIIIBRYD TAB 20MG	58

VIIBRYD TAB 40MG.....	58	<i>voriconazole tab 200 mg</i>	11
VIMPAT INJ 200MG/20	52	<i>voriconazole tab 50 mg</i>	11
VIMPAT SOL 10MG/ML.....	52	VOSEVI TAB	16
VIMPAT TAB 100MG	53	VOTRIENT TAB 200MG.....	29
VIMPAT TAB 150MG	53	V-R FATIGUE TAB COMPLEX	117
VIMPAT TAB 200MG	53	VRAYLAR CAP 1.5-3MG	64
VIMPAT TAB 50MG	53	VRAYLAR CAP 1.5MG	65
<i>vincristine sulfate iv soln 1 mg/ml</i>	23	VRAYLAR CAP 3MG	65
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	23	VRAYLAR CAP 4.5MG	65
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	23	VRAYLAR CAP 6MG	65
<i>viorele tab</i>	81	<i>vyfemla tab 0.4-35</i>	81
VIRACEPT TAB 250MG	13	<i>vylibra tab 0.25-35</i>	81
VIRACEPT TAB 625MG	13	W	
VIREAD POW 40MG/GM	14	<i>warfarin sodium tab 1 mg</i>	99
VIREAD TAB 150MG	14	<i>warfarin sodium tab 10 mg</i>	99
VIREAD TAB 200MG	14	<i>warfarin sodium tab 2 mg</i>	99
VIREAD TAB 250MG	14	<i>warfarin sodium tab 2.5 mg</i>	99
<i>vita-bee/c tab</i>	124	<i>warfarin sodium tab 3 mg</i>	99
<i>vitamin a cap 10000 unit</i>	124	<i>warfarin sodium tab 4 mg</i>	99
<i>vitamin a cap 8000unit</i>	124	<i>warfarin sodium tab 5 mg</i>	99
<i>vitamin b12 tab 1000mcg</i>	124	<i>warfarin sodium tab 6 mg</i>	99
<i>vitamin c tab 500mg</i>	124	<i>warfarin sodium tab 7.5 mg</i>	99
<i>vitamin c tab 500mg tr</i>	125	<i>water for irrigation, sterile irrigation soln</i>	147
<i>vitamin d tab 1000unit</i>	125	WATERMELON LIQ FLAVOR.....	117
<i>vitamin d tab 400unit</i>	125	<i>wee care sus 15/1.25</i>	101
<i>vitamin d3 cap 10000unt</i>	125	<i>white petrolatum gel</i>	117
<i>vitamin d3 dro 400unit</i>	125	WITEPSOL H15 MIS.....	117
<i>vitamin d3 tab 1000unit</i>	125	<i>womans laxat tab 5mg ec</i>	95
<i>vitamin d3 tab 50000unt</i>	125	<i>womens one tab daily</i>	125
<i>vitamin d-3 tab 5000unit</i>	125	<i>wymzya fe chw 0.4mg-35</i>	81
<i>vitamin e cap 100 unit</i>	125	X	
<i>vitamin e cap 1000 unit</i>	125	XALKORI CAP 200MG.....	29
<i>vitamin e cap 200 unit</i>	125	XALKORI CAP 250MG.....	30
<i>vitamin e cap 400 unit</i>	125	XANTHAN GUM POW	117
VITAMIN K-1 POW	146	XARELTO STAR TAB 15/20MG	100
<i>vite/iron chw children</i>	125	XARELTO TAB 10MG	100
VITRAKVI CAP 100MG	29	XARELTO TAB 15MG	100
VITRAKVI CAP 25MG	29	XARELTO TAB 2.5MG	100
VITRAKVI SOL 20MG/ML.....	29	XARELTO TAB 20MG	100
VIVITROL INJ 380MG	72	XATMEP SOL 2.5MG/ML	103
VIZIMPRO TAB 15MG	29	XELJANZ TAB 10MG.....	103
VIZIMPRO TAB 30MG	29	XELJANZ TAB 5MG	103
VIZIMPRO TAB 45MG	29	XELJANZ XR TAB 11MG	103
V-MAX CRE	117	XGEVA INJ	86
<i>voriconazole for inj 200 mg</i>	11	XIFAXAN TAB 550MG.....	96
<i>voriconazole for susp 40 mg/ml</i>	11	XIGDUO XR TAB 10-1000.....	76
		XIGDUO XR TAB 10-500MG	76

