



Neighborhood **INTEGRITY** (Medicare-Medicaid Plan)

2019 Lista de medicamentos cubiertos

(Formulario)

POR FAVOR LEA: ESTE DOCUMENTO CONTIENE INFORMACIÓN SOBRE LAS DROGAS QUE CUBRIMOS EN ESTE PLAN Si tiene preguntas, comuníquese con Neighborhood INTEGRITY llamando al 1-844-812-6896, 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. Para obtener más información, visite www.nhpri.org/INTEGRITY.

Neighborhood INTEGRITY| 2019 *Lista de medicamentos cubiertos* (Formulario)

Introducción

Este documento se denomina *Lista de medicamentos cubiertos* (también se lo llama “Lista de medicamentos”). Le informa cuáles son los medicamentos con receta y medicamentos de venta libre que cubre Neighborhood INTEGRITY. La Lista de medicamentos también le indica si se aplican normas o restricciones especiales a los medicamentos cubiertos por Neighborhood INTEGRITY. Los términos clave se definen en el último capítulo del *Manual para miembros*.

Índice

A. Avisos legales	III
B. Preguntas frecuentes.....	IV
B1. ¿Qué medicamentos con receta se incluyen en la Lista de medicamentos cubiertos? (A la Lista de medicamentos cubiertos, la denominamos “Lista de medicamentos” para abreviarla)	IV
B2. ¿Se hacen cambios en la Lista de medicamentos?.....	IV
B3. ¿Qué sucede cuando se hacen cambios en la Lista de medicamentos?.....	V
B4. ¿Se aplican restricciones o límites a la cobertura de medicamentos o requisitos especiales para obtener ciertos medicamentos?	VI
B5. ¿Cómo sabrá si el medicamento que desea tiene limitaciones o si hay requisitos especiales para obtenerlo?.....	VIII
B6. ¿Qué sucede si cambiamos las normas para algunos medicamentos (por ejemplo, restricciones de autorización o aprobación previa, límites de cantidad o tratamiento escalonado)?.....	VII
B7. ¿Cómo puede encontrar un medicamento en la Lista de medicamentos?	VII
B8. ¿Qué sucede si el medicamento que desea tomar no está en la Lista de medicamentos?	VIII
B9. ¿Qué sucede si es un miembro nuevo de Neighborhood INTEGRITY y no encuentra su medicamento en la Lista de medicamentos o tiene problemas para obtenerlo?	VIII
B10. ¿Puede solicitar una excepción para que cubramos su medicamento?	IX

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

B11. ¿Cómo puede solicitar una excepción?.....	IX
B12. ¿Cuánto tiempo se tarda en obtener una excepción?	IIX
B13. ¿Qué son los medicamentos genéricos?.....	X
B14. ¿Qué son los medicamentos de venta libre?	X
B15. ¿Qué es el copago?	X
B16. ¿Qué son los niveles de medicamentos?	X
C. Descripción general de la <i>Lista de medicamentos cubiertos</i>	X
C1. Lista de medicamentos por afección médica.....	XI
D. Índice de medicamentos cubiertos	157

A. Avisos legales

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

- ❖ Neighborhood Health Plan of Rhode Island es un plan de salud que tiene contrato con Medicare y Medicaid de Rhode Island para proporcionar los beneficios de ambos programas a los afiliados.
- ❖ Tanto los beneficios como la Lista de medicamentos cubiertos y las redes de farmacias y proveedores pueden sufrir modificaciones a lo largo del año. Le enviaremos un aviso antes de realizar un cambio que lo afecte.
- ❖ Es posible que se apliquen limitaciones y restricciones. Para obtener más información, llame a Servicios para Miembros de Neighborhood INTEGRITY o consulte el Manual para miembros de Neighborhood INTEGRITY.
- ❖ Puede consultar la *Lista de medicamentos cubiertos* de Neighborhood INTEGRITY actualizada en cualquier momento en el sitio web www.nhpri.org/INTEGRITY.
- ❖ ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call Member Services toll-free phone at 1-844-812-6896. Hours of operation are 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays and federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. TTY users should call TTY 711. The call is free.
- ❖ ATENCIÓN: Si habla español, tenemos a su disposición servicios de asistencia gratuitos en su idioma. Llame al 1-844-812-6896 (para TTY, marque 711) de lunes a viernes, de 8:00 a. m. a 8:00 p. m., y los sábados de 8:00 a. m. a 12:00 p. m. Los sábados por la tarde, domingos y feriados nacionales puede dejar un mensaje y le devolveremos la llamada el siguiente día hábil. La llamada es gratuita.
- ❖ ATENÇÃO: Se falar Português, estão disponíveis para si serviços de apoio linguístico, gratuitamente. Ligue para o 1-844-812-6896 (TTY 711), das 8 am às 8 pm, de segunda a sexta-feira; das 8 am às 12 pm ao sábado. Aos sábados à tarde, domingos e feriados federais, poderá ser convidado a deixar uma mensagem. A sua chamada será devolvida no próximo dia útil. A chamada é grátis.
- ❖ Puede obtener este documento de forma gratuita en otros formatos, como en tamaño de letra grande, braille o audio. Llame a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711). El horario de atención es de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Los usuarios de TTY deben llamar al 711. Esta llamada es gratuita.
- ❖ El plan también puede proporcionarle los documentos en inglés y portugués, así como en formatos como tamaño de letra grande, braille o audio. Llame a Servicios para Miembros para informarnos que, en esta ocasión y en adelante, desea recibir los documentos en el idioma o formato alternativo que solicite.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

B. Preguntas frecuentes

Aquí encontrará respuestas a sus preguntas sobre esta *Lista de medicamentos cubiertos*. Puede leer todas las preguntas frecuentes para obtener más información o buscar una pregunta y respuesta en particular.

B1. ¿Qué medicamentos con receta se incluyen en la *Lista de medicamentos cubiertos*? (A la *Lista de medicamentos cubiertos*, la denominamos “Lista de medicamentos” para abreviarla).

Los medicamentos que se incluyen en la *Lista de medicamentos cubiertos* que comienza en la página 1 son los que cubre Neighborhood INTEGRITY. Estos medicamentos están disponibles en farmacias dentro de nuestra red. Una farmacia está en nuestra red si hemos firmado un contrato con ella para que trabaje con nosotros y le brinde servicios. A estas farmacias las denominamos “farmacias de la red”.

- Neighborhood INTEGRITY cubrirá todos los medicamentos médicamente necesarios de la Lista de medicamentos en los siguientes casos:
 - cuando su médico u otro profesional autorizado a dar recetas digan que los necesita para recuperarse o mantenerse sano, y
 - cuando obtenga su medicamento con receta en una farmacia de la red de Neighborhood INTEGRITY.
- Es posible que Neighborhood INTEGRITY le exija otros requisitos para acceder a ciertos medicamentos (consulte la pregunta B4 a continuación).

Puede consultar una lista actualizada de los medicamentos que cubrimos en nuestro sitio web www.nhpri.org/INTEGRITY o llamando a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711).

B2. ¿Se hacen cambios en la Lista de medicamentos?

Sí. Neighborhood INTEGRITY podrá agregar o quitar medicamentos durante el año. También podremos cambiar las normas que se aplican a los medicamentos. Estos son algunos ejemplos de lo que podríamos hacer:

- Decidir si exigimos o no una autorización previa para un medicamento. (La autorización previa es el permiso que Neighborhood INTEGRITY debe darle para que pueda obtener un medicamento).
- Agregar o cambiar normas sobre la cantidad de medicamento que puede obtener (esto se denomina “límites de cantidad”).

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

- Agregar o cambiar las restricciones de tratamiento escalonado de un medicamento. (El tratamiento escalonado significa que debe probar un medicamento antes de que cubramos otro).

Si está tomando un medicamento que estaba cubierto al **comienzo** del año, generalmente no retiraremos ni cambiaremos la cobertura para ese medicamento **durante el resto del año** a menos que ocurra lo siguiente:

- aparezca un nuevo medicamento de menor costo con la misma eficacia que un medicamento incluido actualmente en la Lista de medicamentos;
- se detecte que un medicamento no es seguro, o
- se retire del mercado un medicamento.

Las preguntas B3 y B6 a continuación brindan más información sobre lo que sucede cuando se hacen cambios en la Lista de medicamentos.

- Puede consultar la Lista de medicamentos de Neighborhood INTEGRITY actualizada en cualquier momento en el sitio web www.nhpri.org/INTEGRITY.
- También puede llamar a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711) para consultar la Lista de medicamentos actualizada.

B3. ¿Qué sucede cuando se hacen cambios en la Lista de medicamentos?

Algunos cambios en la Lista de medicamentos se aplicarán **de inmediato**. Por ejemplo, en los siguientes casos:

- ***Está disponible un nuevo medicamento genérico.*** A veces, aparece un medicamento nuevo de menor costo con la misma eficacia que un medicamento incluido actualmente en la Lista de medicamentos. Cuando eso suceda, podremos quitar de la lista el medicamento actual, pero el costo que deberá pagar por el nuevo medicamento seguirá siendo el mismo. Cuando agreguemos el nuevo medicamento genérico, también podremos decidir mantener en la lista el medicamento que está incluido actualmente, pero cambiar sus normas o límites de cobertura.
 - Es posible que no le informemos antes de hacer este cambio, pero le enviaremos información sobre el cambio o los cambios específicos que hayamos aplicado.
 - Usted o su proveedor pueden solicitar una excepción a estos cambios. Le enviaremos un aviso con los pasos que debe seguir para solicitar una excepción.
- **Se retira un medicamento del mercado.** Si la Food and Drug Administration (FDA, Administración de Alimentos y Medicamentos) determina que un medicamento que usted toma no es seguro o si el fabricante del medicamento lo retira del mercado, lo

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quitaremos de la Lista de medicamentos. Si está tomando el medicamento, le avisaremos. Le enviaremos una carta para asesorarlo sobre qué debe hacer a continuación con su proveedor y farmacéutico.

Podremos hacer otros cambios que afecten los medicamentos que toma. Le informaremos con anticipación sobre estos otros cambios en la Lista de medicamentos. Podrán hacerse cambios si ocurre lo siguiente:

- la FDA brinda nuevas pautas o hay nuevas pautas clínicas sobre un medicamento;
- agregamos un medicamento genérico que no es nuevo en el mercado, **y**
 - reemplazamos un medicamento de marca que está actualmente en la Lista de medicamentos, **o**
 - cambiamos las normas o los límites de cobertura para el medicamento de marca.

Cuando ocurran estos cambios, le informaremos por lo menos 30 días antes de aplicar la modificación a la Lista de medicamentos **o** cuando solicite el medicamento. Esto le dará tiempo para hablar con su médico o el profesional que le da la receta. Ellos pueden ayudarlo a decidir si hay un medicamento similar en la Lista de medicamentos que puede tomar en su lugar o si debe solicitar una excepción. Además, puede realizar lo siguiente:

- obtener un suministro del medicamento para 30 días antes de que se realice el cambio en la Lista de medicamentos, **o**
- solicitar una excepción a estos cambios. Consulte la pregunta B10 para obtener más información sobre las excepciones.

B4. ¿Se aplican restricciones o límites a la cobertura de medicamentos o requisitos especiales para obtener ciertos medicamentos?

Sí, algunos medicamentos tienen normas de cobertura o límites en cuanto a la cantidad que puede obtener. En algunos casos, usted, su médico o el profesional que le da la receta deben cumplir ciertos requisitos antes de que pueda obtener el medicamento. Por ejemplo, en los siguientes casos:

- **Autorización previa (o aprobación previa):** para algunos medicamentos, usted o su médico o el profesional que le da la receta deben obtener la autorización de Neighborhood INTEGRITY antes de solicitar el medicamento con receta. Es posible que Neighborhood INTEGRITY no cubra el medicamento si no consigue la autorización.
- **Límites de cantidad:** en ocasiones, Neighborhood INTEGRITY limita la cantidad de un medicamento que puede obtener.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información,** visite www.nhpri.org/INTEGRITY.

- **Tratamiento escalonado:** a veces, Neighborhood INTEGRITY le exige que haga un tratamiento escalonado. Esto significa que tendrá que probar los medicamentos para su afección médica en un cierto orden. Es posible que deba probar un medicamento antes de que cubramos otro. Si su médico considera que el primer medicamento no le resulta eficaz, entonces cubriremos el segundo.

Para averiguar si su medicamento tiene límites o requisitos adicionales, consulte las tablas de las páginas 1-156. También puede obtener más información en nuestro sitio web www.nhpri.org/INTEGRITY. Hemos publicado documentos en línea que explican las 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 para hablar con su médico o el profesional que le da la receta. Ellos pueden ayudarlo a decidir si hay un medicamento similar en la Lista de medicamentos que puede tomar en su lugar o si debe solicitar una excepción. Consulte las preguntas B10 a B12 para obtener más información sobre las excepciones.

B5. ¿Cómo sabrá si el medicamento que desea tiene limitaciones o si hay requisitos especiales para obtenerlo?

La *Lista de medicamentos cubiertos* de la página 1 tiene una columna titulada “Requisitos especiales, restricciones o límites de uso”.

B6. ¿Qué sucede si cambiamos las normas para algunos medicamentos (por ejemplo, restricciones de autorización o aprobación previa, límites de cantidad o tratamiento escalonado)?

En algunos casos, le informaremos con anticipación si agregamos o modificamos las restricciones de autorización previa, límites de cantidad o tratamiento escalonado para un medicamento. Consulte la pregunta B3 para obtener más información sobre este aviso anticipado y las situaciones en las que es posible que no podamos informarle con anticipación cuando cambien nuestras normas para medicamentos 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 cómo se escribe el medicamento), o
- puede buscarlo por afección médica.

Para buscar **por orden alfabético**, vaya a la sección “Índice de medicamentos cubiertos”. Para ello, ingrese en www.nhpri.org/INTEGRITY y haga clic en el vínculo Searchable List of Covered Drugs.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

Para buscar **por afección médica**, vaya a la sección titulada “Lista de medicamentos por afección médica” de la página 1. En esta sección, los medicamentos se agrupan en categorías según el tipo de afecciones médicas que tratan. Por ejemplo, si tiene una afección cardíaca, debe buscar en la categoría Cardiovascular – Drugs to Treat Heart and Circulation Conditions. Allí encontrará los medicamentos que tratan las afecciones cardíacas.

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

Si no encuentra el medicamento en la Lista de medicamentos, llame a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711) y pregunte si está incluido. Si le dicen que Neighborhood INTEGRITY no cubrirá el medicamento, puede hacer una de estas cosas:

- Solicitar a Servicios para Miembros una lista de medicamentos como el que desea tomar. Luego, mostrársela a su médico o al profesional que le da la receta. Ellos pueden recetar un medicamento de la Lista de medicamentos que sea como el que usted desea tomar. **O**
- Solicitar al plan de salud que haga una excepción para cubrir su medicamento. Consulte las preguntas B10 a B12 para obtener más información sobre la excepción.

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

Podemos ayudarlo. Podremos cubrir un suministro temporal para 30 días de su medicamento de la Parte D o un suministro para 90 días de su medicamento cubierto por Medicaid durante los primeros 90 días en que sea miembro de Neighborhood INTEGRITY. Esto le dará tiempo para hablar con su médico o el profesional que le da la receta. Ellos pueden ayudarlo a decidir si hay un medicamento similar en la Lista de medicamentos que puede tomar en su lugar o si debe solicitar una excepción.

Si la indicación de la receta es para menos días, permitiremos que retire varias veces el medicamento hasta alcanzar un suministro máximo para 30 días de un medicamento de la Parte D y para 90 días de un medicamento cubierto por Medicaid.

Cubriremos un suministro para 30 días de un medicamento de la Parte D o un suministro para 90 días de un medicamento cubierto por Medicaid en los siguientes casos:

- si toma un medicamento que no está en la Lista de medicamentos;
- si las normas del plan de salud no le permiten obtener la cantidad indicada por el profesional que le dio la receta;
- si el medicamento requiere la autorización previa de Neighborhood INTEGRITY, **o**
- si toma un medicamento que tiene una restricción de tratamiento escalonado.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

Si está en un hogar de ancianos u otro centro de atención a largo plazo y necesita un medicamento que no está en la Lista de medicamentos o si no puede obtener fácilmente el medicamento que necesita, podemos ayudarlo. Si ha estado en el plan por más de 90 días, reside en un centro de atención a largo plazo y necesita un suministro de inmediato:

- Cubriremos un suministro para 31 días del medicamento que necesita (a menos que tenga una receta para menos días), sea o no un miembro nuevo de Neighborhood INTEGRITY.
- Esto se suma al suministro temporal durante los primeros 90 días de membresía en Neighborhood INTEGRITY.

Si cambia el nivel de atención, entonces el miembro puede recibir un suministro para 30 días si la atención no es a largo plazo y un suministro para 31 días si recibe atención a largo plazo.

B10. ¿Puede solicitar una excepción para que cubramos su medicamento?

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

También puede pedirnos que cambiemos las normas para su medicamento.

- Por ejemplo, Neighborhood INTEGRITY puede limitar la cantidad de medicamento que se cubrirá. Si su medicamento tiene un límite, puede solicitarnos que lo cambiemos y cubramos una cantidad mayor.
- Otros ejemplos: puede pedirnos que eliminemos las restricciones de tratamiento escalonado o los requisitos de autorización previa.

B11. ¿Cómo puede solicitar una excepción?

Para solicitar una excepción, llame a Servicios para Miembros. Servicios para Miembros asistirá a usted y a su proveedor para ayudarlos a solicitar una excepción. Además, puede consultar el capítulo 9 del *Manual para miembros*, donde encontrará más información sobre las excepciones.

B12. ¿Cuánto tiempo se tarda en obtener una excepción?

Primero, debemos obtener una declaración del profesional que le dio la receta que respalde su solicitud de excepción. Después de recibir la declaración, le comunicaremos la decisión respecto de su solicitud de excepción dentro de las 72 horas.

Si usted o el profesional que le dio la receta creen que su salud puede verse afectada si tiene que esperar 72 horas para conocer la decisión, puede solicitar una excepción acelerada. Esta es una decisión más rápida. Si el profesional que le dio la receta respalda su solicitud, le daremos una respuesta dentro de las 24 horas de haber recibido la declaración de respaldo del profesional.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

B13. ¿Qué son los medicamentos genéricos?

Los medicamentos genéricos se componen de los mismos ingredientes activos que los medicamentos de marca. Por lo general, cuestan menos que los de marca y, normalmente, no tienen nombres conocidos. Los medicamentos genéricos están aprobados por la FDA.

Neighborhood INTEGRITY cubre tanto los medicamentos de marca como los genéricos.

B14. ¿Qué son los medicamentos de venta libre?

Los medicamentos de venta libre son medicamentos de venta sin receta. Neighborhood INTEGRITY cubre algunos medicamentos de venta libre si su proveedor se los receta, de manera que puede obtenerlos sin costo.

Puede consultar la Lista de medicamentos de Neighborhood INTEGRITY para conocer cuáles son los medicamentos de venta libre que están cubiertos.

B15. ¿Qué es el copago?

Como miembro de Neighborhood INTEGRITY, no paga copagos por los medicamentos con receta y de venta libre siempre y cuando cumpla las normas de Neighborhood INTEGRITY.

B16. ¿Qué son los niveles de medicamentos?

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

- Los medicamentos del nivel 1 son medicamentos genéricos.
- Los medicamentos del nivel 2 son medicamentos de marca.
- Los medicamentos del nivel 3 son medicamentos de venta libre.

En ninguno de los niveles se cobran copagos.

C. Descripción general de la *Lista de medicamentos cubiertos*

La Lista de medicamentos cubiertos le brinda información sobre los medicamentos cubiertos por Neighborhood INTEGRITY. Si tiene problemas para encontrar su medicamento en la lista, consulte la sección “Índice de medicamentos cubiertos” que comienza en la página 157. El índice enumera en orden alfabético todos los medicamentos cubiertos por Neighborhood INTEGRITY.

Nota: Si aparece **DP** junto al medicamento, significa que no es un “medicamento de la Parte D”. El importe que paga cuando obtiene este medicamento con receta no se considera para el costo total de sus medicamentos (es decir, el importe que paga no lo ayuda a calificar para la cobertura en situaciones catastróficas).

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

- Además, si recibe asistencia de Ayuda Adicional para pagar sus medicamentos con receta, no la recibirá para pagar estos medicamentos. Para obtener más información sobre Ayuda Adicional, consulte el cuadro informativo que se incluye a continuación.

Ayuda Adicional es un programa de Medicare que ayuda a las personas con ingresos y recursos limitados a reducir los costos de los medicamentos con receta de la Parte D de Medicare, como primas, deducibles y copagos. El programa Ayuda Adicional también se denomina “Subsidio por Bajos Ingresos” o “LIS”.

- Estos medicamentos también tienen diferentes normas para las apelaciones. Una apelación es una manera formal de solicitarnos que revisemos una decisión de cobertura y la modifiquemos si cree que cometimos un error. Por ejemplo, podríamos decidir que un medicamento que usted desea obtener no está cubierto o ya no está cubierto por Medicare o Medicaid.
- Si usted o su médico no están de acuerdo con nuestra decisión, pueden apelar. Para solicitar instrucciones sobre cómo presentar una apelación, llame a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711). Además, puede leer el capítulo 9 del *Manual para miembros* si desea conocer cómo apelar una decisión.

C1. Lista de medicamentos por afección médica

En esta sección, los medicamentos se agrupan en categorías según el tipo de afecciones médicas que tratan. Por ejemplo, si tiene una afección cardíaca, debe buscar en la categoría Cardiovascular – Drugs to Treat Heart and Circulation Conditions. Allí encontrará los medicamentos que tratan las afecciones cardíacas.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

A continuación, se explican los significados de los códigos utilizados en la columna “Requisitos especiales, restricciones o límites de uso”:

- B/D:** este medicamento con receta tiene un requisito administrativo de autorización previa de la Parte B en comparación con la Parte D. Este medicamento puede estar cubierto por la Parte B o la Parte D de Medicare según las circunstancias. Es posible que deba presentar información que describa el uso y la indicación del medicamento para que tomemos la decisión.
- DP:** el medicamento no es un medicamento de la Parte D.
- QL:** límite de cantidad. Para ciertos medicamentos, Neighborhood INTEGRITY limita la cantidad que cubrirá.
- ST:** tratamiento escalonado. En algunos casos, Neighborhood INTEGRITY requiere que pruebe primero ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento que la trate. Por ejemplo, si el medicamento A y el medicamento B tratan su afección médica, es posible que Neighborhood INTEGRITY no cubra el medicamento B a menos que pruebe el medicamento A primero. Si el medicamento A no le resulta eficaz, Neighborhood INTEGRITY cubrirá el medicamento B.
- PA:** autorización previa. Neighborhood INTEGRITY requiere que usted o su médico obtengan una autorización previa para ciertos medicamentos. Esto significa que necesitará conseguir la aprobación de Neighborhood INTEGRITY antes de obtener su medicamento con receta. Si no recibe la aprobación, es posible que Neighborhood INTEGRITY no cubra el medicamento.
- NDS:** suministro de plazo no extendido. Este medicamento no está disponible para un suministro de más de 30 días.
- LA:** acceso limitado. Este medicamento solo está disponible a través de ciertas farmacias especializadas.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información,** visite www.nhpri.org/INTEGRITY.