XIGDUO XR TAB 2.5-1000	76
XIGDUO XR TAB 5-1000MG.....	76
XIGDUO XR TAB 5-500MG	76
XOLAIR INJ 150MG/ML	136
XOLAIR INJ 75/0.5.....	136
XOLAIR SOL 150MG	136
XOSPATA TAB 40MG	30
XTANDI CAP 40MG.....	26
XULTOPHY INJ 100/3.6.....	74
XYLITOL POW	146
XYREM SOL 500MG/ML	70

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<i>zafirlukast tab 10 mg</i>	135
<i>zafirlukast tab 20 mg</i>	135
<i>zaleplon cap 10 mg</i>	67
<i>zaleplon cap 5 mg</i>	67
<i>zarah tab 3-0.03mg</i>	81
ZARXIO INJ 300/0.5.....	100
ZARXIO INJ 480/0.8.....	100
ZEJULA CAP 100MG.....	25
ZELBORAF TAB 240MG	30
ZEMAIRA INJ 1000MG	136
<i>zenatane cap 10mg</i>	138
<i>zenatane cap 20mg</i>	138
<i>zenatane cap 30mg</i>	138
<i>zenatane cap 40mg</i>	138
ZENPEP CAP 10000UNT	96
ZENPEP CAP 15000UNT	96
ZENPEP CAP 20000UNT	96
ZENPEP CAP 25000	96
ZENPEP CAP 3000UNIT.....	96
ZENPEP CAP 40000	96
ZENPEP CAP 5000UNIT.....	96
<i>zidovudine cap 100 mg</i>	14
<i>zidovudine syrup 10 mg/ml</i>	14
<i>zidovudine tab 300 mg</i>	14
ZINC CHLORID GRA	146
<i>zinc chloride inj 1 mg/ml</i>	109
<i>zinc gluconate tab 50 mg (elemental zn)</i>	113
ZINC OXIDE POW	146
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<i>zinc sulfate tab 220 mg (50 mg zinc equivalent)</i>	113
<i>zinc tab 50 mg</i>	113
<i>ziprasidone hcl cap 20 mg</i>	65
<i>ziprasidone hcl cap 40 mg</i>	65
<i>ziprasidone hcl cap 60 mg</i>	65
<i>ziprasidone hcl cap 80 mg</i>	65
ZIRGAN GEL 0.15%.....	126
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	77
<i>zoledronic acid iv soln 5 mg/100ml</i>	77
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<i>zolmitriptan orally disintegrating tab 5 mg</i>	69
<i>zolmitriptan tab 2.5 mg</i>	69
<i>zolmitriptan tab 5 mg</i>	69
<i>zolpidem tartrate tab 10 mg</i>	67
<i>zolpidem tartrate tab 5 mg</i>	67
<i>zonisamide cap 100 mg</i>	53
<i>zonisamide cap 25 mg</i>	53
<i>zonisamide cap 50 mg</i>	53
<i>zoo friends chw</i>	125
ZOO FRIENDS CHW COMPLETE	125
<i>zoo friends chw extra c</i>	125
<i>zoo friends chw gummies</i>	125
ZORTRESS TAB 0.25MG	105
ZORTRESS TAB 0.5MG.....	105
ZORTRESS TAB 0.75MG	106
ZORTRESS TAB 1MG.....	106
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<i>zostrix hp cre 0.1%</i>	146
ZOSTRIX NAT CRE 0.033%.....	146
<i>zovia 1/35e tab</i>	81
ZYDELIG TAB 100MG.....	30
ZYDELIG TAB 150MG.....	30
ZYKADIA CAP 150MG.....	30
ZYKADIA TAB 150MG.....	30
ZYLET SUS 0.5-0.3%.....	125
ZYPREXA RELP INJ 210MG.....	65
ZYPREXA RELP INJ 300MG.....	65
ZYPREXA RELP INJ 405MG.....	65
ZYTIGA TAB 500MG.....	26