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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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List of Covered Drugs by Medical Condition

ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION

GOUT - DRUGS TO TREAT GOUT

<i>allopurinol tab 100 mg</i>	Tier 1	
<i>allopurinol tab 300 mg</i>	Tier 1	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	Tier 1	
COLCRYS TAB 0.6MG	Tier 2	QL (120 tabs / 30 days)
<i>febuxostat tab 40 mg</i>	Tier 1	ST
<i>febuxostat tab 80 mg</i>	Tier 1	ST
MITIGARE CAP 0.6MG	Tier 2	QL (60 caps / 30 days)
<i>probenecid tab 500 mg</i>	Tier 1	
ULORIC TAB 40MG	Tier 2	ST
ULORIC TAB 80MG	Tier 2	ST

MISCELLANEOUS

<i>acephen sup 120mg</i>	Tier 3	DP
<i>acephen sup 325mg</i>	Tier 3	DP
<i>acephen sup 650mg</i>	Tier 3	DP
<i>acetaminophen suppos 120 mg</i>	Tier 3	DP
<i>acetaminophen suppos 650 mg</i>	Tier 3	DP
<i>acetaminophen tab 325 mg</i>	Tier 3	DP
<i>acetaminophen tab 500 mg</i>	Tier 3	DP
<i>acetaminophen tab er 650 mg</i>	Tier 3	DP
<i>acetaminophn sus 160/5ml</i>	Tier 3	DP
<i>arthrts pain tab 650mg</i>	Tier 3	DP
<i>aspirin low tab 81mg ec</i>	Tier 3	DP
ASPIRIN POW	Tier 3	DP
ASPIRIN SUP 600MG	Tier 3	DP
<i>aspirin tab 325 mg</i>	Tier 3	DP
<i>aspirin tab 325mg</i>	Tier 3	DP
<i>aspirin tab 325mg ec</i>	Tier 3	DP
<i>aspirin tab delayed release 325 mg</i>	Tier 3	DP
<i>betatemp sus 160/5ml</i>	Tier 3	DP
<i>chld silapap liq 160/5ml</i>	Tier 3	DP
<i>ecpirin tab 325mg ec</i>	Tier 3	DP
<i>ed-apap liq 80mg/2.5</i>	Tier 3	DP
<i>eql menstrua tab complete</i>	Tier 3	DP
<i>eql menstrua tab relief</i>	Tier 3	DP
FEVERALL INF SUP 80MG	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>feverall sup 120mg</i>	Tier 3	DP
<i>feverall sup 325mg</i>	Tier 3	DP
<i>feverall sup 650mg</i>	Tier 3	DP
<i>gnp aspirin tab 325mg ec</i>	Tier 3	DP
<i>hm aspirin tab 325mg</i>	Tier 3	DP
<i>8 hour pain tab 650mg</i>	Tier 3	DP
<i>mapap cap 500mg</i>	Tier 3	DP
<i>mapap chw 80mg</i>	Tier 3	DP
<i>mapap liq 160/5ml</i>	Tier 3	DP
<i>mapap tab 325mg</i>	Tier 3	DP
<i>mapap tab 500mg</i>	Tier 3	DP
<i>mapap tab 500mg/rr</i>	Tier 3	DP
<i>medi-tabs tab 500mg</i>	Tier 3	DP
<i>menstrual tab complete</i>	Tier 3	DP
<i>menstrual tab max st</i>	Tier 3	DP
<i>menstrual tab relief</i>	Tier 3	DP
MIDOL MAX ST TAB MENSTRUA	Tier 3	DP
MIDOL TAB COMPLETE	Tier 3	DP
<i>non-aspirin sus 160/5ml</i>	Tier 3	DP
<i>non-aspirin tab 325mg</i>	Tier 3	DP
<i>non-aspirin tab 500mg</i>	Tier 3	DP
<i>non-aspirin tab 500mg/rr</i>	Tier 3	DP
<i>pain & fever chw 80mg</i>	Tier 3	DP
<i>pain & fever sol 160/5ml</i>	Tier 3	DP
<i>pain & fever sus 160/5ml</i>	Tier 3	DP
<i>pain & fever tab 325mg</i>	Tier 3	DP
<i>pain & fever tab 500mg</i>	Tier 3	DP
<i>pain relief sus 160/5ml</i>	Tier 3	DP
<i>pain relief tab 500mg</i>	Tier 3	DP
<i>pain relief tab 500mg/rr</i>	Tier 3	DP
<i>pain relief tab 650mg</i>	Tier 3	DP
<i>pain relieve sus 160/5ml</i>	Tier 3	DP
<i>pain relieve tab 325mg</i>	Tier 3	DP
<i>pain relieve tab 500mg</i>	Tier 3	DP
<i>pain relieve tab 500mg/rr</i>	Tier 3	DP
<i>pharbetol tab 325mg</i>	Tier 3	DP
<i>pharbetol tab 500mg</i>	Tier 3	DP
<i>qc aspirin tab 325mg</i>	Tier 3	DP
<i>qc aspirin tab 325mg ec</i>	Tier 3	DP
<i>ra menstrual tab complete</i>	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ra menstrual tab relief</i>	Tier 3	DP
<i>sm aspirin tab 325mg</i>	Tier 3	DP
<i>sm aspirin tab 325mg ec</i>	Tier 3	DP
<i>tactinal chw children</i>	Tier 3	DP
<i>tactinal tab 325mg</i>	Tier 3	DP
<i>tactinal tab 500mg</i>	Tier 3	DP
<i>tri-buff asa tab 325mg</i>	Tier 3	DP

NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION

<i>celecoxib cap 50 mg</i>	Tier 1	QL (240 caps / 30 days)
<i>celecoxib cap 100 mg</i>	Tier 1	QL (120 caps / 30 days)
<i>celecoxib cap 200 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>celecoxib cap 400 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>diclofenac potassium tab 50 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>diclofenac sodium tab delayed release 25 mg</i>	Tier 1	
<i>diclofenac sodium tab delayed release 50 mg</i>	Tier 1	
<i>diclofenac sodium tab delayed release 75 mg</i>	Tier 1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	Tier 1	
<i>diflunisal tab 500 mg</i>	Tier 1	
<i>etodolac cap 200 mg</i>	Tier 1	
<i>etodolac cap 300 mg</i>	Tier 1	
<i>etodolac tab 400 mg</i>	Tier 1	
<i>etodolac tab 500 mg</i>	Tier 1	
<i>etodolac tab er 24hr 400 mg</i>	Tier 1	
<i>etodolac tab er 24hr 500 mg</i>	Tier 1	
<i>etodolac tab er 24hr 600 mg</i>	Tier 1	
<i>flurbiprofen tab 50 mg</i>	Tier 1	
<i>flurbiprofen tab 100 mg</i>	Tier 1	
<i>ibu-drops dro 50/1.25</i>	Tier 3	DP
<i>ibuprofen dro 50/1.25</i>	Tier 3	DP
<i>ibuprofen ib chw 100mg</i>	Tier 3	DP
<i>ibuprofen jr chw 100mg</i>	Tier 3	DP
<i>ibuprofen sus 100/5ml</i>	Tier 3	DP
<i>ibuprofen susp 100 mg/5ml</i>	Tier 1	
<i>ibuprofen tab 400 mg</i>	Tier 1	
<i>ibuprofen tab 600 mg</i>	Tier 1	
<i>ibuprofen tab 800 mg</i>	Tier 1	
<i>medi-profen sus 40mg/ml</i>	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>meloxicam tab 7.5 mg</i>	Tier 1	
<i>meloxicam tab 15 mg</i>	Tier 1	
<i>nabumetone tab 500 mg</i>	Tier 1	
<i>nabumetone tab 750 mg</i>	Tier 1	
<i>naproxen dr tab 375mg</i>	Tier 1	
<i>naproxen dr tab 500mg</i>	Tier 1	
<i>naproxen sodium tab 275 mg</i>	Tier 1	
<i>naproxen sodium tab 550 mg</i>	Tier 1	
<i>naproxen tab 250 mg</i>	Tier 1	
<i>naproxen tab 375 mg</i>	Tier 1	
<i>naproxen tab 500 mg</i>	Tier 1	
<i>piroxicam cap 10 mg</i>	Tier 1	
<i>piroxicam cap 20 mg</i>	Tier 1	
<i>sm ibuprofen tab 100mg jr</i>	Tier 3	DP
<i>sulindac tab 150 mg</i>	Tier 1	
<i>sulindac tab 200 mg</i>	Tier 1	

OPIOID ANALGESICS - DRUGS TO TREAT PAIN

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	Tier 1	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	Tier 1	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	Tier 1	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>buprenorphine td patch weekly 5 mcg/hr</i>	Tier 1	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	Tier 1	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 10 mcg/hr</i>	Tier 1	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 15 mcg/hr</i>	Tier 1	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 20 mcg/hr</i>	Tier 1	QL (4 patches / 28 days), PA
<i>butorphanol tartrate inj 1 mg/ml</i>	Tier 2	
<i>butorphanol tartrate inj 2 mg/ml</i>	Tier 2	
BUTRANS DIS 5MCG/HR	Tier 2	QL (4 patches / 28 days), PA
BUTRANS DIS 7.5/HR	Tier 2	QL (4 patches / 28 days), PA
BUTRANS DIS 10MCG/HR	Tier 2	QL (4 patches / 28 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BUTRANS DIS 15MCG/HR	Tier 2	QL (4 patches / 28 days), PA
BUTRANS DIS 20MCG/HR	Tier 2	QL (4 patches / 28 days), PA
<i>nalbuphine hcl inj 10 mg/ml</i>	Tier 2	
<i>nalbuphine hcl inj 20 mg/ml</i>	Tier 2	
<i>tramadol hcl tab 50 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	Tier 1	QL (240 tabs / 30 days)
OPIOID ANALGESICS, CII - DRUGS TO TREAT PAIN		
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	Tier 2	QL (120 tabs / 30 days), PA
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	Tier 2	QL (120 tabs / 30 days), PA
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	Tier 2	QL (120 tabs / 30 days), PA
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	Tier 2	QL (120 tabs / 30 days), PA
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	Tier 2	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	Tier 2	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	Tier 2	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	Tier 2	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	Tier 2	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	Tier 2	QL (120 lozenges / 30 days), PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	Tier 1	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 25 mcg/hr</i>	Tier 1	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 50 mcg/hr</i>	Tier 1	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	Tier 1	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	Tier 1	QL (10 patches / 30 days), PA
FENTORA TAB 100MCG	Tier 2	QL (120 tabs / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FENTORA TAB 200MCG	Tier 2	QL (120 tabs / 30 days), PA
FENTORA TAB 400MCG	Tier 2	QL (120 tabs / 30 days), PA
FENTORA TAB 600MCG	Tier 2	QL (120 tabs / 30 days), PA
FENTORA TAB 800MCG	Tier 2	QL (120 tabs / 30 days), PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	Tier 1	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	Tier 1	QL (600 mL / 30 days)
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	Tier 2	B/D
<i>hydromorphone hcl tab 2 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	Tier 1	QL (180 tabs / 30 days)
HYSINGLA ER TAB 20 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 30 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 40 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 60 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 80 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 100 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 120 MG	Tier 2	QL (30 tabs / 30 days), PA
<i>methadone con 10mg/ml</i>	Tier 1	QL (90 mL / 30 days), PA
<i>methadone hcl soln 5 mg/5ml</i>	Tier 1	QL (450 mL / 30 days), PA
<i>methadone hcl soln 10 mg/5ml</i>	Tier 1	QL (450 mL / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>methadone hcl tab 5 mg</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>methadone hcl tab 10 mg</i>	Tier 1	QL (90 tabs / 30 days), PA
MORPHINE SUL INJ 2MG/ML	Tier 2	B/D
MORPHINE SUL INJ 4MG/ML	Tier 2	B/D
MORPHINE SUL INJ 5MG/ML	Tier 2	B/D
MORPHINE SUL INJ 8MG/ML	Tier 2	B/D
MORPHINE SUL INJ 10MG/ML	Tier 2	B/D
MORPHINE SUL INJ 150/30ML	Tier 2	B/D
<i>morphine sulfate inj 8 mg/ml</i>	Tier 2	B/D
<i>morphine sulfate inj 10 mg/ml</i>	Tier 2	B/D
<i>morphine sulfate iv soln 1 mg/ml</i>	Tier 2	B/D
<i>morphine sulfate iv soln pf 4 mg/ml</i>	Tier 2	B/D
<i>morphine sulfate iv soln pf 8 mg/ml</i>	Tier 2	B/D
<i>morphine sulfate iv soln pf 10 mg/ml</i>	Tier 2	B/D
<i>morphine sulfate oral soln 10 mg/5ml</i>	Tier 1	QL (900 mL / 30 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	Tier 1	QL (750 mL / 30 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	Tier 1	QL (180 mL / 30 days)
<i>morphine sulfate tab 15 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>morphine sulfate tab er 15 mg</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 30 mg</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 60 mg</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 100 mg</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>morphine sulfate tab er 200 mg</i>	Tier 1	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 50MG	Tier 2	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 100MG	Tier 2	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 150MG	Tier 2	QL (90 tabs / 30 days), PA
NUCYNTA ER TAB 200MG	Tier 2	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 250MG	Tier 2	QL (60 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 DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>oxycodone hcl cap 5 mg</i>	Tier 1	QL (180 caps / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	Tier 1	QL (180 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	Tier 1	QL (900 mL / 30 days)
<i>oxycodone hcl tab 5 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	Tier 1	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	Tier 1	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	Tier 1	QL (180 tabs / 30 days)
OXYCONTIN TAB 10MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 15MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 20MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 30MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 40MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 60MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 80MG CR	Tier 2	QL (60 tabs / 30 days), PA

ANESTHETICS - DRUGS FOR NUMBING

LOCAL ANESTHETICS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	Tier 1	B/D

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

ANTI-BACTERIALS - MISCELLANEOUS

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

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	Tier 2	
ALINIA SUS 100/5ML	Tier 2	
ALINIA TAB 500MG	Tier 2	
<i>atovaquone susp 750 mg/5ml</i>	Tier 2	
AZACTAM INJ 1GM	Tier 2	
AZACTAM INJ 2GM	Tier 2	
<i>aztreonam for inj 1 gm</i>	Tier 1	
<i>aztreonam for inj 2 gm</i>	Tier 1	
CAYSTON INH 75MG	Tier 2	LA, PA
<i>clindamycin hcl cap 75 mg</i>	Tier 1	
<i>clindamycin hcl cap 150 mg</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>clindamycin hcl cap 300 mg</i>	Tier 1
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	Tier 1
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	Tier 1
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	Tier 1
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	Tier 1
<i>clindamycin phosphate inj 9 gm/60ml</i>	Tier 1
<i>clindamycin phosphate inj 300 mg/2ml</i>	Tier 1
<i>clindamycin phosphate inj 600 mg/4ml</i>	Tier 1
<i>clindamycin phosphate inj 900 mg/6ml</i>	Tier 1
<i>clindamycin phosphate iv soln 300 mg/2ml</i>	Tier 1
<i>clindamycin phosphate iv soln 900 mg/6ml</i>	Tier 1
CLINDMYC/NAC INJ 300/50ML	Tier 2
CLINDMYC/NAC INJ 600/50ML	Tier 2
CLINDMYC/NAC INJ 900/50ML	Tier 2
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	Tier 1
<i>dapsone tab 25 mg</i>	Tier 1
<i>dapsone tab 100 mg</i>	Tier 1
<i>daptomycin for iv soln 350 mg</i>	Tier 2
<i>daptomycin for iv soln 500 mg</i>	Tier 2
DAPTOMYCIN SOL 350MG	Tier 2
EMVERM CHW 100MG	Tier 2
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	Tier 1
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	Tier 1
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	Tier 1
<i>ivermectin tab 3 mg</i>	Tier 1
<i>linezolid for susp 100 mg/5ml</i>	Tier 2
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	Tier 2
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	Tier 1
<i>linezolid tab 600 mg</i>	Tier 2
<i>meropenem iv for soln 1 gm</i>	Tier 1
<i>meropenem iv for soln 500 mg</i>	Tier 1
<i>methenamine hippurate tab 1 gm</i>	Tier 1

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	Tier 1	
<i>metronidazole tab 250 mg</i>	Tier 1	
<i>metronidazole tab 500 mg</i>	Tier 1	
NEBUPENT INH 300MG	Tier 2	B/D
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	Tier 2	PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	Tier 2	PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	Tier 2	PA; PA applies if 70 years and older after a 90 day supply in a calendar year
PENTAM 300 INJ 300MG	Tier 2	
<i>pentamidine isethionate for soln 300 mg</i>	Tier 1	
PINWORM TAB MEDICINE	Tier 3	DP
<i>praziquantel tab 600 mg</i>	Tier 1	
<i>reeses med sus pinworm</i>	Tier 3	DP
SIVEXTRO INJ 200MG	Tier 2	
SIVEXTRO TAB 200MG	Tier 2	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	Tier 1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	Tier 1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	Tier 1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	Tier 1	
SYNERCID INJ 500MG	Tier 2	NDS
<i>tigecycline for iv soln 50 mg</i>	Tier 2	
<i>trimethoprim tab 100 mg</i>	Tier 1	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	Tier 1	
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	Tier 2	
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	Tier 1	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	Tier 1	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	Tier 1	
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	Tier 1	
VANCOMYCIN INJ 1 GM	Tier 2	
VANCOMYCIN INJ 500MG	Tier 2	
VANCOMYCIN INJ 750MG	Tier 2	

ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>voriconazole for inj 200 mg</i>	Tier 1	
<i>voriconazole for susp 40 mg/ml</i>	Tier 2	
<i>voriconazole tab 50 mg</i>	Tier 2	
<i>voriconazole tab 200 mg</i>	Tier 2	
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	Tier 1	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	Tier 1	
<i>chloroquine phosphate tab 250 mg</i>	Tier 1	
<i>chloroquine phosphate tab 500 mg</i>	Tier 1	
COARTEM TAB 20-120MG	Tier 2	
<i>mefloquine hcl tab 250 mg</i>	Tier 1	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	Tier 1	
PRIMAQUINE TAB 26.3MG	Tier 2	
<i>quinine sulfate cap 324 mg</i>	Tier 1	PA
ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	Tier 1	
<i>abacavir sulfate tab 300 mg (base equiv)</i>	Tier 1	
APTIVUS CAP 250MG	Tier 2	
APTIVUS SOL	Tier 2	
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	Tier 2	
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	Tier 2	
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	Tier 2	
CRIXIVAN CAP 200MG	Tier 2	
CRIXIVAN CAP 400MG	Tier 2	
<i>didanosine delayed release capsule 200 mg</i>	Tier 1	
<i>didanosine delayed release capsule 250 mg</i>	Tier 1	
<i>didanosine delayed release capsule 400 mg</i>	Tier 1	
EDURANT TAB 25MG	Tier 2	
<i>efavirenz cap 50 mg</i>	Tier 1	
<i>efavirenz cap 200 mg</i>	Tier 2	
<i>efavirenz tab 600 mg</i>	Tier 2	
EMTRIVA CAP 200MG	Tier 2	
EMTRIVA SOL 10MG/ML	Tier 2	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	Tier 2	
FUZEON INJ 90MG	Tier 2	
INTELENCE TAB 25MG	Tier 2	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
INTELENCE TAB 100MG	Tier 2
INTELENCE TAB 200MG	Tier 2
INVIRASE TAB 500MG	Tier 2
ISENTRESS CHW 25MG	Tier 2
ISENTRESS CHW 100MG	Tier 2
ISENTRESS HD TAB 600MG	Tier 2
ISENTRESS POW 100MG	Tier 2
ISENTRESS TAB 400MG	Tier 2
<i>lamivudine oral soln 10 mg/ml</i>	Tier 1
<i>lamivudine tab 150 mg</i>	Tier 1
<i>lamivudine tab 300 mg</i>	Tier 1
LEXIVA SUS 50MG/ML	Tier 2
<i>nevirapine susp 50 mg/5ml</i>	Tier 1
<i>nevirapine tab 200 mg</i>	Tier 1
<i>nevirapine tab er 24hr 100 mg</i>	Tier 1
<i>nevirapine tab er 24hr 400 mg</i>	Tier 1
NORVIR POW 100MG	Tier 2
NORVIR SOL 80MG/ML	Tier 2
PIFELTRO TAB 100MG	Tier 2
PREZISTA SUS 100MG/ML	Tier 2 QL (400 mL / 30 days)
PREZISTA TAB 75MG	Tier 2 QL (480 tabs / 30 days)
PREZISTA TAB 150MG	Tier 2 QL (240 tabs / 30 days)
PREZISTA TAB 600MG	Tier 2 QL (60 tabs / 30 days)
PREZISTA TAB 800MG	Tier 2 QL (30 tabs / 30 days)
RESCRIPTOR TAB 200MG	Tier 2
REYATAZ POW 50MG	Tier 2
<i>ritonavir tab 100 mg</i>	Tier 1
SELZENTRY SOL 20MG/ML	Tier 2
SELZENTRY TAB 25MG	Tier 2
SELZENTRY TAB 75MG	Tier 2
SELZENTRY TAB 150MG	Tier 2
SELZENTRY TAB 300MG	Tier 2
<i>stavudine cap 15 mg</i>	Tier 1
<i>stavudine cap 20 mg</i>	Tier 1
<i>stavudine cap 30 mg</i>	Tier 1
<i>stavudine cap 40 mg</i>	Tier 1
<i>tenofovir disoproxil fumarate tab 300 mg</i>	Tier 2
TIVICAY TAB 10MG	Tier 2
TIVICAY TAB 25MG	Tier 2
TIVICAY TAB 50MG	Tier 2

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
TROGARZO INJ 150MG/ML	Tier 2	LA
TYBOST TAB 150MG	Tier 2	
VIDEX EC CAP 125MG	Tier 2	
VIDEX SOL 2GM	Tier 2	
VIDEX SOL 4GM	Tier 2	
VIRACEPT TAB 250MG	Tier 2	
VIRACEPT TAB 625MG	Tier 2	
VIRAMUNE SUS 50MG/5ML	Tier 2	
VIREAD POW 40MG/GM	Tier 2	
VIREAD TAB 150MG	Tier 2	
VIREAD TAB 200MG	Tier 2	
VIREAD TAB 250MG	Tier 2	
<i>zidovudine cap 100 mg</i>	Tier 1	
<i>zidovudine syrup 10 mg/ml</i>	Tier 1	
<i>zidovudine tab 300 mg</i>	Tier 1	

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

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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SYMFI TAB	Tier 2	
SYMTUZA TAB	Tier 2	
TRIUMEQ TAB	Tier 2	
TRUVADA TAB 100-150	Tier 2	QL (60 tabs / 30 days)
TRUVADA TAB 133-200	Tier 2	QL (30 tabs / 30 days)
TRUVADA TAB 167-250	Tier 2	QL (30 tabs / 30 days)
TRUVADA TAB 200-300	Tier 2	QL (30 tabs / 30 days)

ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS

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

ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS

<i>acyclovir cap 200 mg</i>	Tier 1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	Tier 1	B/D
<i>acyclovir susp 200 mg/5ml</i>	Tier 1	
<i>acyclovir tab 400 mg</i>	Tier 1	
<i>acyclovir tab 800 mg</i>	Tier 1	
<i>adefovir dipivoxil tab 10 mg</i>	Tier 2	
BARACLUDE SOL .05MG/ML	Tier 2	
<i>entecavir tab 0.5 mg</i>	Tier 2	
<i>entecavir tab 1 mg</i>	Tier 2	
EPCLUSA TAB 400-100	Tier 2	PA
EPIVIR HBV SOL 5MG/ML	Tier 2	
<i>famciclovir tab 125 mg</i>	Tier 1	
<i>famciclovir tab 250 mg</i>	Tier 1	
<i>famciclovir tab 500 mg</i>	Tier 1	
<i>ganciclovir sodium for inj 500 mg</i>	Tier 1	B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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HARVONI TAB 90-400MG	Tier 2	PA
<i>lamivudine tab 100 mg (hbv)</i>	Tier 1	
MAVYRET TAB 100-40MG	Tier 2	PA
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	Tier 1	QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	Tier 1	QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	Tier 1	QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	Tier 1	QL (1080 mL / year)
PEGASYS INJ	Tier 2	PA
PEGASYS INJ 180MCG/M	Tier 2	PA
PEGASYS INJ PROCLICK	Tier 2	PA
REBETOL SOL 40MG/ML	Tier 2	
RELENZA MIS DISKHALE	Tier 2	QL (6 inhalers / year)
<i>ribavirin cap 200 mg</i>	Tier 1	
<i>ribavirin tab 200 mg</i>	Tier 1	
<i>ribavirin tab 600 mg</i>	Tier 2	
<i>rimantadine hydrochloride tab 100 mg</i>	Tier 1	
<i>valacyclovir hcl tab 1 gm</i>	Tier 1	
<i>valacyclovir hcl tab 500 mg</i>	Tier 1	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	Tier 2	NDS
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	Tier 2	
VEMLIDY TAB 25MG	Tier 2	
VOSEVI TAB	Tier 2	PA
ZEPATIER TAB 50-100MG	Tier 2	PA

CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS

<i>cefaclor cap 250 mg</i>	Tier 1	
<i>cefaclor cap 500 mg</i>	Tier 1	
CEFACLOR ER TAB 500MG	Tier 2	
<i>cefaclor for susp 125 mg/5ml</i>	Tier 1	
<i>cefaclor for susp 250 mg/5ml</i>	Tier 1	
<i>cefaclor for susp 375 mg/5ml</i>	Tier 1	
<i>cefadroxil cap 500 mg</i>	Tier 1	
<i>cefadroxil for susp 250 mg/5ml</i>	Tier 1	
<i>cefadroxil for susp 500 mg/5ml</i>	Tier 1	
<i>cefadroxil tab 1 gm</i>	Tier 1	
CEFAZOLIN INJ 1GM/50ML	Tier 2	

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>cefazolin sodium for inj 1 gm</i>	Tier 1
<i>cefazolin sodium for inj 10 gm</i>	Tier 1
<i>cefazolin sodium for inj 20 gm</i>	Tier 1
<i>cefazolin sodium for inj 500 mg</i>	Tier 1
<i>cefazolin sodium for iv soln 1 gm</i>	Tier 1
CEFAZOLIN SOL	Tier 2
<i>cefdinir cap 300 mg</i>	Tier 1
<i>cefdinir for susp 125 mg/5ml</i>	Tier 1
<i>cefdinir for susp 250 mg/5ml</i>	Tier 1
<i>cefepime hcl for inj 1 gm</i>	Tier 1
<i>cefepime hcl for inj 2 gm</i>	Tier 1
<i>cefixime cap 400 mg</i>	Tier 1
<i>cefixime for susp 100 mg/5ml</i>	Tier 1
<i>cefixime for susp 200 mg/5ml</i>	Tier 1
<i>cefotaxime sodium for inj 1 gm</i>	Tier 1
<i>cefotaxime sodium for inj 500 mg</i>	Tier 1
<i>cefoxitin sodium for inj 10 gm</i>	Tier 1
<i>cefoxitin sodium for iv soln 1 gm</i>	Tier 1
<i>cefoxitin sodium for iv soln 2 gm</i>	Tier 1
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	Tier 1
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	Tier 1
<i>cefpodoxime proxetil tab 100 mg</i>	Tier 1
<i>cefpodoxime proxetil tab 200 mg</i>	Tier 1
<i>cefprozil for susp 125 mg/5ml</i>	Tier 1
<i>cefprozil for susp 250 mg/5ml</i>	Tier 1
<i>cefprozil tab 250 mg</i>	Tier 1
<i>cefprozil tab 500 mg</i>	Tier 1
<i>ceftazidime for inj 1 gm</i>	Tier 1
<i>ceftazidime for inj 2 gm</i>	Tier 1
<i>ceftazidime for inj 6 gm</i>	Tier 1
CEFTAZIDIME/ SOL D5W 1GM	Tier 2
CEFTAZIDIME/ SOL D5W 2GM	Tier 2
<i>ceftriaxone sodium for inj 1 gm</i>	Tier 1
<i>ceftriaxone sodium for inj 2 gm</i>	Tier 1
<i>ceftriaxone sodium for inj 10 gm</i>	Tier 1
<i>ceftriaxone sodium for inj 250 mg</i>	Tier 1
<i>ceftriaxone sodium for inj 500 mg</i>	Tier 1
<i>ceftriaxone sodium for iv soln 1 gm</i>	Tier 1
<i>ceftriaxone sodium for iv soln 2 gm</i>	Tier 1
<i>cefuroxime axetil tab 250 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>cefuroxime axetil tab 500 mg</i>	Tier 1
<i>cefuroxime sodium for inj 7.5 gm</i>	Tier 1
<i>cefuroxime sodium for inj 750 mg</i>	Tier 1
<i>cefuroxime sodium for iv soln 1.5 gm</i>	Tier 1
<i>cephalexin cap 250 mg</i>	Tier 1
<i>cephalexin cap 500 mg</i>	Tier 1
<i>cephalexin for susp 125 mg/5ml</i>	Tier 1
<i>cephalexin for susp 250 mg/5ml</i>	Tier 1
SUPRAX CHW 100MG	Tier 2
SUPRAX CHW 200MG	Tier 2
SUPRAX SUS 500/5ML	Tier 2
<i>tazicef inj 1gm</i>	Tier 1
<i>tazicef inj 2gm</i>	Tier 1
<i>tazicef inj 6gm</i>	Tier 1
TEFLARO INJ 400MG	Tier 2
TEFLARO INJ 600MG	Tier 2

ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>erythromycin tab delayed release 500 mg</i>	Tier 1
<i>erythromycin w/ delayed release particles cap 250 mg</i>	Tier 1
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	Tier 1
<i>ciprofloxacin 400 mg/200ml in d5w</i>	Tier 1
<i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i>	Tier 1
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	Tier 1
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	Tier 1
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	Tier 1
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	Tier 1
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	Tier 1
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	Tier 1
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	Tier 1
<i>levofloxacin iv soln 25 mg/ml</i>	Tier 1
<i>levofloxacin oral soln 25 mg/ml</i>	Tier 1
<i>levofloxacin tab 250 mg</i>	Tier 1
<i>levofloxacin tab 500 mg</i>	Tier 1
<i>levofloxacin tab 750 mg</i>	Tier 1
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	Tier 1
PENICILLINS - DRUGS TO TREAT INFECTIONS	
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	Tier 1
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	Tier 1
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	Tier 1
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	Tier 1
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	Tier 1
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	Tier 1
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	Tier 1
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	Tier 1
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	Tier 1
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	Tier 1
<i>amoxicillin (trihydrate) cap 250 mg</i>	Tier 1
<i>amoxicillin (trihydrate) cap 500 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	Tier 1
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	Tier 1
<i>amoxicillin (trihydrate) tab 500 mg</i>	Tier 1
<i>amoxicillin (trihydrate) tab 875 mg</i>	Tier 1
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	Tier 1
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	Tier 1
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	Tier 1
<i>ampicillin cap 500 mg</i>	Tier 1
<i>ampicillin sodium for inj 1 gm</i>	Tier 1
<i>ampicillin sodium for inj 2 gm</i>	Tier 1
<i>ampicillin sodium for inj 125 mg</i>	Tier 1
<i>ampicillin sodium for inj 250 mg</i>	Tier 1
<i>ampicillin sodium for inj 500 mg</i>	Tier 1
<i>ampicillin sodium for iv soln 1 gm</i>	Tier 1
<i>ampicillin sodium for iv soln 2 gm</i>	Tier 1
<i>ampicillin sodium for iv soln 10 gm</i>	Tier 1
BICILLIN L-A INJ 600000	Tier 2
BICILLIN L-A INJ 1200000	Tier 2
BICILLIN L-A INJ 2400000	Tier 2
<i>dicloxacillin sodium cap 250 mg</i>	Tier 1
<i>dicloxacillin sodium cap 500 mg</i>	Tier 1
NAFCILLIN INJ 10GM	Tier 2
<i>nafcillin sodium for inj 1 gm</i>	Tier 1
<i>nafcillin sodium for inj 2 gm</i>	Tier 1
<i>nafcillin sodium for iv soln 1 gm</i>	Tier 1
<i>nafcillin sodium for iv soln 2 gm</i>	Tier 1
<i>nafcillin sodium for iv soln 10 gm</i>	Tier 2
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
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<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	Tier 1
<i>oxacillin sodium for inj 10 gm (base equivalent)</i>	Tier 2
PEN G PROC INJ 600000	Tier 2
PENICILL GK/ INJ DEX 2MU	Tier 2
PENICILL GK/ INJ DEX 3MU	Tier 2
<i>penicillin g potassium for inj 5000000 unit</i>	Tier 1
<i>penicillin g potassium for inj 20000000 unit</i>	Tier 1
<i>penicillin g sodium for inj 5000000 unit</i>	Tier 1
<i>penicillin v potassium for soln 125 mg/5ml</i>	Tier 1
<i>penicillin v potassium for soln 250 mg/5ml</i>	Tier 1
<i>penicillin v potassium tab 250 mg</i>	Tier 1
<i>penicillin v potassium tab 500 mg</i>	Tier 1
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	Tier 1
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	Tier 1
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	Tier 1
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	Tier 1
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	Tier 1

TETRACYCLINES - DRUGS TO TREAT INFECTIONS

<i>doxy 100 inj 100mg</i>	Tier 1
<i>doxycycline hyclate cap 50 mg</i>	Tier 1
<i>doxycycline hyclate cap 100 mg</i>	Tier 1
<i>doxycycline hyclate for inj 100 mg</i>	Tier 1
<i>doxycycline hyclate tab 20 mg</i>	Tier 1
<i>doxycycline hyclate tab 100 mg</i>	Tier 1
<i>doxycycline monohydrate cap 50 mg</i>	Tier 1
<i>doxycycline monohydrate cap 100 mg</i>	Tier 1
<i>doxycycline monohydrate tab 50 mg</i>	Tier 1
<i>doxycycline monohydrate tab 75 mg</i>	Tier 1
<i>doxycycline monohydrate tab 100 mg</i>	Tier 1
<i>doxycycline monohydrate tab 150 mg</i>	Tier 1
<i>minocycline hcl cap 50 mg</i>	Tier 1
<i>minocycline hcl cap 75 mg</i>	Tier 1
<i>minocycline hcl cap 100 mg</i>	Tier 1
<i>tetracycline hcl cap 250 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>tetracycline hcl cap 500 mg</i>	Tier 1	
ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER		
ALKYLATING AGENTS		
BENDEKA INJ 100/4ML	Tier 2	B/D
<i>cyclophosphamide cap 25 mg</i>	Tier 1	B/D
<i>cyclophosphamide cap 50 mg</i>	Tier 1	B/D
<i>cyclophosphamide for inj 1 gm</i>	Tier 2	B/D
<i>cyclophosphamide for inj 2 gm</i>	Tier 2	B/D
<i>cyclophosphamide for inj 500 mg</i>	Tier 2	B/D
<i>dacarbazine for inj 100 mg</i>	Tier 1	B/D
EMCYT CAP 140MG	Tier 2	
GLEOSTINE CAP 10MG	Tier 2	
GLEOSTINE CAP 40MG	Tier 2	
GLEOSTINE CAP 100MG	Tier 2	
IFEX INJ 3GM	Tier 2	B/D
IFOSFAMIDE INJ 3GM	Tier 2	B/D
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	Tier 1	B/D
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	Tier 1	B/D
LEUKERAN TAB 2MG	Tier 2	
ANTHRACYCLINES		
<i>adriamycin inj 20mg</i>	Tier 1	B/D
<i>doxorubicin hcl for inj 50 mg</i>	Tier 1	B/D
<i>doxorubicin hcl inj 2 mg/ml</i>	Tier 1	B/D
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	Tier 2	B/D
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	Tier 1	B/D
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	Tier 1	B/D
ANTIBIOTICS		
<i>bleomycin sulfate for inj 15 unit</i>	Tier 1	B/D
<i>bleomycin sulfate for inj 30 unit</i>	Tier 1	B/D
<i>mitomycin for iv soln 5 mg</i>	Tier 2	B/D
<i>mitomycin for iv soln 20 mg</i>	Tier 2	B/D
<i>mitomycin for iv soln 40 mg</i>	Tier 2	B/D
ANTIMETABOLITES		
<i>adrucil inj 2.5g/50m</i>	Tier 1	B/D
<i>adrucil inj 5gm/100m</i>	Tier 1	B/D
<i>adrucil inj 500/10ml</i>	Tier 1	B/D
ALIMTA INJ 100MG	Tier 2	B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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ALIMTA INJ 500MG	Tier 2	B/D
<i>azacitidine for inj 100 mg</i>	Tier 2	B/D
<i>cytarabine inj 20 mg/ml</i>	Tier 1	B/D
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	Tier 1	B/D
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	Tier 1	B/D
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	Tier 1	B/D
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	Tier 1	B/D
<i>gemcitabine hcl for inj 1 gm</i>	Tier 1	B/D
<i>gemcitabine hcl for inj 2 gm</i>	Tier 1	B/D
<i>gemcitabine hcl for inj 200 mg</i>	Tier 1	B/D
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	Tier 1	B/D
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	Tier 1	B/D
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	Tier 1	B/D
<i>mercaptopurine tab 50 mg</i>	Tier 1	
<i>methotrexate sodium for inj 1 gm</i>	Tier 1	B/D
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	Tier 1	B/D
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	Tier 1	B/D
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	Tier 1	B/D
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	Tier 1	B/D
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	Tier 1	B/D
PURIXAN SUS 20MG/ML	Tier 2	
TABLOID TAB 40MG	Tier 2	

ANTIMITOTIC, TAXOIDS

ABRAXANE INJ 100MG	Tier 2	B/D
<i>docetaxel for inj conc 20 mg/ml</i>	Tier 2	B/D
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	Tier 2	B/D
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	Tier 2	B/D
DOCETAXEL INJ 20MG/2ML	Tier 2	B/D
DOCETAXEL INJ 80MG/4ML	Tier 2	B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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DOCETAXEL INJ 80MG/8ML	Tier 2	B/D
DOCETAXEL INJ 160/8ML	Tier 2	B/D
DOCETAXEL INJ 160/16ML	Tier 2	B/D
DOCETAXEL INJ 200/10	Tier 2	B/D
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	Tier 2	B/D
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	Tier 2	B/D
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	Tier 2	B/D
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	Tier 1	B/D
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	Tier 1	B/D
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	Tier 1	B/D
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	Tier 1	B/D
TAXOTERE INJ 80MG/4ML	Tier 2	B/D

ANTIMITOTIC, VINCA ALKALOIDS

<i>vinblastine sulfate inj 1 mg/ml</i>	Tier 1	B/D
<i>vincristine sulfate iv soln 1 mg/ml</i>	Tier 1	B/D
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	Tier 1	B/D
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	Tier 1	B/D

BIOLOGIC RESPONSE MODIFIERS

AVASTIN INJ	Tier 2	LA, PA
AVASTIN INJ 400/16ML	Tier 2	LA, PA
BORTEZOMIB INJ 3.5MG	Tier 2	PA
DAURISMO TAB 25MG	Tier 2	LA, PA
DAURISMO TAB 100MG	Tier 2	LA, PA
ERIVEDGE CAP 150MG	Tier 2	LA, PA
FARYDAK CAP 10MG	Tier 2	LA, PA
FARYDAK CAP 15MG	Tier 2	LA, PA
FARYDAK CAP 20MG	Tier 2	LA, PA
HERCEP HYLEC SOL 60-10000	Tier 2	PA
HERCEPTIN INJ 150MG	Tier 2	PA
HERCEPTIN INJ 440MG	Tier 2	PA
IBRANCE CAP 75MG	Tier 2	LA, PA
IBRANCE CAP 100MG	Tier 2	LA, PA
IBRANCE CAP 125MG	Tier 2	LA, PA
IDHIFA TAB 50MG	Tier 2	LA, PA
IDHIFA TAB 100MG	Tier 2	LA, PA
KADCYLA INJ 100MG	Tier 2	B/D
KADCYLA INJ 160MG	Tier 2	B/D

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

KEYTRUDA INJ 100MG/4M	Tier 2	PA
KEYTRUDA SOL 50MG	Tier 2	PA
KISQALI 200 PAK FEMARA	Tier 2	PA
KISQALI 400 PAK FEMARA	Tier 2	PA
KISQALI 600 PAK FEMARA	Tier 2	PA
KISQALI TAB 200DOSE	Tier 2	PA
KISQALI TAB 400DOSE	Tier 2	PA
KISQALI TAB 600DOSE	Tier 2	PA
LYNPARZA TAB 100MG	Tier 2	LA, PA
LYNPARZA TAB 150MG	Tier 2	LA, PA
MYLOTARG INJ 4.5MG	Tier 2	LA, PA
NINLARO CAP 2.3MG	Tier 2	PA
NINLARO CAP 3MG	Tier 2	PA
NINLARO CAP 4MG	Tier 2	PA
ODOMZO CAP 200MG	Tier 2	LA, PA
RITUXAN INJ 100MG	Tier 2	LA, PA
RITUXAN INJ 500MG	Tier 2	LA, PA
RITUXAN INJ HYCELA	Tier 2	LA, PA
RUBRACA TAB 200MG	Tier 2	LA, PA
RUBRACA TAB 250MG	Tier 2	LA, PA
RUBRACA TAB 300MG	Tier 2	LA, PA
TALZENNA CAP 0.25MG	Tier 2	LA, PA
TALZENNA CAP 1MG	Tier 2	LA, PA
TECENTRIQ INJ 840/14	Tier 2	LA, PA
TECENTRIQ INJ 1200/20	Tier 2	LA, PA
TIBSOVO TAB 250MG	Tier 2	LA, PA
VELCADE INJ 3.5MG	Tier 2	PA
VENCLEXTA TAB 10MG	Tier 2	LA, PA
VENCLEXTA TAB 50MG	Tier 2	LA, PA
VENCLEXTA TAB 100MG	Tier 2	LA, PA
VENCLEXTA TAB START PK	Tier 2	LA, PA
VERZENIO TAB 50MG	Tier 2	LA, PA
VERZENIO TAB 100MG	Tier 2	LA, PA
VERZENIO TAB 150MG	Tier 2	LA, PA
VERZENIO TAB 200MG	Tier 2	LA, PA
ZEJULA CAP 100MG	Tier 2	LA, PA
ZOLINZA CAP 100MG	Tier 2	PA
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate tab 250 mg</i>	Tier 2	PA
<i>anastrozole tab 1 mg</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>bicalutamide tab 50 mg</i>	Tier 1	
DEPO-PROVERA INJ 400/ML	Tier 2	B/D
ERLEADA TAB 60MG	Tier 2	LA, PA
<i>exemestane tab 25 mg</i>	Tier 1	
FASLODEX INJ 250/5ML	Tier 2	B/D
<i>flutamide cap 125 mg</i>	Tier 1	
<i>fulvestrant inj 250 mg/5ml</i>	Tier 2	B/D
<i>letrozole tab 2.5 mg</i>	Tier 1	
<i>leuprolide acetate inj kit 5 mg/ml</i>	Tier 1	PA
LUPRON DEPOT INJ 3.75MG	Tier 2	PA
LUPRON DEPOT INJ 11.25MG	Tier 2	PA
LYSODREN TAB 500MG	Tier 2	
<i>megestrol acetate susp 40 mg/ml</i>	Tier 2	
<i>megestrol acetate susp 625 mg/5ml</i>	Tier 2	PA
<i>megestrol acetate tab 20 mg</i>	Tier 2	
<i>megestrol acetate tab 40 mg</i>	Tier 2	
<i>nilutamide tab 150 mg</i>	Tier 2	
NUBEQA TAB 300MG	Tier 2	LA, PA
SOLTAMOX SOL 10MG/5ML	Tier 2	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	Tier 1	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	Tier 1	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	Tier 2	
TRELSTAR MIX INJ 3.75MG	Tier 2	PA
TRELSTAR MIX INJ 11.25MG	Tier 2	PA
XTANDI CAP 40MG	Tier 2	LA, PA
ZYTIGA TAB 500MG	Tier 2	LA, PA

IMMUNOMODULATORS

POMALYST CAP 1MG	Tier 2	LA, PA
POMALYST CAP 2MG	Tier 2	LA, PA
POMALYST CAP 3MG	Tier 2	LA, PA
POMALYST CAP 4MG	Tier 2	LA, PA
REVLIMID CAP 2.5MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 5MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 10MG	Tier 2	QL (28 caps / 28 days), LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
REVLIMID CAP 15MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 20MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 25MG	Tier 2	QL (28 caps / 28 days), LA, PA
THALOMID CAP 50MG	Tier 2	QL (30 caps / 30 days), PA
THALOMID CAP 100MG	Tier 2	QL (30 caps / 30 days), PA
THALOMID CAP 150MG	Tier 2	QL (60 caps / 30 days), PA
THALOMID CAP 200MG	Tier 2	QL (60 caps / 30 days), PA

KINASE INHIBITORS

AFINITOR DIS TAB 2MG	Tier 2	NDS, QL (150 tabs / 30 days), PA
AFINITOR DIS TAB 3MG	Tier 2	NDS, QL (90 tabs / 30 days), PA
AFINITOR DIS TAB 5MG	Tier 2	NDS, QL (60 tabs / 30 days), PA
AFINITOR TAB 2.5MG	Tier 2	QL (30 tabs / 30 days), PA
AFINITOR TAB 5MG	Tier 2	QL (30 tabs / 30 days), PA
AFINITOR TAB 7.5MG	Tier 2	QL (30 tabs / 30 days), PA
AFINITOR TAB 10MG	Tier 2	QL (30 tabs / 30 days), PA
ALECENSA CAP 150MG	Tier 2	LA, PA
ALUNBRIG PAK	Tier 2	LA, PA
ALUNBRIG TAB 30MG	Tier 2	LA, PA
ALUNBRIG TAB 90MG	Tier 2	LA, PA
ALUNBRIG TAB 180MG	Tier 2	LA, PA
BALVERSA TAB 3MG	Tier 2	LA, PA
BALVERSA TAB 4MG	Tier 2	LA, PA
BALVERSA TAB 5MG	Tier 2	LA, PA
BOSULIF TAB 100MG	Tier 2	PA
BOSULIF TAB 400MG	Tier 2	PA
BOSULIF TAB 500MG	Tier 2	PA
BRAFTOVI CAP 75MG	Tier 2	LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
CABOMETYX TAB 20MG	Tier 2	QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 40MG	Tier 2	QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 60MG	Tier 2	QL (30 tabs / 30 days), LA, PA
CALQUENCE CAP 100MG	Tier 2	LA, PA
CAPRELSA TAB 100MG	Tier 2	LA, PA
CAPRELSA TAB 300MG	Tier 2	LA, PA
COMETRIQ KIT 60MG	Tier 2	LA, PA
COMETRIQ KIT 100MG	Tier 2	LA, PA
COMETRIQ KIT 140MG	Tier 2	LA, PA
COPIKTRA CAP 15MG	Tier 2	LA, PA
COPIKTRA CAP 25MG	Tier 2	LA, PA
COTELLIC TAB 20MG	Tier 2	LA, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	Tier 2	QL (90 tabs / 30 days), PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	Tier 2	QL (30 tabs / 30 days), PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	Tier 2	QL (30 tabs / 30 days), PA
GILOTRIF TAB 20MG	Tier 2	LA, PA
GILOTRIF TAB 30MG	Tier 2	LA, PA
GILOTRIF TAB 40MG	Tier 2	LA, PA
ICLUSIG TAB 15MG	Tier 2	LA, PA
ICLUSIG TAB 45MG	Tier 2	LA, PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	Tier 2	QL (90 tabs / 30 days), PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	Tier 2	QL (60 tabs / 30 days), PA
IMBRUVICA CAP 70MG	Tier 2	LA, PA
IMBRUVICA CAP 140MG	Tier 2	LA, PA
IMBRUVICA TAB 140MG	Tier 2	LA, PA
IMBRUVICA TAB 280MG	Tier 2	LA, PA
IMBRUVICA TAB 420MG	Tier 2	LA, PA
IMBRUVICA TAB 560MG	Tier 2	LA, PA
INLYTA TAB 1MG	Tier 2	QL (180 tabs / 30 days), LA, PA
INLYTA TAB 5MG	Tier 2	QL (120 tabs / 30 days), LA, PA
INREBIC CAP 100MG	Tier 2	LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
IRESSA TAB 250MG	Tier 2	LA, PA
JAKAFI TAB 5MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 10MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 15MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 20MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 25MG	Tier 2	QL (60 tabs / 30 days), LA, PA
LENVIMA CAP 4MG	Tier 2	LA, PA
LENVIMA CAP 8 MG	Tier 2	LA, PA
LENVIMA CAP 10 MG	Tier 2	LA, PA
LENVIMA CAP 12MG	Tier 2	LA, PA
LENVIMA CAP 14 MG	Tier 2	LA, PA
LENVIMA CAP 18 MG	Tier 2	LA, PA
LENVIMA CAP 20 MG	Tier 2	LA, PA
LENVIMA CAP 24 MG	Tier 2	LA, PA
LORBRENA TAB 25MG	Tier 2	LA, PA
LORBRENA TAB 100MG	Tier 2	LA, PA
MEKINIST TAB 0.5MG	Tier 2	LA, PA
MEKINIST TAB 2MG	Tier 2	LA, PA
MEKTOVI TAB 15MG	Tier 2	LA, PA
NERLYNX TAB 40MG	Tier 2	LA, PA
NEXAVAR TAB 200MG	Tier 2	LA, PA
PIQRAY 200MG TAB DOSE	Tier 2	PA
PIQRAY 250MG TAB DOSE	Tier 2	PA
PIQRAY 300MG TAB DOSE	Tier 2	PA
RYDAPT CAP 25MG	Tier 2	PA
SPRYCEL TAB 20MG	Tier 2	PA
SPRYCEL TAB 50MG	Tier 2	PA
SPRYCEL TAB 70MG	Tier 2	PA
SPRYCEL TAB 80MG	Tier 2	PA
SPRYCEL TAB 100MG	Tier 2	PA
SPRYCEL TAB 140MG	Tier 2	PA
STIVARGA TAB 40MG	Tier 2	LA, PA
SUTENT CAP 12.5MG	Tier 2	PA
SUTENT CAP 25MG	Tier 2	PA
SUTENT CAP 37.5MG	Tier 2	PA
SUTENT CAP 50MG	Tier 2	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 DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE
TAFINLAR CAP 50MG	Tier 2	LA, PA
TAFINLAR CAP 75MG	Tier 2	LA, PA
TAGRISSO TAB 40MG	Tier 2	LA, PA
TAGRISSO TAB 80MG	Tier 2	LA, PA
TARCEVA TAB 25MG	Tier 2	QL (90 tabs / 30 days), LA, PA
TARCEVA TAB 100MG	Tier 2	QL (30 tabs / 30 days), LA, PA
TARCEVA TAB 150MG	Tier 2	QL (30 tabs / 30 days), LA, PA
TASIGNA CAP 50MG	Tier 2	PA
TASIGNA CAP 150MG	Tier 2	PA
TASIGNA CAP 200MG	Tier 2	PA
TURALIO CAP 200MG	Tier 2	LA, PA
TYKERB TAB 250MG	Tier 2	LA, PA
VITRAKVI CAP 25MG	Tier 2	LA, PA
VITRAKVI CAP 100MG	Tier 2	LA, PA
VITRAKVI SOL 20MG/ML	Tier 2	LA, PA
VIZIMPRO TAB 15MG	Tier 2	LA, PA
VIZIMPRO TAB 30MG	Tier 2	LA, PA
VIZIMPRO TAB 45MG	Tier 2	LA, PA
VOTRIENT TAB 200MG	Tier 2	LA, PA
XALKORI CAP 200MG	Tier 2	LA, PA
XALKORI CAP 250MG	Tier 2	LA, PA
XOSPATA TAB 40MG	Tier 2	LA, PA
ZELBORAF TAB 240MG	Tier 2	LA, PA
ZYDELIG TAB 100MG	Tier 2	LA, PA
ZYDELIG TAB 150MG	Tier 2	LA, PA
ZYKADIA CAP 150MG	Tier 2	LA, PA
ZYKADIA TAB 150MG	Tier 2	LA, PA

MISCELLANEOUS

<i>bexarotene cap 75 mg</i>	Tier 2	PA
<i>hydroxyurea cap 500 mg</i>	Tier 1	
LONSURF TAB 15-6.14	Tier 2	PA
LONSURF TAB 20-8.19	Tier 2	PA
MATULANE CAP 50MG	Tier 2	LA
SYLATRON KIT 200MCG	Tier 2	PA
SYLATRON KIT 300MCG	Tier 2	PA
SYLATRON KIT 600MCG	Tier 2	PA
SYNRIBO INJ 3.5MG	Tier 2	PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>tretinoin cap 10 mg</i>	Tier 2	
XPOVIO PAK 60MG	Tier 2	LA, PA
XPOVIO PAK 80MG	Tier 2	LA, PA
XPOVIO PAK 100MG	Tier 2	LA, PA

PLATINUM-BASED AGENTS

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

PROTECTIVE AGENTS

<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	Tier 2	B/D
<i>leucovorin calcium for inj 50 mg</i>	Tier 1	B/D
<i>leucovorin calcium for inj 100 mg</i>	Tier 1	B/D
<i>leucovorin calcium for inj 200 mg</i>	Tier 1	B/D
<i>leucovorin calcium for inj 350 mg</i>	Tier 1	B/D
<i>leucovorin calcium for inj 500 mg</i>	Tier 1	B/D
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	Tier 1	B/D
<i>leucovorin calcium tab 5 mg</i>	Tier 1	
<i>leucovorin calcium tab 10 mg</i>	Tier 1	
<i>leucovorin calcium tab 15 mg</i>	Tier 1	
<i>leucovorin calcium tab 25 mg</i>	Tier 1	
MESNEX TAB 400MG	Tier 2	

TOPOISOMERASE INHIBITORS

<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	Tier 1	B/D
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	Tier 1	B/D
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	Tier 1	B/D
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	Tier 1	B/D
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	Tier 1	B/D
<i>toposar inj 1gm/50ml</i>	Tier 1	B/D
<i>toposar inj 100/5ml</i>	Tier 1	B/D
<i>topotecan hcl for inj 4 mg (base equiv)</i>	Tier 2	B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	Tier 2 B/D
TOPOTECAN INJ 4MG/4ML	Tier 2 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>	Tier 1
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	Tier 1
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	Tier 1
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	Tier 1
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	Tier 1
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	Tier 1
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	Tier 1
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	Tier 1
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	Tier 1
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	Tier 1
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	Tier 1
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	Tier 1
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	Tier 1
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	Tier 1
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1
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<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1
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<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1
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<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	Tier 1
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<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	Tier 1
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<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1
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<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	Tier 1
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ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>benazepril hcl tab 5 mg</i>	Tier 1
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<i>benazepril hcl tab 10 mg</i>	Tier 1
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<i>benazepril hcl tab 20 mg</i>	Tier 1
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<i>benazepril hcl tab 40 mg</i>	Tier 1
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<i>captopril tab 12.5 mg</i>	Tier 1
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<i>captopril tab 25 mg</i>	Tier 1
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<i>captopril tab 50 mg</i>	Tier 1
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<i>captopril tab 100 mg</i>	Tier 1
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<i>enalapril maleate tab 2.5 mg</i>	Tier 1
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<i>enalapril maleate tab 5 mg</i>	Tier 1
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<i>enalapril maleate tab 10 mg</i>	Tier 1
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<i>enalapril maleate tab 20 mg</i>	Tier 1
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<i>fosinopril sodium tab 10 mg</i>	Tier 1
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<i>fosinopril sodium tab 20 mg</i>	Tier 1
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<i>fosinopril sodium tab 40 mg</i>	Tier 1
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<i>lisinopril tab 2.5 mg</i>	Tier 1
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<i>lisinopril tab 5 mg</i>	Tier 1
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<i>lisinopril tab 10 mg</i>	Tier 1
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<i>lisinopril tab 20 mg</i>	Tier 1
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<i>lisinopril tab 30 mg</i>	Tier 1
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<i>lisinopril tab 40 mg</i>	Tier 1
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<i>moexipril hcl tab 7.5 mg</i>	Tier 1
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<i>moexipril hcl tab 15 mg</i>	Tier 1
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<i>perindopril erbumine tab 2 mg</i>	Tier 1
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<i>perindopril erbumine tab 4 mg</i>	Tier 1
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<i>perindopril erbumine tab 8 mg</i>	Tier 1
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<i>quinapril hcl tab 5 mg</i>	Tier 1
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>quinapril hcl tab 10 mg</i>	Tier 1
<i>quinapril hcl tab 20 mg</i>	Tier 1
<i>quinapril hcl tab 40 mg</i>	Tier 1
<i>ramipril cap 1.25 mg</i>	Tier 1
<i>ramipril cap 2.5 mg</i>	Tier 1
<i>ramipril cap 5 mg</i>	Tier 1
<i>ramipril cap 10 mg</i>	Tier 1
<i>trandolapril tab 1 mg</i>	Tier 1
<i>trandolapril tab 2 mg</i>	Tier 1
<i>trandolapril tab 4 mg</i>	Tier 1

ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>eplerenone tab 25 mg</i>	Tier 1
<i>eplerenone tab 50 mg</i>	Tier 1
<i>spironolactone tab 25 mg</i>	Tier 1
<i>spironolactone tab 50 mg</i>	Tier 1
<i>spironolactone tab 100 mg</i>	Tier 1

ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE

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

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	Tier 1
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	Tier 1
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	Tier 1
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	Tier 1
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	Tier 1
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	Tier 1
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	Tier 1
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	Tier 1
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	Tier 1
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	Tier 1
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	Tier 1
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	Tier 1
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	Tier 1
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	Tier 1
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	Tier 1
ENTRESTO TAB 24-26MG	Tier 2
ENTRESTO TAB 49-51MG	Tier 2
ENTRESTO TAB 97-103MG	Tier 2
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	Tier 1
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	Tier 1
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	Tier 1
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	Tier 1
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	Tier 1
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	Tier 1
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	Tier 1

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

ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>candesartan cilexetil tab 4 mg</i>	Tier 1
<i>candesartan cilexetil tab 8 mg</i>	Tier 1
<i>candesartan cilexetil tab 16 mg</i>	Tier 1
<i>candesartan cilexetil tab 32 mg</i>	Tier 1
<i>eprosartan mesylate tab 600 mg</i>	Tier 1
<i>irbesartan tab 75 mg</i>	Tier 1
<i>irbesartan tab 150 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>irbesartan tab 300 mg</i>	Tier 1	
<i>losartan potassium tab 25 mg</i>	Tier 1	
<i>losartan potassium tab 50 mg</i>	Tier 1	
<i>losartan potassium tab 100 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 5 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 20 mg</i>	Tier 1	
<i>olmesartan medoxomil tab 40 mg</i>	Tier 1	
<i>telmisartan tab 20 mg</i>	Tier 1	
<i>telmisartan tab 40 mg</i>	Tier 1	
<i>telmisartan tab 80 mg</i>	Tier 1	
<i>valsartan tab 40 mg</i>	Tier 1	
<i>valsartan tab 80 mg</i>	Tier 1	
<i>valsartan tab 160 mg</i>	Tier 1	
<i>valsartan tab 320 mg</i>	Tier 1	

ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM

<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	Tier 1	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	Tier 1	
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	Tier 1	
<i>amiodarone hcl tab 100 mg</i>	Tier 1	
<i>amiodarone hcl tab 200 mg</i>	Tier 1	
<i>amiodarone hcl tab 400 mg</i>	Tier 1	
<i>disopyramide phosphate cap 100 mg</i>	Tier 2	
<i>disopyramide phosphate cap 150 mg</i>	Tier 2	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	Tier 1	
<i>dofetilide cap 250 mcg (0.25 mg)</i>	Tier 1	
<i>dofetilide cap 500 mcg (0.5 mg)</i>	Tier 1	
<i>flecainide acetate tab 50 mg</i>	Tier 1	
<i>flecainide acetate tab 100 mg</i>	Tier 1	
<i>flecainide acetate tab 150 mg</i>	Tier 1	
<i>mexiletine hcl cap 150 mg</i>	Tier 1	
<i>mexiletine hcl cap 200 mg</i>	Tier 1	
<i>mexiletine hcl cap 250 mg</i>	Tier 1	
MULTAQ TAB 400MG	Tier 2	
NORPACE CAP 100MG CR	Tier 2	
NORPACE CAP 150MG CR	Tier 2	
<i>pacerone tab 100mg</i>	Tier 1	
<i>pacerone tab 200mg</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>pacerone tab 400mg</i>	Tier 1	
<i>propafenone hcl cap er 12hr 225 mg</i>	Tier 1	
<i>propafenone hcl cap er 12hr 325 mg</i>	Tier 1	
<i>propafenone hcl cap er 12hr 425 mg</i>	Tier 1	
<i>propafenone hcl tab 150 mg</i>	Tier 1	
<i>propafenone hcl tab 225 mg</i>	Tier 1	
<i>propafenone hcl tab 300 mg</i>	Tier 1	
<i>quinidine gluconate tab er 324 mg</i>	Tier 1	
<i>quinidine sulfate tab 200 mg</i>	Tier 1	
<i>quinidine sulfate tab 300 mg</i>	Tier 1	
<i>sorine tab 80mg</i>	Tier 1	
<i>sorine tab 120mg</i>	Tier 1	
<i>sorine tab 160mg</i>	Tier 1	
<i>sorine tab 240mg</i>	Tier 1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	Tier 1	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	Tier 1	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	Tier 1	
<i>sotalol hcl tab 80 mg</i>	Tier 1	
<i>sotalol hcl tab 120 mg</i>	Tier 1	
<i>sotalol hcl tab 160 mg</i>	Tier 1	
<i>sotalol hcl tab 240 mg</i>	Tier 1	

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

<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	Tier 1	
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	Tier 1	
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	Tier 1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	Tier 1	
<i>lovastatin tab 10 mg</i>	Tier 1	
<i>lovastatin tab 20 mg</i>	Tier 1	
<i>lovastatin tab 40 mg</i>	Tier 1	
<i>pravastatin sodium tab 10 mg</i>	Tier 1	
<i>pravastatin sodium tab 20 mg</i>	Tier 1	
<i>pravastatin sodium tab 40 mg</i>	Tier 1	
<i>pravastatin sodium tab 80 mg</i>	Tier 1	
<i>rosuvastatin calcium tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 10 mg</i>	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>rosuvastatin calcium tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 40 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>simvastatin tab 5 mg</i>	Tier 1	
<i>simvastatin tab 10 mg</i>	Tier 1	
<i>simvastatin tab 20 mg</i>	Tier 1	
<i>simvastatin tab 40 mg</i>	Tier 1	
<i>simvastatin tab 80 mg</i>	Tier 1	QL (30 tabs / 30 days)

ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>cholestyramine light powder 4 gm/dose</i>	Tier 1	
<i>cholestyramine light powder packets 4 gm</i>	Tier 1	
<i>cholestyramine powder 4 gm/dose</i>	Tier 1	
<i>cholestyramine powder packets 4 gm</i>	Tier 1	
<i>colesevelam hcl packet for susp 3.75 gm</i>	Tier 1	
<i>colesevelam hcl tab 625 mg</i>	Tier 1	
<i>colestipol hcl granule packets 5 gm</i>	Tier 1	
<i>colestipol hcl granules 5 gm</i>	Tier 1	
<i>colestipol hcl tab 1 gm</i>	Tier 1	
<i>ezetimibe tab 10 mg</i>	Tier 1	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	Tier 1	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	Tier 1	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	Tier 1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	Tier 1	
<i>fenofibrate micronized cap 67 mg</i>	Tier 1	
<i>fenofibrate micronized cap 134 mg</i>	Tier 1	
<i>fenofibrate micronized cap 200 mg</i>	Tier 1	
<i>fenofibrate tab 48 mg</i>	Tier 1	
<i>fenofibrate tab 54 mg</i>	Tier 1	
<i>fenofibrate tab 145 mg</i>	Tier 1	
<i>fenofibrate tab 160 mg</i>	Tier 1	
<i>gemfibrozil tab 600 mg</i>	Tier 1	
JUXTAPID CAP 5MG	Tier 2	LA, PA
JUXTAPID CAP 10MG	Tier 2	LA, PA
JUXTAPID CAP 20MG	Tier 2	LA, PA
JUXTAPID CAP 30MG	Tier 2	LA, PA
JUXTAPID CAP 40MG	Tier 2	LA, PA
JUXTAPID CAP 60MG	Tier 2	LA, PA
KYNAMRO INJ 200MG/ML	Tier 2	PA
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	Tier 1	QL (90 tabs / 30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	Tier 1
<i>niacor tab 500mg</i>	Tier 1
PRALUENT INJ 75MG/ML	Tier 2 PA
PRALUENT INJ 150MG/ML	Tier 2 PA
<i>prevalite pow 4gm</i>	Tier 1
<i>prevalite pow 4gm pk</i>	Tier 1
VASCEPA CAP 0.5GM	Tier 2
VASCEPA CAP 1GM	Tier 2

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

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

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

<i>acebutolol hcl cap 200 mg</i>	Tier 1
<i>acebutolol hcl cap 400 mg</i>	Tier 1
<i>atenolol tab 25 mg</i>	Tier 1
<i>atenolol tab 50 mg</i>	Tier 1
<i>atenolol tab 100 mg</i>	Tier 1
<i>betaxolol hcl tab 10 mg</i>	Tier 1
<i>betaxolol hcl tab 20 mg</i>	Tier 1
<i>bisoprolol fumarate tab 5 mg</i>	Tier 1
<i>bisoprolol fumarate tab 10 mg</i>	Tier 1
BYSTOLIC TAB 2.5MG	Tier 2 QL (30 tabs / 30 days)

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>timolol maleate tab 10 mg</i>	Tier 1
<i>timolol maleate tab 20 mg</i>	Tier 1

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

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	Tier 1
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	Tier 1
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	Tier 1
<i>diltiazem hcl cap er 12hr 60 mg</i>	Tier 1
<i>diltiazem hcl cap er 12hr 90 mg</i>	Tier 1
<i>diltiazem hcl cap er 12hr 120 mg</i>	Tier 1
<i>diltiazem hcl cap er 24hr 120 mg</i>	Tier 1
<i>diltiazem hcl cap er 24hr 180 mg</i>	Tier 1
<i>diltiazem hcl cap er 24hr 240 mg</i>	Tier 1
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	Tier 1
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	Tier 1
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	Tier 1
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	Tier 1
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	Tier 1
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	Tier 1
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	Tier 1
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	Tier 1
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	Tier 1
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	Tier 1
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	Tier 1
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	Tier 1
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	Tier 1
<i>diltiazem hcl tab 30 mg</i>	Tier 1
<i>diltiazem hcl tab 60 mg</i>	Tier 1
<i>diltiazem hcl tab 90 mg</i>	Tier 1
<i>diltiazem hcl tab 120 mg</i>	Tier 1
<i>felodipine tab er 24hr 2.5 mg</i>	Tier 1
<i>felodipine tab er 24hr 5 mg</i>	Tier 1
<i>felodipine tab er 24hr 10 mg</i>	Tier 1
<i>isradipine cap 2.5 mg</i>	Tier 1
<i>isradipine cap 5 mg</i>	Tier 1
<i>nicardipine hcl cap 20 mg</i>	Tier 1
<i>nicardipine hcl cap 30 mg</i>	Tier 1
<i>nifedipine tab er 24hr 30 mg</i>	Tier 1
<i>nifedipine tab er 24hr 60 mg</i>	Tier 1
<i>nifedipine tab er 24hr 90 mg</i>	Tier 1
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	Tier 1
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	Tier 1
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	Tier 1
<i>nimodipine cap 30 mg</i>	Tier 2
NYMALIZE SOL 30/10ML	Tier 2
<i>taztia xt cap 120mg/24</i>	Tier 1
<i>taztia xt cap 180mg/24</i>	Tier 1
<i>taztia xt cap 240mg/24</i>	Tier 1
<i>taztia xt cap 300mg er</i>	Tier 1
<i>taztia xt cap 360mg/24</i>	Tier 1
<i>verapamil hcl cap er 24hr 100 mg</i>	Tier 1
<i>verapamil hcl cap er 24hr 120 mg</i>	Tier 1
<i>verapamil hcl cap er 24hr 180 mg</i>	Tier 1
<i>verapamil hcl cap er 24hr 200 mg</i>	Tier 1
<i>verapamil hcl cap er 24hr 240 mg</i>	Tier 1
<i>verapamil hcl cap er 24hr 300 mg</i>	Tier 1
<i>verapamil hcl cap er 24hr 360 mg</i>	Tier 1
<i>verapamil hcl iv soln 2.5 mg/ml</i>	Tier 1
<i>verapamil hcl tab 40 mg</i>	Tier 1
<i>verapamil hcl tab 80 mg</i>	Tier 1
<i>verapamil hcl tab 120 mg</i>	Tier 1
<i>verapamil hcl tab er 120 mg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>verapamil hcl tab er 180 mg</i>	Tier 1
<i>verapamil hcl tab er 240 mg</i>	Tier 1
<i>DIGITALIS GLYCOSIDES - DRUGS TO TREAT HEART CONDITIONS</i>	
<i>digitek tab 0.25mg</i>	Tier 1 PA; PA if 70 years and older
<i>digitek tab 0.125mg</i>	Tier 1 QL (30 tabs / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	Tier 1
<i>digoxin oral soln 0.05 mg/ml</i>	Tier 1 PA; PA if 70 years and older
<i>digoxin tab 125 mcg (0.125 mg)</i>	Tier 1 QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	Tier 1 PA; PA if 70 years and older
<i>DIRECT RENIN INHIBITORS/COMBINATIONS - DRUGS TO TREAT HEART CONDITIONS</i>	
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	Tier 1
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	Tier 1
TEKTURNA HCT TAB 150-12.5	Tier 2
TEKTURNA HCT TAB 150-25MG	Tier 2
TEKTURNA HCT TAB 300-12.5	Tier 2
TEKTURNA HCT TAB 300-25MG	Tier 2
TEKTURNA TAB 150MG	Tier 2
TEKTURNA TAB 300MG	Tier 2
<i>DIURETICS - DRUGS TO TREAT HEART CONDITIONS</i>	
<i>acetazolamide cap er 12hr 500 mg</i>	Tier 1
<i>acetazolamide tab 125 mg</i>	Tier 1
<i>acetazolamide tab 250 mg</i>	Tier 1
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	Tier 1
<i>amiloride hcl tab 5 mg</i>	Tier 1
<i>bumetanide inj 0.25 mg/ml</i>	Tier 1
<i>bumetanide tab 0.5 mg</i>	Tier 1
<i>bumetanide tab 1 mg</i>	Tier 1
<i>bumetanide tab 2 mg</i>	Tier 1
<i>chlorothiazide tab 250 mg</i>	Tier 1
<i>chlorothiazide tab 500 mg</i>	Tier 1
<i>chlorthalidone tab 25 mg</i>	Tier 1
<i>chlorthalidone tab 50 mg</i>	Tier 1
<i>furosemide inj 10 mg/ml</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>furosemide oral soln 8 mg/ml</i>	Tier 1	
<i>furosemide oral soln 10 mg/ml</i>	Tier 1	
<i>furosemide tab 20 mg</i>	Tier 1	
<i>furosemide tab 40 mg</i>	Tier 1	
<i>furosemide tab 80 mg</i>	Tier 1	
<i>hydrochlorothiazide cap 12.5 mg</i>	Tier 1	
<i>hydrochlorothiazide tab 12.5 mg</i>	Tier 1	
<i>hydrochlorothiazide tab 25 mg</i>	Tier 1	
<i>hydrochlorothiazide tab 50 mg</i>	Tier 1	
<i>indapamide tab 1.25 mg</i>	Tier 1	
<i>indapamide tab 2.5 mg</i>	Tier 1	
<i>methazolamide tab 25 mg</i>	Tier 1	
<i>methazolamide tab 50 mg</i>	Tier 1	
<i>methyclothiazide tab 5 mg</i>	Tier 1	
<i>metolazone tab 2.5 mg</i>	Tier 1	
<i>metolazone tab 5 mg</i>	Tier 1	
<i>metolazone tab 10 mg</i>	Tier 1	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	Tier 1	
<i>torsemide tab 5 mg</i>	Tier 1	
<i>torsemide tab 10 mg</i>	Tier 1	
<i>torsemide tab 20 mg</i>	Tier 1	
<i>torsemide tab 100 mg</i>	Tier 1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	Tier 1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	Tier 1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	Tier 1	

MISCELLANEOUS

<i>clonidine hcl tab 0.1 mg</i>	Tier 1	
<i>clonidine hcl tab 0.2 mg</i>	Tier 1	
<i>clonidine hcl tab 0.3 mg</i>	Tier 1	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	Tier 1	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	Tier 1	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	Tier 1	
CORLANOR TAB 5MG	Tier 2	
CORLANOR TAB 7.5MG	Tier 2	
DEMSER CAP 250MG	Tier 2	PA
<i>hydralazine hcl inj 20 mg/ml</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>hydralazine hcl tab 10 mg</i>	Tier 1	
<i>hydralazine hcl tab 25 mg</i>	Tier 1	
<i>hydralazine hcl tab 50 mg</i>	Tier 1	
<i>hydralazine hcl tab 100 mg</i>	Tier 1	
<i>midodrine hcl tab 2.5 mg</i>	Tier 1	
<i>midodrine hcl tab 5 mg</i>	Tier 1	
<i>midodrine hcl tab 10 mg</i>	Tier 1	
<i>minoxidil tab 2.5 mg</i>	Tier 1	
<i>minoxidil tab 10 mg</i>	Tier 1	
NORTHERA CAP 100MG	Tier 2	LA, PA
NORTHERA CAP 200MG	Tier 2	LA, PA
NORTHERA CAP 300MG	Tier 2	LA, PA
<i>ranolazine tab er 12hr 500 mg</i>	Tier 1	
<i>ranolazine tab er 12hr 1000 mg</i>	Tier 1	

NITRATES - DRUGS TO TREAT HEART CONDITIONS

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

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
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<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	Tier 1	
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PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT PULMONARY HYPERTENSION

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

CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS

ANTIANXIETY - DRUGS TO TREAT ANXIETY

<i>alprazolam tab 0.5 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>buspirone hcl tab 5 mg</i>	Tier 1	
<i>buspirone hcl tab 7.5 mg</i>	Tier 1	
<i>buspirone hcl tab 10 mg</i>	Tier 1	
<i>buspirone hcl tab 15 mg</i>	Tier 1	
<i>buspirone hcl tab 30 mg</i>	Tier 1	
<i>fluvoxamine maleate tab 25 mg</i>	Tier 1	
<i>fluvoxamine maleate tab 50 mg</i>	Tier 1	
<i>fluvoxamine maleate tab 100 mg</i>	Tier 1	
<i>lorazepam conc 2 mg/ml</i>	Tier 1	QL (150 mL / 30 days)
<i>lorazepam inj 2 mg/ml</i>	Tier 1	
<i>lorazepam inj 4 mg/ml</i>	Tier 1	
<i>lorazepam tab 0.5 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>lorazepam tab 1 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>lorazepam tab 2 mg</i>	Tier 1	QL (150 tabs / 30 days)

ANTICONVULSANTS - DRUGS TO TREAT SEIZURES

APTIOM TAB 200MG	Tier 2	QL (180 tabs / 30 days)
APTIOM TAB 400MG	Tier 2	QL (90 tabs / 30 days)
APTIOM TAB 600MG	Tier 2	QL (60 tabs / 30 days)
APTIOM TAB 800MG	Tier 2	QL (60 tabs / 30 days)
BANZEL SUS 40MG/ML	Tier 2	PA
BANZEL TAB 200MG	Tier 2	PA
BANZEL TAB 400MG	Tier 2	PA
BRIVIACT INJ 50MG/5ML	Tier 2	PA
BRIVIACT SOL 10MG/ML	Tier 2	PA
BRIVIACT TAB 10MG	Tier 2	PA
BRIVIACT TAB 25MG	Tier 2	PA
BRIVIACT TAB 50MG	Tier 2	PA
BRIVIACT TAB 75MG	Tier 2	PA
BRIVIACT TAB 100MG	Tier 2	PA
<i>carbamazepine cap er 12hr 100 mg</i>	Tier 1	
<i>carbamazepine cap er 12hr 200 mg</i>	Tier 1	
<i>carbamazepine cap er 12hr 300 mg</i>	Tier 1	

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>carbamazepine chew tab 100 mg</i>	Tier 1	
<i>carbamazepine susp 100 mg/5ml</i>	Tier 1	
<i>carbamazepine tab 200 mg</i>	Tier 1	
<i>carbamazepine tab er 12hr 100 mg</i>	Tier 1	
<i>carbamazepine tab er 12hr 200 mg</i>	Tier 1	
<i>carbamazepine tab er 12hr 400 mg</i>	Tier 1	
CELONTIN CAP 300MG	Tier 2	
<i>clobazam suspension 2.5 mg/ml</i>	Tier 1	PA
<i>clobazam tab 10 mg</i>	Tier 1	PA
<i>clobazam tab 20 mg</i>	Tier 1	PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	Tier 1	QL (300 tabs / 30 days)
<i>clonazepam tab 0.5 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	Tier 1	QL (300 tabs / 30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	Tier 1	QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 7.5 mg</i>	Tier 1	QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 15 mg</i>	Tier 1	QL (180 tabs / 30 days), PA; PA if 65 years and older
DIASTAT ACDL GEL 5-10MG	Tier 2	
DIASTAT ACDL GEL 12.5-20	Tier 2	
DIASTAT PED GEL 2.5M GEL	Tier 2	
<i>diazepam con 5mg/ml</i>	Tier 1	QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam inj 5 mg/ml</i>	Tier 1	
<i>diazepam oral soln 1 mg/ml</i>	Tier 1	QL (1200 mL / 30 days), PA; PA if 65 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>diazepam rectal gel delivery system 2.5 mg</i>	Tier 1	
<i>diazepam rectal gel delivery system 10 mg</i>	Tier 1	
<i>diazepam rectal gel delivery system 20 mg</i>	Tier 1	
<i>diazepam tab 2 mg</i>	Tier 1	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days), PA; PA if 65 years and older
DILANTIN CAP 30MG	Tier 2	
DILANTIN CAP 100MG	Tier 2	
DILANTIN CHW 50MG	Tier 2	
DILANTIN-125 SUS 125/5ML	Tier 2	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	Tier 1	
<i>divalproex sodium tab delayed release 125 mg</i>	Tier 1	
<i>divalproex sodium tab delayed release 250 mg</i>	Tier 1	
<i>divalproex sodium tab delayed release 500 mg</i>	Tier 1	
<i>divalproex sodium tab er 24 hr 250 mg</i>	Tier 1	
<i>divalproex sodium tab er 24 hr 500 mg</i>	Tier 1	
EPIDIOLEX SOL 100MG/ML	Tier 2	QL (600 mL / 30 days), LA, PA
<i>epitol tab 200mg</i>	Tier 1	
<i>ethosuximide cap 250 mg</i>	Tier 1	
<i>ethosuximide soln 250 mg/5ml</i>	Tier 1	
<i>felbamate susp 600 mg/5ml</i>	Tier 2	
<i>felbamate tab 400 mg</i>	Tier 1	
<i>felbamate tab 600 mg</i>	Tier 1	
FYCOMPA SUS 0.5MG/ML	Tier 2	QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	Tier 2	QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	Tier 2	QL (60 tabs / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FYCOMPA TAB 6MG	Tier 2	QL (60 tabs / 30 days), PA
FYCOMPA TAB 8MG	Tier 2	QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	Tier 2	QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	Tier 2	QL (30 tabs / 30 days), PA
<i>gabapentin cap 100 mg</i>	Tier 1	QL (1080 caps / 30 days)
<i>gabapentin cap 300 mg</i>	Tier 1	QL (360 caps / 30 days)
<i>gabapentin cap 400 mg</i>	Tier 1	QL (270 caps / 30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	Tier 1	QL (2160 mL / 30 days)
<i>gabapentin tab 600 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>gabapentin tab 800 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>lamotrigine tab 25 mg</i>	Tier 1	
<i>lamotrigine tab 100 mg</i>	Tier 1	
<i>lamotrigine tab 150 mg</i>	Tier 1	
<i>lamotrigine tab 200 mg</i>	Tier 1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	Tier 1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	Tier 1	
<i>lamotrigine tab er 24hr 25 mg</i>	Tier 1	
<i>lamotrigine tab er 24hr 50 mg</i>	Tier 1	
<i>lamotrigine tab er 24hr 100 mg</i>	Tier 1	
<i>lamotrigine tab er 24hr 200 mg</i>	Tier 1	
<i>lamotrigine tab er 24hr 250 mg</i>	Tier 1	
<i>lamotrigine tab er 24hr 300 mg</i>	Tier 1	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	Tier 1	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	Tier 1	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	Tier 1	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	Tier 1	
<i>levetiracetam oral soln 100 mg/ml</i>	Tier 1	
<i>levetiracetam tab 250 mg</i>	Tier 1	
<i>levetiracetam tab 500 mg</i>	Tier 1	
<i>levetiracetam tab 750 mg</i>	Tier 1	
<i>levetiracetam tab 1000 mg</i>	Tier 1	
<i>levetiracetam tab er 24hr 500 mg</i>	Tier 1	
<i>levetiracetam tab er 24hr 750 mg</i>	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LYRICA CAP 25MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 50MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 75MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 100MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 150MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 200MG	Tier 2	QL (90 caps / 30 days)
LYRICA CAP 225MG	Tier 2	QL (60 caps / 30 days)
LYRICA CAP 300MG	Tier 2	QL (60 caps / 30 days)
LYRICA SOL 20MG/ML	Tier 2	QL (946 mL / 30 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	Tier 1	
<i>oxcarbazepine tab 150 mg</i>	Tier 1	
<i>oxcarbazepine tab 300 mg</i>	Tier 1	
<i>oxcarbazepine tab 600 mg</i>	Tier 1	
PEGANONE TAB 250MG	Tier 2	
PHENOBARB INJ 65MG/ML	Tier 2	PA; PA if 70 years and older
<i>phenobarbital elixir 20 mg/5ml</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital sodium inj 130 mg/ml</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 15 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 16.2 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 30 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 32.4 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 60 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 64.8 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 97.2 mg</i>	Tier 2	PA; PA if 70 years and older
<i>phenobarbital tab 100 mg</i>	Tier 2	PA; PA if 70 years and older
PHENYTEK CAP 200MG	Tier 2	
PHENYTEK CAP 300MG	Tier 2	
<i>phenytoin chew tab 50 mg</i>	Tier 1	
<i>phenytoin sodium extended cap 100 mg</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>phenytoin sodium extended cap 200 mg</i>	Tier 1	
<i>phenytoin sodium extended cap 300 mg</i>	Tier 1	
<i>phenytoin sodium inj 50 mg/ml</i>	Tier 1	
<i>phenytoin susp 125 mg/5ml</i>	Tier 1	
<i>pregabalin cap 25 mg</i>	Tier 1	QL (120 caps / 30 days)
<i>pregabalin cap 50 mg</i>	Tier 1	QL (120 caps / 30 days)
<i>pregabalin cap 75 mg</i>	Tier 1	QL (120 caps / 30 days)
<i>pregabalin cap 100 mg</i>	Tier 1	QL (120 caps / 30 days)
<i>pregabalin cap 150 mg</i>	Tier 1	QL (120 caps / 30 days)
<i>pregabalin cap 200 mg</i>	Tier 1	QL (90 caps / 30 days)
<i>pregabalin cap 225 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>pregabalin cap 300 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>pregabalin soln 20 mg/ml</i>	Tier 1	QL (946 mL / 30 days)
<i>primidone tab 50 mg</i>	Tier 1	
<i>primidone tab 250 mg</i>	Tier 1	
<i>roweepra tab 500mg</i>	Tier 1	
<i>roweepra tab 750mg</i>	Tier 1	
<i>roweepra tab 1000mg</i>	Tier 1	
<i>roweepra xr tab 500mg xr</i>	Tier 1	
<i>roweepra xr tab 750mg xr</i>	Tier 1	
SPRITAM TAB 250MG	Tier 2	
SPRITAM TAB 500MG	Tier 2	
SPRITAM TAB 750MG	Tier 2	
SPRITAM TAB 1000MG	Tier 2	
SYMPAZAN MIS 5MG	Tier 2	PA
SYMPAZAN MIS 10MG	Tier 2	PA
SYMPAZAN MIS 20MG	Tier 2	PA
<i>tiagabine hcl tab 2 mg</i>	Tier 1	
<i>tiagabine hcl tab 4 mg</i>	Tier 1	
<i>tiagabine hcl tab 12 mg</i>	Tier 1	
<i>tiagabine hcl tab 16 mg</i>	Tier 1	
<i>topiramate sprinkle cap 15 mg</i>	Tier 1	
<i>topiramate sprinkle cap 25 mg</i>	Tier 1	
<i>topiramate tab 25 mg</i>	Tier 1	
<i>topiramate tab 50 mg</i>	Tier 1	
<i>topiramate tab 100 mg</i>	Tier 1	
<i>topiramate tab 200 mg</i>	Tier 1	
<i>valproate sodium inj 100 mg/ml</i>	Tier 1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
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<i>valproic acid cap 250 mg</i>	Tier 1	
<i>vigabatrin powd pack 500 mg</i>	Tier 2	QL (180 packets / 30 days), LA, PA
<i>vigabatrin tab 500 mg</i>	Tier 2	QL (180 tabs / 30 days), LA, PA
<i>vigadrone pow 500mg</i>	Tier 2	QL (180 packets / 30 days), LA, PA
<i>VIMPAT INJ 200MG/20</i>	Tier 2	
<i>VIMPAT SOL 10MG/ML</i>	Tier 2	QL (1200 mL / 30 days)
<i>VIMPAT TAB 50MG</i>	Tier 2	QL (120 tabs / 30 days)
<i>VIMPAT TAB 100MG</i>	Tier 2	QL (60 tabs / 30 days)
<i>VIMPAT TAB 150MG</i>	Tier 2	QL (60 tabs / 30 days)
<i>VIMPAT TAB 200MG</i>	Tier 2	QL (60 tabs / 30 days)
<i>zonisamide cap 25 mg</i>	Tier 1	
<i>zonisamide cap 50 mg</i>	Tier 1	
<i>zonisamide cap 100 mg</i>	Tier 1	

ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>memantine hcl tab 5 mg (28) & 10 mg (21) titration pak</i>	Tier 2	PA; PA if < 30 yrs
<i>memantine hcl tab 10 mg</i>	Tier 1	PA; PA if < 30 yrs
NAMZARIC CAP	Tier 2	
NAMZARIC CAP 7-10MG	Tier 2	
NAMZARIC CAP 14-10MG	Tier 2	
NAMZARIC CAP 21-10MG	Tier 2	
NAMZARIC CAP 28-10MG	Tier 2	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	Tier 1	QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	Tier 1	QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	Tier 1	QL (60 caps / 30 days)
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	Tier 1	QL (60 caps / 30 days)
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	Tier 1	QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	Tier 1	QL (30 patches / 30 days)
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	Tier 1	QL (30 patches / 30 days)

ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION

<i>amitriptyline hcl tab 10 mg</i>	Tier 2
<i>amitriptyline hcl tab 25 mg</i>	Tier 2
<i>amitriptyline hcl tab 50 mg</i>	Tier 2
<i>amitriptyline hcl tab 75 mg</i>	Tier 2
<i>amitriptyline hcl tab 100 mg</i>	Tier 2
<i>amitriptyline hcl tab 150 mg</i>	Tier 2
<i>amoxapine tab 25 mg</i>	Tier 2
<i>amoxapine tab 50 mg</i>	Tier 2
<i>amoxapine tab 100 mg</i>	Tier 2
<i>amoxapine tab 150 mg</i>	Tier 2
<i>bupropion hcl tab 75 mg</i>	Tier 1
<i>bupropion hcl tab 100 mg</i>	Tier 1
<i>bupropion hcl tab er 12hr 100 mg</i>	Tier 1
<i>bupropion hcl tab er 12hr 150 mg</i>	Tier 1
<i>bupropion hcl tab er 12hr 200 mg</i>	Tier 1
<i>bupropion hcl tab er 24hr 150 mg</i>	Tier 1
<i>bupropion hcl tab er 24hr 300 mg</i>	Tier 1

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	Tier 1	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	Tier 1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	Tier 1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	Tier 1	
<i>clomipramine hcl cap 25 mg</i>	Tier 2	PA
<i>clomipramine hcl cap 50 mg</i>	Tier 2	PA
<i>clomipramine hcl cap 75 mg</i>	Tier 2	PA
<i>desipramine hcl tab 10 mg</i>	Tier 2	
<i>desipramine hcl tab 25 mg</i>	Tier 2	
<i>desipramine hcl tab 50 mg</i>	Tier 2	
<i>desipramine hcl tab 75 mg</i>	Tier 2	
<i>desipramine hcl tab 100 mg</i>	Tier 2	
<i>desipramine hcl tab 150 mg</i>	Tier 2	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days), PA
<i>doxepin hcl cap 10 mg</i>	Tier 2	
<i>doxepin hcl cap 25 mg</i>	Tier 2	
<i>doxepin hcl cap 50 mg</i>	Tier 2	
<i>doxepin hcl cap 75 mg</i>	Tier 2	
<i>doxepin hcl cap 100 mg</i>	Tier 2	
<i>doxepin hcl cap 150 mg</i>	Tier 2	
<i>doxepin hcl conc 10 mg/ml</i>	Tier 2	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	Tier 1	QL (180 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	Tier 1	QL (120 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	Tier 1	QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	Tier 2	QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	Tier 2	QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	Tier 2	QL (30 patches / 30 days), PA

PA - Prior Authorization
under Medicare B or D

QL - Quantity Limits
LA - Limited Access

ST - Step Therapy
NDS - Non-Extended Days Supply

B/D - Covered

DP - The drug is not a Part D drug.

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	Tier 1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	Tier 1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	Tier 1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	Tier 1	
FETZIMA CAP 20MG	Tier 2	QL (180 caps / 30 days), PA
FETZIMA CAP 40MG	Tier 2	QL (90 caps / 30 days), PA
FETZIMA CAP 80MG	Tier 2	QL (30 caps / 30 days), PA
FETZIMA CAP 120MG	Tier 2	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	Tier 2	PA
<i>fluoxetine hcl cap 10 mg</i>	Tier 1	
<i>fluoxetine hcl cap 20 mg</i>	Tier 1	
<i>fluoxetine hcl cap 40 mg</i>	Tier 1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	Tier 1	
<i>imipramine hcl tab 10 mg</i>	Tier 2	
<i>imipramine hcl tab 25 mg</i>	Tier 2	
<i>imipramine hcl tab 50 mg</i>	Tier 2	
<i>maprotiline hcl tab 25 mg</i>	Tier 1	
<i>maprotiline hcl tab 50 mg</i>	Tier 1	
<i>maprotiline hcl tab 75 mg</i>	Tier 1	
MARPLAN TAB 10MG	Tier 2	QL (180 tabs / 30 days)
<i>mirtazapine orally disintegrating tab 15 mg</i>	Tier 1	
<i>mirtazapine orally disintegrating tab 30 mg</i>	Tier 1	
<i>mirtazapine orally disintegrating tab 45 mg</i>	Tier 1	
<i>mirtazapine tab 7.5 mg</i>	Tier 1	
<i>mirtazapine tab 15 mg</i>	Tier 1	
<i>mirtazapine tab 30 mg</i>	Tier 1	
<i>mirtazapine tab 45 mg</i>	Tier 1	
<i>nefazodone hcl tab 50 mg</i>	Tier 1	
<i>nefazodone hcl tab 100 mg</i>	Tier 1	
<i>nefazodone hcl tab 150 mg</i>	Tier 1	
<i>nefazodone hcl tab 200 mg</i>	Tier 1	
<i>nefazodone hcl tab 250 mg</i>	Tier 1	
<i>nortriptyline hcl cap 10 mg</i>	Tier 2	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>nortriptyline hcl cap 25 mg</i>	Tier 2	
<i>nortriptyline hcl cap 50 mg</i>	Tier 2	
<i>nortriptyline hcl cap 75 mg</i>	Tier 2	
<i>nortriptyline hcl soln 10 mg/5ml</i>	Tier 2	
<i>paroxetine hcl tab 10 mg</i>	Tier 2	
<i>paroxetine hcl tab 20 mg</i>	Tier 2	
<i>paroxetine hcl tab 30 mg</i>	Tier 2	
<i>paroxetine hcl tab 40 mg</i>	Tier 2	
PAXIL SUS 10MG/5ML	Tier 2	QL (900 mL / 30 days)
<i>phenelzine sulfate tab 15 mg</i>	Tier 1	
<i>protriptyline hcl tab 5 mg</i>	Tier 2	
<i>protriptyline hcl tab 10 mg</i>	Tier 2	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	Tier 1	
<i>sertraline hcl tab 25 mg</i>	Tier 1	
<i>sertraline hcl tab 50 mg</i>	Tier 1	
<i>sertraline hcl tab 100 mg</i>	Tier 1	
<i>tranylcypromine sulfate tab 10 mg</i>	Tier 1	
<i>trazodone hcl tab 50 mg</i>	Tier 1	
<i>trazodone hcl tab 100 mg</i>	Tier 1	
<i>trazodone hcl tab 150 mg</i>	Tier 1	
<i>trimipramine maleate cap 25 mg</i>	Tier 2	QL (240 caps / 30 days)
<i>trimipramine maleate cap 50 mg</i>	Tier 2	QL (120 caps / 30 days)
<i>trimipramine maleate cap 100 mg</i>	Tier 2	QL (60 caps / 30 days)
TRINTELLIX TAB 5MG	Tier 2	QL (120 tabs / 30 days)
TRINTELLIX TAB 10MG	Tier 2	QL (60 tabs / 30 days)
TRINTELLIX TAB 20MG	Tier 2	QL (30 tabs / 30 days)
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	Tier 1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	Tier 1	
VIIBRYD KIT STARTER	Tier 2	
VIIBRYD TAB 10MG	Tier 2	QL (30 tabs / 30 days)
VIIBRYD TAB 20MG	Tier 2	QL (30 tabs / 30 days)
VIIBRYD TAB 40MG	Tier 2	QL (30 tabs / 30 days)

ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	Tier 1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	Tier 1	
<i>entacapone tab 200 mg</i>	Tier 1	
NEUPRO DIS 1MG/24HR	Tier 2	
NEUPRO DIS 2MG/24HR	Tier 2	
NEUPRO DIS 3MG/24HR	Tier 2	
NEUPRO DIS 4MG/24HR	Tier 2	
NEUPRO DIS 6MG/24HR	Tier 2	
NEUPRO DIS 8MG/24HR	Tier 2	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 1 mg</i>	Tier 1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	Tier 1	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	Tier 1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	Tier 1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 1 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 2 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 3 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 4 mg</i>	Tier 1	
<i>ropinirole hydrochloride tab 5 mg</i>	Tier 1	
<i>selegiline hcl cap 5 mg</i>	Tier 1	
<i>selegiline hcl tab 5 mg</i>	Tier 1	
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	Tier 2	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 2 mg</i>	Tier 2	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 5 mg</i>	Tier 2	PA; PA if 70 years and older
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
ABILIFY MAIN INJ 300MG	Tier 2	QL (1 injection / 28 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ABILIFY MAIN INJ 400MG	Tier 2	QL (1 injection / 28 days)
<i>aripiprazole oral solution 1 mg/ml</i>	Tier 2	QL (900 mL / 30 days)
<i>aripiprazole orally disintegrating tab 10 mg</i>	Tier 2	QL (60 tabs / 30 days)
<i>aripiprazole orally disintegrating tab 15 mg</i>	Tier 2	QL (60 tabs / 30 days)
<i>aripiprazole tab 2 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>aripiprazole tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>aripiprazole tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>aripiprazole tab 15 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>aripiprazole tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>aripiprazole tab 30 mg</i>	Tier 1	QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	Tier 2	QL (1 injection / 28 days)
ARISTADA INJ 662MG/2	Tier 2	QL (1 injection / 28 days)
ARISTADA INJ 882MG/3	Tier 2	QL (1 injection / 28 days)
ARISTADA INJ 1064MG	Tier 2	QL (1 injection / 56 days)
ARISTADA INJ INITIO	Tier 2	
CHLORPROMAZ INJ 25MG/ML	Tier 2	
CHLORPROMAZ INJ 50MG/2ML	Tier 2	
<i>chlorpromazine hcl tab 10 mg</i>	Tier 1	
<i>chlorpromazine hcl tab 25 mg</i>	Tier 1	
<i>chlorpromazine hcl tab 50 mg</i>	Tier 1	
<i>chlorpromazine hcl tab 100 mg</i>	Tier 1	
<i>chlorpromazine hcl tab 200 mg</i>	Tier 1	
<i>clozapine orally disintegrating tab 12.5 mg</i>	Tier 1	PA
<i>clozapine orally disintegrating tab 25 mg</i>	Tier 1	PA
<i>clozapine orally disintegrating tab 100 mg</i>	Tier 1	NDS, QL (270 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 150 mg</i>	Tier 1	QL (180 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 200 mg</i>	Tier 2	QL (135 tabs / 30 days), PA
<i>clozapine tab 25 mg</i>	Tier 1	
<i>clozapine tab 50 mg</i>	Tier 1	
<i>clozapine tab 100 mg</i>	Tier 1	QL (270 tabs / 30 days)
<i>clozapine tab 200 mg</i>	Tier 1	QL (135 tabs / 30 days)
FANAPT PAK	Tier 2	
FANAPT TAB 1MG	Tier 2	QL (60 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FANAPT TAB 2MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 4MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 6MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 8MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 10MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 12MG	Tier 2	QL (60 tabs / 30 days)
<i>fluphenazine decanoate inj 25 mg/ml</i>	Tier 1	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	Tier 1	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	Tier 1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	Tier 1	
<i>fluphenazine hcl tab 1 mg</i>	Tier 1	
<i>fluphenazine hcl tab 2.5 mg</i>	Tier 1	
<i>fluphenazine hcl tab 5 mg</i>	Tier 1	
<i>fluphenazine hcl tab 10 mg</i>	Tier 1	
GEODON INJ 20MG	Tier 2	QL (6 mL / 3 days)
<i>haloperidol decanoate im soln 50 mg/ml</i>	Tier 1	
<i>haloperidol decanoate im soln 100 mg/ml</i>	Tier 1	
<i>haloperidol lactate inj 5 mg/ml</i>	Tier 1	
<i>haloperidol lactate oral conc 2 mg/ml</i>	Tier 1	
<i>haloperidol tab 0.5 mg</i>	Tier 1	
<i>haloperidol tab 1 mg</i>	Tier 1	
<i>haloperidol tab 2 mg</i>	Tier 1	
<i>haloperidol tab 5 mg</i>	Tier 1	
<i>haloperidol tab 10 mg</i>	Tier 1	
<i>haloperidol tab 20 mg</i>	Tier 1	
INVEGA SUST INJ 39/0.25	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 117/0.75	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 156MG/ML	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 234/1.5	Tier 2	QL (1 injection / 28 days)
INVEGA TRINZ INJ 273MG	Tier 2	QL (1 injection / 90 days)
INVEGA TRINZ INJ 410MG	Tier 2	QL (1 injection / 90 days)
INVEGA TRINZ INJ 546MG	Tier 2	QL (1 injection / 90 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
INVEGA TRINZ INJ 819MG	Tier 2	QL (1 injection / 90 days)
LATUDA TAB 20MG	Tier 2	QL (60 tabs / 30 days)
LATUDA TAB 40MG	Tier 2	QL (30 tabs / 30 days)
LATUDA TAB 60MG	Tier 2	QL (60 tabs / 30 days)
LATUDA TAB 80MG	Tier 2	QL (60 tabs / 30 days)
LATUDA TAB 120MG	Tier 2	QL (30 tabs / 30 days)
<i>loxapine succinate cap 5 mg</i>	Tier 1	
<i>loxapine succinate cap 10 mg</i>	Tier 1	
<i>loxapine succinate cap 25 mg</i>	Tier 1	
<i>loxapine succinate cap 50 mg</i>	Tier 1	
<i>molindone hcl tab 5 mg</i>	Tier 1	
<i>molindone hcl tab 10 mg</i>	Tier 1	
<i>molindone hcl tab 25 mg</i>	Tier 1	
NUPLAZID CAP 34MG	Tier 2	QL (30 caps / 30 days), LA, PA
NUPLAZID TAB 10MG	Tier 2	QL (30 tabs / 30 days), LA, PA
NUPLAZID TAB 17MG	Tier 2	QL (60 tabs / 30 days), LA, PA
<i>olanzapine for im inj 10 mg</i>	Tier 1	QL (3 vials / 1 day)
<i>olanzapine orally disintegrating tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>olanzapine orally disintegrating tab 15 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>olanzapine tab 2.5 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>olanzapine tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>olanzapine tab 7.5 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>olanzapine tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>olanzapine tab 15 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>olanzapine tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 1.5 mg</i>	Tier 2	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 3 mg</i>	Tier 2	QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 6 mg</i>	Tier 2	QL (60 tabs / 30 days)
<i>paliperidone tab er 24hr 9 mg</i>	Tier 2	QL (30 tabs / 30 days)
<i>perphenazine tab 2 mg</i>	Tier 1	
<i>perphenazine tab 4 mg</i>	Tier 1	
<i>perphenazine tab 8 mg</i>	Tier 1	
<i>perphenazine tab 16 mg</i>	Tier 1	
PERSERIS INJ 90MG	Tier 2	QL (1 injection / 30 days)

PA - Prior Authorization
under Medicare B or D

QL - Quantity Limits
LA - Limited Access

DP - The drug is not a Part D drug.

ST - Step Therapy

B/D - Covered

NDS - Non-Extended Days Supply

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PERSERIS INJ 120MG	Tier 2	QL (1 injection / 30 days)
<i>pimozide tab 1 mg</i>	Tier 1	
<i>pimozide tab 2 mg</i>	Tier 1	
<i>quetiapine fumarate tab 25 mg</i>	Tier 1	
<i>quetiapine fumarate tab 50 mg</i>	Tier 1	
<i>quetiapine fumarate tab 100 mg</i>	Tier 1	
<i>quetiapine fumarate tab 200 mg</i>	Tier 1	
<i>quetiapine fumarate tab 300 mg</i>	Tier 1	
<i>quetiapine fumarate tab 400 mg</i>	Tier 1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>quetiapine fumarate tab er 24hr 150 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>quetiapine fumarate tab er 24hr 200 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>quetiapine fumarate tab er 24hr 300 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>quetiapine fumarate tab er 24hr 400 mg</i>	Tier 1	QL (60 tabs / 30 days)
REXULTI TAB 0.5MG	Tier 2	QL (180 tabs / 30 days)
REXULTI TAB 0.25MG	Tier 2	QL (360 tabs / 30 days)
REXULTI TAB 1MG	Tier 2	QL (90 tabs / 30 days)
REXULTI TAB 2MG	Tier 2	QL (60 tabs / 30 days)
REXULTI TAB 3MG	Tier 2	QL (30 tabs / 30 days)
REXULTI TAB 4MG	Tier 2	QL (30 tabs / 30 days)
RISPERDAL INJ 12.5MG	Tier 2	QL (2 injections / 28 days)
RISPERDAL INJ 25MG	Tier 2	QL (2 injections / 28 days)
RISPERDAL INJ 37.5MG	Tier 2	QL (2 injections / 28 days)
RISPERDAL INJ 50MG	Tier 2	QL (2 injections / 28 days)
<i>risperidone orally disintegrating tab 0.5 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 0.25 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 1 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 2 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 3 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 4 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>risperidone soln 1 mg/ml</i>	Tier 1	QL (240 mL / 30 days)
<i>risperidone tab 0.5 mg</i>	Tier 1	
<i>risperidone tab 0.25 mg</i>	Tier 1	
<i>risperidone tab 1 mg</i>	Tier 1	
<i>risperidone tab 2 mg</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>risperidone tab 3 mg</i>	Tier 1	
<i>risperidone tab 4 mg</i>	Tier 1	
SAPHRIS SUB 2.5MG	Tier 2	QL (240 tabs / 30 days)
SAPHRIS SUB 5MG	Tier 2	QL (120 tabs / 30 days)
SAPHRIS SUB 10MG	Tier 2	QL (60 tabs / 30 days)
<i>thioridazine hcl tab 10 mg</i>	Tier 1	
<i>thioridazine hcl tab 25 mg</i>	Tier 1	
<i>thioridazine hcl tab 50 mg</i>	Tier 1	
<i>thioridazine hcl tab 100 mg</i>	Tier 1	
<i>thiothixene cap 1 mg</i>	Tier 1	
<i>thiothixene cap 2 mg</i>	Tier 1	
<i>thiothixene cap 5 mg</i>	Tier 1	
<i>thiothixene cap 10 mg</i>	Tier 1	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	Tier 1	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	Tier 1	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	Tier 1	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	Tier 1	
VERSACLOZ SUS 50MG/ML	Tier 2	QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5-3MG	Tier 2	PA
VRAYLAR CAP 1.5MG	Tier 2	QL (60 caps / 30 days), PA
VRAYLAR CAP 3MG	Tier 2	QL (30 caps / 30 days), PA
VRAYLAR CAP 4.5MG	Tier 2	QL (30 caps / 30 days), PA
VRAYLAR CAP 6MG	Tier 2	QL (30 caps / 30 days), PA
<i>ziprasidone hcl cap 20 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>ziprasidone hcl cap 40 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>ziprasidone hcl cap 60 mg</i>	Tier 1	QL (60 caps / 30 days)
<i>ziprasidone hcl cap 80 mg</i>	Tier 1	QL (60 caps / 30 days)
ZYPREXA RELP INJ 210MG	Tier 2	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	Tier 2	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	Tier 2	QL (1 vial / 28 days), PA

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT
ADHD**

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	Tier 1	QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	Tier 1	QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	Tier 1	QL (360 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	Tier 1	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	Tier 1	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	Tier 1	QL (120 caps / 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	Tier 1	QL (60 caps / 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	Tier 1	QL (30 caps / 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	Tier 1	QL (30 caps / 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	Tier 1	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	Tier 2	PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	Tier 2	PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	Tier 2	PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	Tier 2	PA; PA if 70 years and older
<i>methylphenidate hcl soln 5 mg/5ml</i>	Tier 1	QL (1800 mL / 30 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	Tier 1	QL (900 mL / 30 days)
<i>methylphenidate hcl tab 5 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 10 mg</i>	Tier 1	QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 20 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	Tier 1	QL (90 tabs / 30 days)

HYPNOTICS - DRUGS TO TREAT INSOMNIA

<i>eszopiclone tab 1 mg</i>	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>	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 3 mg</i>	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	Tier 2	LA, PA
SILENOR TAB 3MG	Tier 2	QL (60 tabs / 30 days)
SILENOR TAB 6MG	Tier 2	QL (30 tabs / 30 days)
<i>temazepam cap 7.5 mg</i>	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>	Tier 1	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>zaleplon cap 5 mg</i>	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>	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>	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>	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

<i>AIMOVIG INJ 70MG/ML</i>	Tier 2	QL (1 pen / 30 days), PA
<i>AIMOVIG INJ 140MG/ML</i>	Tier 2	QL (1 pen / 30 days), PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	Tier 2	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	Tier 2	QL (8 mL / 30 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	Tier 1	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	Tier 1	QL (12 tabs / 30 days)
<i>EMGALITY INJ 120MG/ML</i>	Tier 2	QL (2 pens / 30 days), PA
<i>EMGALITY INJ 120MG/ML</i>	Tier 2	QL (2 syringes / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	Tier 1	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	Tier 1	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	Tier 1	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	Tier 1	QL (18 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	Tier 1	QL (18 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	Tier 1	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	Tier 1	QL (18 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	Tier 1	QL (24 inhalers / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	Tier 1	QL (12 inhalers / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	Tier 1	QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	Tier 1	QL (18 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	Tier 1	QL (12 injections / 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	Tier 1	QL (18 injections / 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	Tier 1	QL (12 injections / 30 days)
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	Tier 1	QL (12 injections / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	Tier 1	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	Tier 1	QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	Tier 1	QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	Tier 1	QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	Tier 1	QL (12 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	Tier 1	QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	Tier 1	QL (12 tabs / 30 days)

MISCELLANEOUS

AUSTEDO TAB 6MG	Tier 2	QL (60 tabs / 30 days), LA, PA
AUSTEDO TAB 9MG	Tier 2	QL (120 tabs / 30 days), LA, PA
AUSTEDO TAB 12MG	Tier 2	QL (120 tabs / 30 days), LA, PA
<i>lithium carbonate cap 150 mg</i>	Tier 1	
<i>lithium carbonate cap 300 mg</i>	Tier 1	
<i>lithium carbonate cap 600 mg</i>	Tier 1	
<i>lithium carbonate tab 300 mg</i>	Tier 1	
<i>lithium carbonate tab er 300 mg</i>	Tier 1	
<i>lithium carbonate tab er 450 mg</i>	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LITHIUM SOL 8MEQ/5ML	Tier 2	
LYRICA CR TAB 82.5MG	Tier 2	QL (90 tabs / 30 days), PA
LYRICA CR TAB 165MG	Tier 2	QL (90 tabs / 30 days), PA
LYRICA CR TAB 330MG	Tier 2	QL (60 tabs / 30 days), PA
NUDEXTA CAP 20-10MG	Tier 2	QL (60 caps / 30 days), PA
<i>pyridostigmine bromide tab 60 mg</i>	Tier 1	
<i>riluzole tab 50 mg</i>	Tier 1	
<i>tetrabenazine tab 12.5 mg</i>	Tier 2	QL (240 tabs / 30 days), PA
<i>tetrabenazine tab 25 mg</i>	Tier 2	QL (120 tabs / 30 days), PA

MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS

BETASERON INJ 0.3MG	Tier 2	QL (14 syringes / 28 days), PA
<i>dalfampridine tab er 12hr 10 mg</i>	Tier 2	PA
GILENYA CAP 0.5MG	Tier 2	QL (28 caps / 28 days), PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	Tier 2	QL (30 syringes / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	Tier 2	QL (12 syringes / 28 days), PA
<i>glatopa inj 20mg/ml</i>	Tier 2	QL (30 syringes / 30 days), PA
<i>glatopa inj 40mg/ml</i>	Tier 2	QL (12 syringes / 28 days), PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

<i>baclofen tab 10 mg</i>	Tier 1	
<i>baclofen tab 20 mg</i>	Tier 1	
<i>carisoprodol tab 350 mg</i>	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 5 mg</i>	Tier 2	PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 10 mg</i>	Tier 2	PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
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<i>dantrolene sodium cap 25 mg</i>	Tier 1	
<i>dantrolene sodium cap 50 mg</i>	Tier 1	
<i>dantrolene sodium cap 100 mg</i>	Tier 1	
<i>methocarbamol tab 500 mg</i>	Tier 2	PA; PA if 70 years and older
<i>methocarbamol tab 750 mg</i>	Tier 2	PA; PA if 70 years and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	Tier 1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	Tier 1	

NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS

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

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	Tier 1	
ADIPEX-P CAP 37.5MG	Tier 3	DP
ADIPEX-P TAB 37.5MG	Tier 3	DP
<i>benzphetamine hcl tab 50 mg</i>	Tier 3	DP
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	Tier 1	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	Tier 1	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	Tier 1	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	Tier 1	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	Tier 1	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	Tier 1	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	Tier 1	QL (90 tabs / 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 DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	Tier 1	
CAFFEINE POW ANHYDROU	Tier 3	DP
CHANTIX PAK 0.5& 1MG	Tier 2	PA
CHANTIX PAK 1MG	Tier 2	PA
CHANTIX TAB 0.5MG	Tier 2	PA
CHANTIX TAB 1MG	Tier 2	PA
<i>diethylpropion hcl tab 25 mg</i>	Tier 3	DP
<i>diethylpropion hcl tab er 24hr 75 mg</i>	Tier 3	DP
<i>disulfiram tab 250 mg</i>	Tier 1	
<i>disulfiram tab 500 mg</i>	Tier 1	
<i>gnp nicotine gum 2mg mint</i>	Tier 3	DP
<i>gnp nicotine gum 2mg orig</i>	Tier 3	DP
<i>gnp nicotine gum 4mg mint</i>	Tier 3	DP
<i>gnp nicotine loz 2mg mint</i>	Tier 3	DP
<i>gnp nicotine loz 4mg mint</i>	Tier 3	DP
<i>gnp nicotine loz mini 2mg</i>	Tier 3	DP
<i>hm nicotine dis 14mg/24h</i>	Tier 3	DP
<i>hm nicotine dis 21mg/24h</i>	Tier 3	DP
<i>hm nicotine gum 2mg mint</i>	Tier 3	DP
<i>hm nicotine gum 4mg mint</i>	Tier 3	DP
<i>hm nicotine loz 2mg mint</i>	Tier 3	DP
<i>hm nicotine loz 4mg mint</i>	Tier 3	DP
<i>naloxone hcl inj 0.4 mg/ml</i>	Tier 1	
<i>naloxone hcl inj 4 mg/10ml</i>	Tier 1	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	Tier 1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	Tier 1	
<i>naltrexone hcl tab 50 mg</i>	Tier 1	
NARCAN SPR	Tier 2	NDS
<i>nicorelief gum 2mg mint</i>	Tier 3	DP
<i>nicorelief gum 2mg orig</i>	Tier 3	DP
<i>nicorelief gum 4mg mint</i>	Tier 3	DP
<i>nicorelief gum 4mg orig</i>	Tier 3	DP
<i>nicotine pol loz 4mg mint</i>	Tier 3	DP
<i>nicotine polacrilex gum 2 mg</i>	Tier 3	DP
<i>nicotine polacrilex gum 4 mg</i>	Tier 3	DP
<i>nicotine polacrilex lozenge 2 mg</i>	Tier 3	DP
<i>nicotine polacrilex lozenge 4 mg</i>	Tier 3	DP
<i>nicotine td dis 7mg/24hr</i>	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>nicotine td patch 24hr 7 mg/24hr</i>	Tier 3	DP
<i>nicotine td patch 24hr 14 mg/24hr</i>	Tier 3	DP
<i>nicotine td patch 24hr 21 mg/24hr</i>	Tier 3	DP
NICOTROL INH	Tier 2	
NICOTROL NS SPR 10MG/ML	Tier 2	
<i>phendimetrazine tartrate cap er 24hr 105 mg</i>	Tier 3	DP
<i>phendimetrazine tartrate tab 35 mg</i>	Tier 3	DP
<i>phentermine hcl cap 15 mg</i>	Tier 3	DP
<i>phentermine hcl cap 30 mg</i>	Tier 3	DP
<i>phentermine hcl cap 37.5 mg</i>	Tier 3	DP
<i>phentermine hcl tab 37.5 mg</i>	Tier 3	DP
QSYMIA CAP 3.75-23	Tier 3	DP
QSYMIA CAP 7.5-46MG	Tier 3	DP
QSYMIA CAP 11.25-69	Tier 3	DP
QSYMIA CAP 15-92MG	Tier 3	DP
<i>sm nicotine gum 2mg</i>	Tier 3	DP
<i>sm nicotine gum 2mg mint</i>	Tier 3	DP
<i>sm nicotine gum 4mg</i>	Tier 3	DP
<i>sm nicotine gum 4mg mint</i>	Tier 3	DP
<i>sm nicotine loz 2mg mint</i>	Tier 3	DP
<i>sm nicotine loz 4mg mint</i>	Tier 3	DP
<i>thrive gum 2mg mint</i>	Tier 3	DP
VIVITROL INJ 380MG	Tier 2	

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

ANADROL-50 TAB 50MG	Tier 2	PA
ANDRODERM DIS 2MG/24HR	Tier 2	QL (30 patches / 30 days), PA
ANDRODERM DIS 4MG/24HR	Tier 2	QL (30 patches / 30 days), PA
<i>oxandrolone tab 2.5 mg</i>	Tier 1	PA
<i>oxandrolone tab 10 mg</i>	Tier 1	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	Tier 1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	Tier 1	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	Tier 1	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>testosterone td gel 12.5 mg/act (1%)</i>	Tier 1	QL (300 grams / 30 days), PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	Tier 1	QL (300 grams / 30 days), PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	Tier 1	QL (300 grams / 30 days), PA

ANTIDIABETICS, INJECTABLE - DRUGS TO TREAT DIABETES

ALCOHOL SWABS	Tier 2	
BASAGLAR INJ 100UNIT	Tier 2	
BD ULTRAFINE INSULIN SYRINGE	Tier 2	
BD ULTRAFINE/NANO PEN NEEDLES	Tier 2	
BYDUREON BC INJ 2/0.85ML	Tier 2	QL (4 pens / 28 days)
BYDUREON INJ 2MG	Tier 2	QL (4 vials / 28 days)
BYDUREON PEN INJ 2MG	Tier 2	QL (4 pens / 28 days)
BYETTA INJ 5MCG	Tier 2	QL (1 pen / 30 days)
BYETTA INJ 10MCG	Tier 2	QL (1 pen / 30 days)
FIASP FLEX INJ TOUCH	Tier 2	
FIASP INJ 100/ML	Tier 2	
GAUZE PADS 2" X 2"	Tier 2	
HUMULIN R INJ U-500	Tier 2	
HUMULIN R INJ U-500	Tier 2	B/D
INSULIN PEN NEEDLE	Tier 2	
INSULIN SAFETY NEEDLES	Tier 2	
INSULIN SYRINGE	Tier 2	
LEVEMIR INJ	Tier 2	
LEVEMIR INJ FLEXTouc	Tier 2	
NOVOLIN INJ 70/30	Tier 2	(brand RELION not covered)
NOVOLIN INJ FLEXPEN	Tier 2	(brand RELION not covered)
NOVOLIN N INJ U-100	Tier 2	(brand RELION not covered)
NOVOLIN R INJ U-100	Tier 2	(brand RELION not covered)
NOVOLOG INJ 100/ML	Tier 2	
NOVOLOG INJ FLEXPEN	Tier 2	
NOVOLOG INJ PENFILL	Tier 2	
NOVOLOG MIX INJ 70/30	Tier 2	
NOVOLOG MIX INJ FLEXPEN	Tier 2	
OZEMPIC INJ 2/1.5ML	Tier 2	QL (1 pen / 28 days)
OZEMPIC INJ 2/1.5ML	Tier 2	QL (2 pens / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
SOLIQUA INJ 100/33	Tier 2 QL (10 pens / 30 days)
TRESIBA FLEX INJ 100UNIT	Tier 2
TRESIBA FLEX INJ 200UNIT	Tier 2
TRESIBA INJ 100UNIT	Tier 2
TRULICITY INJ 0.75/0.5	Tier 2 QL (4 pens / 28 days)
TRULICITY INJ 1.5/0.5	Tier 2 QL (4 pens / 28 days)
VICTOZA INJ 18MG/3ML	Tier 2 QL (3 pens / 30 days)
XULTOPHY INJ 100/3.6	Tier 2 QL (5 pens / 30 days)

ANTIDIABETICS, ORAL - DRUGS TO TREAT DIABETES

<i>acarbose tab 25 mg</i>	Tier 1	
<i>acarbose tab 50 mg</i>	Tier 1	
<i>acarbose tab 100 mg</i>	Tier 1	
FARXIGA TAB 5MG	Tier 2	QL (60 tabs / 30 days)
FARXIGA TAB 10MG	Tier 2	QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>glipizide tab 5 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>glipizide xl tab 2.5mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>glipizide xl tab 5mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>glipizide xl tab 10mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	Tier 1	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>glyburide micronized tab 1.5 mg</i>	Tier 2	QL (240 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide micronized tab 3 mg</i>	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide micronized tab 6 mg</i>	Tier 2	QL (60 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide tab 1.25 mg</i>	Tier 2	QL (480 tabs / 30 days), PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>glyburide tab 2.5 mg</i>	Tier 2	QL (240 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide tab 5 mg</i>	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide-metformin tab 1.25-250 mg</i>	Tier 2	QL (240 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide-metformin tab 2.5-500 mg</i>	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>glyburide-metformin tab 5-500 mg</i>	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
JANUMET TAB 50-500MG	Tier 2	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	Tier 2	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	Tier 2	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	Tier 2	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	Tier 2	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	Tier 2	QL (30 tabs / 30 days)
JANUVIA TAB 50MG	Tier 2	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	Tier 2	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	Tier 2	QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	Tier 2	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	Tier 2	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	Tier 2	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	Tier 2	QL (60 tabs / 30 days)
JENTADUETO TAB XR	Tier 2	QL (30 tabs / 30 days)
JENTADUETO TAB XR	Tier 2	QL (60 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	Tier 1	QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	Tier 1	QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	Tier 1	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl tab er 24hr 750 mg</i>	Tier 1	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>nateglinide tab 60 mg</i>	Tier 1	QL (90 tabs / 30 days)
<i>nateglinide tab 120 mg</i>	Tier 1	QL (90 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
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<i>pioglitazone hcl tab 15 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	Tier 1	QL (30 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>repaglinide tab 1 mg</i>	Tier 1	QL (120 tabs / 30 days)
<i>repaglinide tab 2 mg</i>	Tier 1	QL (240 tabs / 30 days)
SYNJARDY TAB	Tier 2	QL (60 tabs / 30 days)
SYNJARDY TAB 5-500MG	Tier 2	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	Tier 2	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	Tier 2	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	Tier 2	QL (30 tabs / 30 days)
XIGDUO XR TAB 2.5-1000	Tier 2	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	Tier 2	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	Tier 2	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	Tier 2	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	Tier 2	QL (30 tabs / 30 days)

BISPHOSPHONATES - DRUGS TO TREAT BONE LOSS

<i>alendronate sodium oral soln 70 mg/75ml</i>	Tier 1	
<i>alendronate sodium tab 5 mg</i>	Tier 1	
<i>alendronate sodium tab 10 mg</i>	Tier 1	
<i>alendronate sodium tab 35 mg</i>	Tier 1	
<i>alendronate sodium tab 40 mg</i>	Tier 1	
<i>alendronate sodium tab 70 mg</i>	Tier 1	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	Tier 1	B/D
<i>pamidronate disodium for inj 30 mg</i>	Tier 1	B/D
<i>pamidronate disodium for inj 90 mg</i>	Tier 1	B/D
<i>pamidronate disodium iv soln 3 mg/ml</i>	Tier 1	B/D
<i>pamidronate disodium iv soln 9 mg/ml</i>	Tier 1	B/D
PAMIDRONATE INJ 6MG/ML	Tier 2	B/D
<i>risedronate sodium tab 5 mg</i>	Tier 1	
<i>risedronate sodium tab 35 mg</i>	Tier 1	
<i>risedronate sodium tab 150 mg</i>	Tier 1	
<i>risedronate sodium tab delayed release 35 mg</i>	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	Tier 1	B/D
<i>zoledronic acid iv soln 5 mg/100ml</i>	Tier 1	B/D
CALCIUM RECEPTOR AGONISTS		
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	Tier 2	B/D, QL (120 tabs / 30 days)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	Tier 2	B/D, QL (60 tabs / 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	Tier 2	B/D, QL (120 tabs / 30 days)
SENSIPAR TAB 30MG	Tier 2	NDS, B/D, QL (120 tabs / 30 days)
SENSIPAR TAB 60MG	Tier 2	NDS, B/D, QL (60 tabs / 30 days)
SENSIPAR TAB 90MG	Tier 2	NDS, B/D, QL (120 tabs / 30 days)
CHELATING AGENTS		
CHEMET CAP 100MG	Tier 2	
DEPEN TITRA TAB 250MG	Tier 2	
JADENU SPRKL GRA 90MG	Tier 2	LA, PA
JADENU SPRKL GRA 180MG	Tier 2	LA, PA
JADENU SPRKL GRA 360MG	Tier 2	LA, PA
JADENU TAB 90MG	Tier 2	LA, PA
JADENU TAB 180MG	Tier 2	LA, PA
JADENU TAB 360MG	Tier 2	LA, PA
LOKELMA PAK 5GM	Tier 2	
LOKELMA PAK 10GM	Tier 2	
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	Tier 1	
<i>sodium polystyrene sulfonate powder</i>	Tier 1	
<i>trientine hcl cap 250 mg</i>	Tier 2	PA
CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL		
AIMSCO MIS LUBRICAT	Tier 3	DP
<i>alyacen tab 1/35</i>	Tier 1	
<i>amethia lo tab</i>	Tier 1	
<i>amethia tab</i>	Tier 1	
<i>apri tab</i>	Tier 1	
<i>aranelle tab</i>	Tier 1	
<i>ashlyna tab</i>	Tier 1	
ATLAS CONDOM MIS COLR/SPM	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
ATLAS CONDOM MIS LUB/COLR	Tier 3	DP
ATLAS CONDOM MIS LUB/SPMC	Tier 3	DP
ATLAS CONDOM MIS LUBRICAT	Tier 3	DP
<i>aubra tab 0.1-0.02</i>	Tier 1	
<i>aviane tab</i>	Tier 1	
<i>balziva tab</i>	Tier 1	
<i>bekyree tab</i>	Tier 1	
<i>blisovi 24 tab fe 1/20</i>	Tier 1	
<i>blisovi fe tab 1.5/30</i>	Tier 1	
<i>briellyn tab</i>	Tier 1	
<i>camila tab 0.35mg</i>	Tier 1	
<i>camrese lo tab</i>	Tier 1	
CLASS ACT MIS LUBRICAT	Tier 3	DP
COLOR CONDOM MIS + LUBE	Tier 3	DP
CONDOMS MIS	Tier 3	DP
CONDOMS MIS LUBRICAT	Tier 3	DP
<i>cryselle-28 tab 28 tabs</i>	Tier 1	
<i>cyclafem tab 1/35</i>	Tier 1	
<i>cyclafem tab 7/7/7</i>	Tier 1	
<i>dasetta tab 1/35</i>	Tier 1	
<i>dasetta tab 7/7/7</i>	Tier 1	
<i>deblitane tab 0.35mg</i>	Tier 1	
<i>delyla tab 0.1-0.02</i>	Tier 1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	Tier 1	
<i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i>	Tier 1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	Tier 1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	Tier 1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	Tier 1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	Tier 1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	Tier 1	
DUREX EXTRA MIS SENSITIV	Tier 3	DP
DUREX MIS REALFEEL	Tier 3	DP
ELEXA MIS STIMULAT	Tier 3	DP
ELEXA NATURL MIS FEEL	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
ELEXA ULTRA MIS SENSITIV	Tier 3	DP
ELLA TAB 30MG	Tier 2	
<i>emoquette tab</i>	Tier 1	
<i>enpresse-28 tab</i>	Tier 1	
<i>enskyce tab</i>	Tier 1	
<i>errin tab 0.35mg</i>	Tier 1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	Tier 1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	Tier 1	
EXTRA SENSIT MIS SPERMICI	Tier 3	DP
<i>falmina tab</i>	Tier 1	
FANTASY LUBR MIS	Tier 3	DP
FANTASY LUBR MIS COLORS	Tier 3	DP
FANTASY LUBR MIS SPERMICI	Tier 3	DP
FANTASY MIS LUBRICAT	Tier 3	DP
<i>fayosim tab</i>	Tier 1	
FC2 FEMALE MIS CONDOM	Tier 3	DP
FC FEMALE MIS CONDOM	Tier 3	DP
<i>femynor tab 0.25-35</i>	Tier 1	NDS
<i>hailey 24 tab fe</i>	Tier 1	
<i>heather tab 0.35mg</i>	Tier 1	
HIGH SENSATI MIS SPERMICI	Tier 3	DP
<i>incassia tab 0.35mg</i>	Tier 1	
INTENSE SENS MIS	Tier 3	DP
<i>introvale tab</i>	Tier 1	
<i>isibloom tab</i>	Tier 1	
<i>jasmiel tab 3-0.02mg</i>	Tier 1	
<i>jolivette tab 0.35mg</i>	Tier 1	
<i>juleber tab</i>	Tier 1	
<i>junel 1.5/30 tab</i>	Tier 1	
<i>junel 1/20 tab</i>	Tier 1	
<i>junel fe 24 tab 1/20</i>	Tier 1	
<i>junel fe tab 1.5/30</i>	Tier 1	
<i>junel fe tab 1/20</i>	Tier 1	
<i>kaitlib fe chw</i>	Tier 1	
KAMELEON LUB MIS COLORS	Tier 3	DP
KAMELEON MIS TRI-COLR	Tier 3	DP
<i>kariva tab 28 day</i>	Tier 1	
<i>kelnor 1/50 tab</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)		RESTRICTIONS OR LIMITS ON USE
<i>kelnor tab 1/35</i>	Tier 1		
KIMONO COLOR MIS	Tier 3	DP	
KIMONO MICRO MIS THIN	Tier 3	DP	
KIMONO MICRO MIS THIN +	Tier 3	DP	
KIMONO MICRO MIS THIN PLS	Tier 3	DP	
KIMONO MIS LUBRICAT	Tier 3	DP	
KIMONO MIS SENSATIO	Tier 3	DP	
KIMONO PLUS MIS LUBRICAT	Tier 3	DP	
KIMONO PLUS MIS SPERMICI	Tier 3	DP	
KIMONO PS MIS LUBRICAT	Tier 3	DP	
KIMONO PS MIS PLUS	Tier 3	DP	
KIMONO SENSE MIS PLUS	Tier 3	DP	
KIMONO SPEC MIS	Tier 3	DP	
<i>kurvelo tab 0.15/30</i>	Tier 1		
<i>larin fe tab 1.5/30</i>	Tier 1		
<i>larin fe tab 1/20</i>	Tier 1		
<i>larin tab 1.5/30</i>	Tier 1		
<i>larin tab 1/20</i>	Tier 1		
<i>layolis fe chw</i>	Tier 1		
<i>lessina tab</i>	Tier 1		
<i>levonest tab</i>	Tier 1		
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	Tier 1		
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	Tier 1		
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	Tier 1		
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	Tier 1		
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	Tier 1		
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	Tier 1		
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	Tier 1		
<i>levora-28 tab 0.15/30</i>	Tier 1		
LIFESTYLES MIS COLORS	Tier 3	DP	
LIFESTYLES MIS EXT STR	Tier 3	DP	
LIFESTYLES MIS FORM FIT	Tier 3	DP	
LIFESTYLES MIS LUBRICAT	Tier 3	DP	
LIFESTYLES MIS RIBBED	Tier 3	DP	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LIFESTYLES MIS SKYN	Tier 3 DP
LIFESTYLES MIS SPERM/LU	Tier 3 DP
LIFESTYLES MIS STUDDER	Tier 3 DP
LIFESTYLES MIS ULT/SENS	Tier 3 DP
LIFESTYLES MIS VIBRA-RI	Tier 3 DP
LIFESTYLES MIS XPLEASUR	Tier 3 DP
<i>lomedica 24 tab fe</i>	Tier 1
<i>loryna tab 3-0.02mg</i>	Tier 1
<i>lutra tab</i>	Tier 1
<i>lyza tab 0.35mg</i>	Tier 1
<i>marlissa tab 0.15/30</i>	Tier 1
MAXX MIS LUBRICAT	Tier 3 DP
MAXX PLUS MIS SPERMICI	Tier 3 DP
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	Tier 1
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	Tier 1
<i>melodetta chw 24 fe</i>	Tier 1
<i>mibelas 24 chw fe</i>	Tier 1
<i>mili tab 0.25/35</i>	Tier 1
<i>myzilra tab</i>	Tier 1
NATURAL COND MIS + LUBE	Tier 3 DP
<i>necon tab 0.5/35</i>	Tier 1
<i>necon tab 7/7/7</i>	Tier 1
<i>nikki tab 3-0.02mg</i>	Tier 1
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	Tier 1
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	Tier 1
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	Tier 1
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	Tier 1
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	Tier 1
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	Tier 1
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	Tier 1
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	Tier 1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	Tier 1	
<i>norethindrone tab 0.35 mg</i>	Tier 1	
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	Tier 1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	Tier 1	NDS
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	Tier 1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	Tier 1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	Tier 1	
<i>norlyroc tab 0.35mg</i>	Tier 1	
<i>nortrel tab 0.5/35</i>	Tier 1	
<i>nortrel tab 1/35</i>	Tier 1	
<i>nortrel tab 7/7/7</i>	Tier 1	
<i>NUVARING MIS</i>	Tier 2	
<i>orsythia tab</i>	Tier 1	
<i>philith tab 0.4-35</i>	Tier 1	
<i>pimtrea tab</i>	Tier 1	
<i>pirmella tab 1/35</i>	Tier 1	
<i>portia-28 tab</i>	Tier 1	
<i>previfem tab</i>	Tier 1	NDS
<i>quasense tab</i>	Tier 1	
<i>REALITY MIS LUBRICAT</i>	Tier 3	DP
<i>REALITY ULTR MIS TEXTURED</i>	Tier 3	DP
<i>REALITY ULTR MIS THIN</i>	Tier 3	DP
<i>reclipsen tab</i>	Tier 1	
<i>rivelsa tab</i>	Tier 1	
<i>sharobel tab 0.35mg</i>	Tier 1	
<i>sprintec 28 tab 28 day</i>	Tier 1	NDS
<i>tarina 24 fe tab</i>	Tier 1	
<i>tarina fe tab 1/20</i>	Tier 1	
<i>tri-estaryll tab</i>	Tier 1	
<i>tri-legest tab fe</i>	Tier 1	
<i>tri-lo- tab sprintec</i>	Tier 1	
<i>tri-mili tab</i>	Tier 1	
<i>tri-previfem tab</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>tri-sprintec tab</i>	Tier 1	
<i>tri-vylibra tab</i>	Tier 1	
<i>tri-vylibra tab lo</i>	Tier 1	
<i>trinessa lo tab</i>	Tier 1	
<i>trinessa tab</i>	Tier 1	
<i>trivora-28 tab</i>	Tier 1	
TROJAN EXTEN MIS LUBRICAT	Tier 3	DP
TROJAN MAGN MIS	Tier 3	DP
TROJAN MAGN MIS WARM SEN	Tier 3	DP
TROJAN MAGN MIS XL/LUBE	Tier 3	DP
TROJAN MIS	Tier 3	DP
TROJAN MIS ENZ-LUB	Tier 3	DP
TROJAN MIS NAT LAMB	Tier 3	DP
TROJAN MIS NATULAMB	Tier 3	DP
TROJAN MIS REGULAR	Tier 3	DP
TROJAN MIS RIBBED	Tier 3	DP
TROJAN MIS VERY SEN	Tier 3	DP
TROJAN MIS VERY THN	Tier 3	DP
TROJAN PLEAS MIS SPERMICI	Tier 3	DP
TROJAN PLUS MIS	Tier 3	DP
TROJAN RIB MIS	Tier 3	DP
TROJAN SHARE MIS LUBRICAT	Tier 3	DP
TROJAN SUPRA MIS SPERMICI	Tier 3	DP
TROJAN TWIST MIS PLEASURE	Tier 3	DP
TROJAN ULTRA MIS LUBRICAT	Tier 3	DP
TROJAN-ASSRT MIS PACK	Tier 3	DP
TROJAN-ENZ MIS LARGE	Tier 3	DP
TROJAN-ENZ MIS LUBRICAT	Tier 3	DP
TROJAN-ENZ MIS W/SPERMI	Tier 3	DP
TROJAN/SPERM MIS VERY SEN	Tier 3	DP
TROJAN/SPERM MIS VERY THN	Tier 3	DP
TRUSTEX LUBR MIS ASSORTED	Tier 3	DP
TRUSTEX LUBR MIS BANANA	Tier 3	DP
TRUSTEX LUBR MIS CHOC	Tier 3	DP
TRUSTEX LUBR MIS COLA	Tier 3	DP
TRUSTEX LUBR MIS COLORS	Tier 3	DP
TRUSTEX LUBR MIS EX LARGE	Tier 3	DP
TRUSTEX LUBR MIS EX STR	Tier 3	DP
TRUSTEX LUBR MIS GRAPE	Tier 3	DP
TRUSTEX LUBR MIS MINT	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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TRUSTEX LUBR MIS RIB/STUD	Tier 3	DP
TRUSTEX LUBR MIS SPERMICI	Tier 3	DP
TRUSTEX LUBR MIS STRWBRY	Tier 3	DP
TRUSTEX LUBR MIS VANILLA	Tier 3	DP
TRUSTEX MIS BANANA	Tier 3	DP
TRUSTEX MIS CHOCOLAT	Tier 3	DP
TRUSTEX MIS FLAVORS	Tier 3	DP
TRUSTEX MIS MINT	Tier 3	DP
TRUSTEX MIS STRWBRY	Tier 3	DP
TRUSTEX MIS VANILLA	Tier 3	DP
TRUSTEX/RIA MIS LUBRICAT	Tier 3	DP
TRUSTEX/RIA MIS NON-LUB	Tier 3	DP
TRUSTEX/RIA MIS SPERMICI	Tier 3	DP
TRUSTX NON-9 MIS RIB/STUD	Tier 3	DP
<i>tulana tab 0.35mg</i>	Tier 1	
<i>tydemy tab</i>	Tier 1	
ULTIMATE FEE MIS	Tier 3	DP
<i>velivet pak</i>	Tier 1	
<i>vienva tab 0.1-20</i>	Tier 1	
<i>viorele tab</i>	Tier 1	
<i>vyfemla tab 0.4-35</i>	Tier 1	
<i>vylibra tab 0.25-35</i>	Tier 1	NDS
<i>wymzya fe chw 0.4mg-35</i>	Tier 1	
<i>zarah tab 3-0.03mg</i>	Tier 1	
<i>zovia 1/35e tab</i>	Tier 1	

ENDOMETRIOSIS

<i>danazol cap 50 mg</i>	Tier 1	
<i>danazol cap 100 mg</i>	Tier 1	
<i>danazol cap 200 mg</i>	Tier 1	
SYNAREL SOL 2MG/ML	Tier 2	

ENZYME REPLACEMENTS - DRUGS TO TREAT ENZYME DEFICIENCIES

ALDURAZYME INJ 2.9MG/5M	Tier 2	LA, PA
CARBAGLU TAB 200MG	Tier 2	LA, PA
CERDELGA CAP 84MG	Tier 2	PA
CEREZYME INJ 400UNIT	Tier 2	LA, PA
CYSTADANE POW	Tier 2	LA
CYSTAGON CAP 50MG	Tier 2	LA, PA
CYSTAGON CAP 150MG	Tier 2	LA, PA
FABRAZYME INJ 5MG	Tier 2	LA, PA
FABRAZYME INJ 35MG	Tier 2	LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
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KUVAN POW 100MG	Tier 2	LA, PA
KUVAN POW 500MG	Tier 2	LA, PA
KUVAN TAB 100MG	Tier 2	LA, PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	Tier 1	B/D
<i>levocarnitine tab 330 mg</i>	Tier 1	B/D
LUMIZYME INJ 50MG	Tier 2	NDS, LA, PA
<i>miglustat cap 100 mg</i>	Tier 2	PA
NAGLAZYME INJ 1MG/ML	Tier 2	LA, PA
NITYR TAB 2MG	Tier 2	LA, PA
NITYR TAB 5MG	Tier 2	LA, PA
NITYR TAB 10MG	Tier 2	LA, PA
ORFADIN CAP 2MG	Tier 2	LA, PA
ORFADIN CAP 5MG	Tier 2	LA, PA
ORFADIN CAP 10MG	Tier 2	LA, PA
ORFADIN CAP 20MG	Tier 2	LA, PA
ORFADIN SUS 4MG/ML	Tier 2	LA, PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	Tier 2	PA
<i>sodium phenylbutyrate tab 500 mg</i>	Tier 2	PA

ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES

DELESTROGEN INJ 10MG/ML	Tier 2	
<i>estradiol tab 0.5 mg</i>	Tier 2	
<i>estradiol tab 1 mg</i>	Tier 2	
<i>estradiol tab 2 mg</i>	Tier 2	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	Tier 2	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	Tier 2	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	Tier 2	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	Tier 2	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	Tier 2	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	Tier 2	
<i>estradiol vaginal cream 0.1 mg/gm</i>	Tier 1	
<i>estradiol vaginal tab 10 mcg</i>	Tier 1	
<i>estradiol valerate im in oil 20 mg/ml</i>	Tier 1	
<i>estradiol valerate im in oil 40 mg/ml</i>	Tier 1	NDS
<i>fyavolv tab 0.5-2.5</i>	Tier 2	
<i>jinteli tab 1mg-5mcg</i>	Tier 2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	Tier 2	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	Tier 2
GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE	
<i>cortisone acetate tab 25 mg</i>	Tier 1
<i>DEXAMETHASON CON 1MG/ML</i>	Tier 2
<i>dexamethasone elixir 0.5 mg/5ml</i>	Tier 1
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	Tier 1
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	Tier 1
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	Tier 1
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	Tier 1
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	Tier 1
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	Tier 1
<i>dexamethasone soln 0.5 mg/5ml</i>	Tier 1
<i>dexamethasone tab 0.5 mg</i>	Tier 1
<i>dexamethasone tab 0.75 mg</i>	Tier 1
<i>dexamethasone tab 1 mg</i>	Tier 1
<i>dexamethasone tab 1.5 mg</i>	Tier 1
<i>dexamethasone tab 2 mg</i>	Tier 1
<i>dexamethasone tab 4 mg</i>	Tier 1
<i>dexamethasone tab 6 mg</i>	Tier 1
<i>fludrocortisone acetate tab 0.1 mg</i>	Tier 1
<i>hydrocortisone tab 5 mg</i>	Tier 1
<i>hydrocortisone tab 10 mg</i>	Tier 1
<i>hydrocortisone tab 20 mg</i>	Tier 1
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	Tier 1 B/D
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	Tier 1 B/D
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	Tier 1 B/D
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	Tier 1 B/D
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	Tier 1 B/D
<i>methylprednisolone tab 4 mg</i>	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>methylprednisolone tab 8 mg</i>	Tier 1	B/D
<i>methylprednisolone tab 16 mg</i>	Tier 1	B/D
<i>methylprednisolone tab 32 mg</i>	Tier 1	B/D
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	Tier 1	NDS
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	Tier 1	B/D
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	Tier 1	B/D
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	Tier 1	B/D
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	Tier 1	B/D
PREDNISON CON 5MG/ML	Tier 2	B/D
<i>prednisone oral soln 5 mg/5ml</i>	Tier 1	B/D
<i>prednisone tab 1 mg</i>	Tier 1	B/D
<i>prednisone tab 2.5 mg</i>	Tier 1	B/D
<i>prednisone tab 5 mg</i>	Tier 1	B/D
<i>prednisone tab 10 mg</i>	Tier 1	B/D
<i>prednisone tab 20 mg</i>	Tier 1	B/D
<i>prednisone tab 50 mg</i>	Tier 1	B/D
<i>prednisone tab therapy pack 5 mg (21)</i>	Tier 1	
<i>prednisone tab therapy pack 5 mg (48)</i>	Tier 1	
<i>prednisone tab therapy pack 10 mg (21)</i>	Tier 1	
<i>prednisone tab therapy pack 10 mg (48)</i>	Tier 1	
SOLU-CORTEF INJ 100MG	Tier 2	
SOLU-CORTEF INJ 250MG	Tier 2	
SOLU-CORTEF INJ 500MG	Tier 2	
SOLU-CORTEF INJ 1000MG	Tier 2	

GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR

GLUCAGEN INJ HYPOKIT	Tier 2	
GLUCAGON KIT 1MG	Tier 2	
PROGLYCEM SUS 50MG/ML	Tier 2	

MISCELLANEOUS

<i>cabergoline tab 0.5 mg</i>	Tier 1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	Tier 1	B/D
CHARCOAL POW	Tier 3	DP
CHEMSTRIP TES UGK	Tier 3	DP
D-XYLOSE POW	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
DIASCREEN 3 MIS	Tier 3	DP
DIASCREEN 5 MIS	Tier 3	DP
DIASCREEN 6 MIS	Tier 3	DP
DIASCREEN 7 MIS	Tier 3	DP
DIASCREEN 8 MIS	Tier 3	DP
DIASCREEN 9 MIS	Tier 3	DP
DIASCREEN 10 MIS	Tier 3	DP
DIASCREEN MIS 1G	Tier 3	DP
DIASCREEN MIS 2GK	Tier 3	DP
DIASCREEN MIS 4OBL	Tier 3	DP
DIASTIX TES STRIPS	Tier 3	DP
FORTEO SOL 600/2.4	Tier 2	PA
GENOTROPIN INJ 0.2MG	Tier 2	PA
GENOTROPIN INJ 0.4MG	Tier 2	PA
GENOTROPIN INJ 0.6MG	Tier 2	PA
GENOTROPIN INJ 0.8MG	Tier 2	PA
GENOTROPIN INJ 1.2MG	Tier 2	PA
GENOTROPIN INJ 1.4MG	Tier 2	PA
GENOTROPIN INJ 1.6MG	Tier 2	PA
GENOTROPIN INJ 1.8MG	Tier 2	PA
GENOTROPIN INJ 1MG	Tier 2	PA
GENOTROPIN INJ 2MG	Tier 2	PA
GENOTROPIN INJ 5MG	Tier 2	PA
GENOTROPIN INJ 12MG	Tier 2	PA
INCRELEX INJ 40MG/4ML	Tier 2	LA, PA
KETO-DIASTIX TES	Tier 3	DP
KORLYM TAB 300MG	Tier 2	LA, PA
LUPR DEP-PED INJ 3M 30MG	Tier 2	PA
LUPR DEP-PED INJ 7.5MG	Tier 2	PA
LUPR DEP-PED INJ 11.25MG	Tier 2	PA
LUPR DEP-PED INJ 15MG	Tier 2	PA
NATPARA INJ 25MCG	Tier 2	PA
NATPARA INJ 50MCG	Tier 2	PA
NATPARA INJ 75MCG	Tier 2	PA
NATPARA INJ 100MCG	Tier 2	PA
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	Tier 1	PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	Tier 1	PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	Tier 1	PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	Tier 2	PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	Tier 2	PA
PROLIA SOL 60MG/ML	Tier 2	QL (1 injection / 180 days)
<i>raloxifene hcl tab 60 mg</i>	Tier 1	
SIGNIFOR INJ 0.3MG/ML	Tier 2	LA, PA
SIGNIFOR INJ 0.6MG/ML	Tier 2	LA, PA
SIGNIFOR INJ 0.9MG/ML	Tier 2	LA, PA
SOMATULINE INJ 60/0.2ML	Tier 2	PA
SOMATULINE INJ 90/0.3ML	Tier 2	PA
SOMATULINE INJ 120/.5ML	Tier 2	PA
SOMAVERT INJ 10MG	Tier 2	LA, PA
SOMAVERT INJ 15MG	Tier 2	LA, PA
SOMAVERT INJ 20MG	Tier 2	LA, PA
SOMAVERT INJ 25MG	Tier 2	LA, PA
SOMAVERT INJ 30MG	Tier 2	LA, PA
TYMLOS INJ	Tier 2	PA
XENICAL CAP 120MG	Tier 3	DP
XGEVA INJ	Tier 2	PA

PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS

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

PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES

<i>medroxyprogesterone acetate tab 2.5 mg</i>	Tier 1	
<i>medroxyprogesterone acetate tab 5 mg</i>	Tier 1	
<i>medroxyprogesterone acetate tab 10 mg</i>	Tier 1	
<i>norethindrone acetate tab 5 mg</i>	Tier 1	

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

<i>levo-t tab 25mcg</i>	Tier 1
<i>levo-t tab 50mcg</i>	Tier 1
<i>levo-t tab 75mcg</i>	Tier 1
<i>levo-t tab 88mcg</i>	Tier 1
<i>levo-t tab 100mcg</i>	Tier 1
<i>levo-t tab 112mcg</i>	Tier 1
<i>levo-t tab 125mcg</i>	Tier 1
<i>levo-t tab 137mcg</i>	Tier 1
<i>levo-t tab 150mcg</i>	Tier 1
<i>levo-t tab 175mcg</i>	Tier 1
<i>levo-t tab 200 mcg</i>	Tier 1
<i>levo-t tab 300 mcg</i>	Tier 1
<i>levothyroxine sodium tab 25 mcg</i>	Tier 1
<i>levothyroxine sodium tab 50 mcg</i>	Tier 1
<i>levothyroxine sodium tab 75 mcg</i>	Tier 1
<i>levothyroxine sodium tab 88 mcg</i>	Tier 1
<i>levothyroxine sodium tab 100 mcg</i>	Tier 1
<i>levothyroxine sodium tab 112 mcg</i>	Tier 1
<i>levothyroxine sodium tab 125 mcg</i>	Tier 1
<i>levothyroxine sodium tab 137 mcg</i>	Tier 1
<i>levothyroxine sodium tab 150 mcg</i>	Tier 1
<i>levothyroxine sodium tab 175 mcg</i>	Tier 1
<i>levothyroxine sodium tab 200 mcg</i>	Tier 1
<i>levothyroxine sodium tab 300 mcg</i>	Tier 1
<i>levoxyl tab 25mcg</i>	Tier 1
<i>levoxyl tab 50mcg</i>	Tier 1
<i>levoxyl tab 75mcg</i>	Tier 1
<i>levoxyl tab 88mcg</i>	Tier 1
<i>levoxyl tab 100mcg</i>	Tier 1
<i>levoxyl tab 112mcg</i>	Tier 1
<i>levoxyl tab 125mcg</i>	Tier 1
<i>levoxyl tab 137mcg</i>	Tier 1
<i>levoxyl tab 150mcg</i>	Tier 1
<i>levoxyl tab 175mcg</i>	Tier 1
<i>levoxyl tab 200mcg</i>	Tier 1
<i>liothyronine sodium tab 5 mcg</i>	Tier 1
<i>liothyronine sodium tab 25 mcg</i>	Tier 1
<i>liothyronine sodium tab 50 mcg</i>	Tier 1
<i>methimazole tab 5 mg</i>	Tier 1

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LA - Limited Access

DP - The drug is not a Part D drug.

ST - Step Therapy

NDS - Non-Extended Days Supply

B/D - Covered

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

VASOPRESSINS - DRUGS TO REGULATE PITUITARY HORMONES

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

GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS

ANTACIDS

<i>advanced sus antacid</i>	Tier 3	DP
<i>almacone chw</i>	Tier 3	DP

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NDS - Non-Extended Days Supply

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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>almacone dbi sus strength</i>	Tier 3	DP
<i>almacone sus</i>	Tier 3	DP
ALUM HYDROX SUS 320/5ML	Tier 3	DP
<i>antacid fast sus acting</i>	Tier 3	DP
<i>antacid fast sus relief</i>	Tier 3	DP
<i>antacid plus sus anti-gas</i>	Tier 3	DP
<i>antacid plus sus gas rel</i>	Tier 3	DP
<i>antacid sus</i>	Tier 3	DP
<i>antacid sus anti-gas</i>	Tier 3	DP
<i>antacid sus max st</i>	Tier 3	DP
<i>antacid sus mint crm</i>	Tier 3	DP
<i>antacid sus reg st</i>	Tier 3	DP
<i>antacid/sime sus ds</i>	Tier 3	DP
CALCIUM CARB TAB 648MG	Tier 3	DP
GELUSIL CHW	Tier 3	DP
<i>gnp antacid sus anti-gas</i>	Tier 3	DP
<i>gnp antacid sus cherry</i>	Tier 3	DP
<i>gnp masanti sus max st</i>	Tier 3	DP
<i>gnp masanti sus reg st</i>	Tier 3	DP
<i>hm antacid sus anti-gas</i>	Tier 3	DP
<i>mag-al plus liq</i>	Tier 3	DP
<i>mag-al plus liq xs</i>	Tier 3	DP
MAGN OXIDE POW HEAVY	Tier 3	DP
MAGN OXIDE POW LIGHT	Tier 3	DP
<i>magnesium oxide tab 400 mg</i>	Tier 3	DP
<i>magnesium oxide tab 420 mg</i>	Tier 3	DP
<i>mi-acid sus</i>	Tier 3	DP
<i>mi-acid sus max st</i>	Tier 3	DP
<i>milantex sus ex st</i>	Tier 3	DP
<i>milantex sus original</i>	Tier 3	DP
<i>mintox plus chw</i>	Tier 3	DP
<i>mintox sus</i>	Tier 3	DP
<i>mintox sus max st</i>	Tier 3	DP
<i>qc antacid sus</i>	Tier 3	DP
<i>qc antacid sus anti-gas</i>	Tier 3	DP
<i>rulox sus</i>	Tier 3	DP
<i>sb antacid sus anti-gas</i>	Tier 3	DP
<i>sm antacid sus advanced</i>	Tier 3	DP
<i>sm antacid sus anti-gas</i>	Tier 3	DP
<i>sm antacid/ sus antigas</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)		RESTRICTIONS OR LIMITS ON USE
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SODIUM POW BICARBON	Tier 3	DP
URO-MAG CAP 140MG	Tier 3	DP

ANTI-DIARRHEAL

<i>anti-diarrhe cap 2mg</i>	Tier 3	DP
<i>anti-diarrhe tab 2mg</i>	Tier 3	DP
<i>bismatrol chw 262mg</i>	Tier 3	DP
<i>bismatrol sus 262/15ml</i>	Tier 3	DP
BISMUTH POW SUBGALLA	Tier 3	DP
<i>bismuth subsalicylate chew tab 262 mg</i>	Tier 3	DP
<i>diarrhea rel sus 262/15ml</i>	Tier 3	DP
<i>gnp k-pec sus 262/15ml</i>	Tier 3	DP
<i>kao-tin sus 262/15ml</i>	Tier 3	DP
KAOLIN POW COLLOID	Tier 3	DP
<i>loperamide cap 2mg</i>	Tier 3	DP
<i>loperamide hcl liq 1 mg/5ml (0.2 mg/ml)</i>	Tier 3	DP
<i>medi-bismuth chw 262mg</i>	Tier 3	DP
PECTIN POW	Tier 3	DP
<i>peptic relf chw 262mg</i>	Tier 3	DP
<i>peptic relf sus 262/15ml</i>	Tier 3	DP
<i>pink bismuth chw 262mg</i>	Tier 3	DP
<i>pink bismuth tab 262mg</i>	Tier 3	DP
<i>sm anti-diar tab 2mg</i>	Tier 3	DP
<i>sm stomach sus 262/15ml</i>	Tier 3	DP
<i>stomach relf chw 262mg</i>	Tier 3	DP
<i>stomach relf sus 262/15ml</i>	Tier 3	DP
<i>stomach relf tab 262mg</i>	Tier 3	DP

ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING

<i>aprepitant capsule 40 mg</i>	Tier 1	B/D
<i>aprepitant capsule 80 mg</i>	Tier 1	B/D
<i>aprepitant capsule 125 mg</i>	Tier 1	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	Tier 1	B/D
<i>compro sup 25mg</i>	Tier 1	
<i>dronabinol cap 2.5 mg</i>	Tier 1	B/D, QL (60 caps / 30 days)
<i>dronabinol cap 5 mg</i>	Tier 1	B/D, QL (60 caps / 30 days)
<i>dronabinol cap 10 mg</i>	Tier 1	B/D, QL (60 caps / 30 days)
EMEND SUS 125MG	Tier 2	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>granisetron hcl inj 1 mg/ml</i>	Tier 1	
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	Tier 1	
<i>granisetron hcl tab 1 mg</i>	Tier 1	B/D
<i>meclizine hcl tab 12.5 mg</i>	Tier 2	
<i>meclizine hcl tab 25 mg</i>	Tier 2	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	Tier 1	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	Tier 1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	Tier 1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	Tier 1	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	Tier 1	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	Tier 1	
<i>ondansetron hcl oral soln 4 mg/5ml</i>	Tier 1	B/D
<i>ondansetron hcl tab 4 mg</i>	Tier 1	B/D
<i>ondansetron hcl tab 8 mg</i>	Tier 1	B/D
<i>ondansetron hcl tab 24 mg</i>	Tier 1	B/D
<i>ondansetron orally disintegrating tab 4 mg</i>	Tier 1	B/D
<i>ondansetron orally disintegrating tab 8 mg</i>	Tier 1	B/D
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	Tier 1	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	Tier 1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	Tier 1	
<i>prochlorperazine suppos 25 mg</i>	Tier 1	
<i>promethazine hcl inj 25 mg/ml</i>	Tier 2	PA; PA if 70 years and older
<i>promethazine hcl inj 50 mg/ml</i>	Tier 2	PA; PA if 70 years and older
<i>promethazine hcl syrup 6.25 mg/5ml</i>	Tier 2	PA; PA if 70 years and older
<i>promethazine hcl tab 12.5 mg</i>	Tier 2	PA; PA if 70 years and older
<i>promethazine hcl tab 25 mg</i>	Tier 2	PA; PA if 70 years and older
<i>promethazine hcl tab 50 mg</i>	Tier 2	PA; PA if 70 years and older
<i>scopolamine td patch 72hr 1 mg/3days</i>	Tier 2	QL (10 patches / 30 days), PA; PA if 70 years and older

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
TRANSDERM-SC DIS 1.5MG	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>	Tier 2
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	Tier 2
<i>dicyclomine hcl tab 20 mg</i>	Tier 2
<i>glycopyrrolate tab 1 mg</i>	Tier 1
<i>glycopyrrolate tab 2 mg</i>	Tier 1

H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID

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

INFLAMMATORY BOWEL DISEASE

APRISO CAP 0.375GM	Tier 2	QL (120 caps / 30 days)
<i>balsalazide disodium cap 750 mg</i>	Tier 1	
<i>budesonide delayed release particles cap 3 mg</i>	Tier 2	
DELZICOL CAP 400MG	Tier 2	
<i>hydrocortisone enema 100 mg/60ml</i>	Tier 1	
<i>mesalamine cap dr 400 mg</i>	Tier 1	
<i>mesalamine enema 4 gm</i>	Tier 1	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	Tier 1	
<i>mesalamine suppos 1000 mg</i>	Tier 1	
<i>mesalamine tab delayed release 800 mg</i>	Tier 1	
<i>sulfasalazine tab 500 mg</i>	Tier 1	
<i>sulfasalazine tab delayed release 500 mg</i>	Tier 1	

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

<i>bisac-evac sup 10mg</i>	Tier 3	DP
<i>bisacodyl suppos 10 mg</i>	Tier 3	DP
<i>bisacodyl tab 5mg ec</i>	Tier 3	DP
<i>biscolax sup 10mg</i>	Tier 3	DP
<i>constulose sol 10gm/15</i>	Tier 1	
<i>docqlace cap 100mg</i>	Tier 3	DP
<i>docu liq 50mg/5ml</i>	Tier 3	DP
<i>docu soft cap 100mg</i>	Tier 3	DP
<i>docusate cal cap 240mg</i>	Tier 3	DP
<i>docusate sod cap 100mg</i>	Tier 3	DP
<i>docusate sod liq 50mg/5ml</i>	Tier 3	DP
<i>docusate sodium cap 100 mg</i>	Tier 3	DP
<i>docusate sodium liquid 150 mg/15ml</i>	Tier 3	DP
<i>docusil cap 100mg</i>	Tier 3	DP
DOCUSOL MINI ENE	Tier 3	DP
<i>dok plus tab 8.6-50mg</i>	Tier 3	DP
<i>ducodyl tab 5mg ec</i>	Tier 3	DP
ENEMEEZ MINI ENE	Tier 3	DP
ENEMEEZ PLUS ENE 20-283	Tier 3	DP
<i>enulose sol 10gm/15</i>	Tier 1	
<i>epsom salt gra</i>	Tier 3	DP
EPSOM SALT POW	Tier 3	DP
<i>gavilyte-c sol</i>	Tier 1	
<i>gavilyte-g sol</i>	Tier 1	
<i>gavilyte-n sol flav pk</i>	Tier 1	
<i>generlac sol 10gm/15</i>	Tier 1	
<i>gentle laxat sup 10mg</i>	Tier 3	DP
<i>gentle laxat tab 5mg ec</i>	Tier 3	DP
<i>glycerin suppos 1 gm</i>	Tier 3	DP
<i>gnp bisa-lax tab 5mg ec</i>	Tier 3	DP
<i>gnp glycerin sup 1.2gm</i>	Tier 3	DP
<i>gnp laxative sup 10mg</i>	Tier 3	DP
<i>gnp laxative tab 5mg ec</i>	Tier 3	DP
<i>gnp laxative tab 25mg</i>	Tier 3	DP
GOLYTELY SOL	Tier 2	
<i>hm epsom gra salt</i>	Tier 3	DP
<i>hm laxative tab 5mg ec</i>	Tier 3	DP
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	Tier 1	

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LA - Limited Access

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NDS - Non-Extended Days Supply

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

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

MISCELLANEOUS

<i>aloseptron hcl tab 0.5 mg (base equiv)</i>	Tier 2	PA
<i>aloseptron hcl tab 1 mg (base equiv)</i>	Tier 2	PA
AMITIZA CAP 8MCG	Tier 2	QL (180 caps / 30 days)
AMITIZA CAP 24MCG	Tier 2	QL (60 caps / 30 days)
<i>cromolyn sodium oral conc 100 mg/5ml</i>	Tier 2	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	Tier 2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	Tier 2	
GATTEX KIT 5MG	Tier 2	LA, PA
LINZESS CAP 72MCG	Tier 2	QL (30 caps / 30 days)
LINZESS CAP 145MCG	Tier 2	QL (30 caps / 30 days)
LINZESS CAP 290MCG	Tier 2	QL (30 caps / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>loperamide hcl cap 2 mg</i>	Tier 1	
<i>misoprostol tab 100 mcg</i>	Tier 1	
<i>misoprostol tab 200 mcg</i>	Tier 1	
MOVANTIK TAB 12.5MG	Tier 2	QL (60 tabs / 30 days)
MOVANTIK TAB 25MG	Tier 2	QL (30 tabs / 30 days)
RELISTOR INJ 8/0.4ML	Tier 2	PA
RELISTOR INJ 12/0.6ML	Tier 2	PA
SIMETHICONE LIQ	Tier 3	DP
<i>sucralate tab 1 gm</i>	Tier 1	
SYMPROIC TAB 0.2MG	Tier 2	
<i>ursodiol cap 300 mg</i>	Tier 1	
<i>ursodiol tab 250 mg</i>	Tier 1	
<i>ursodiol tab 500 mg</i>	Tier 1	
XIFAXAN TAB 550MG	Tier 2	PA

PANCREATIC ENZYMES

CREON CAP 3000UNIT	Tier 2	
CREON CAP 6000UNIT	Tier 2	
CREON CAP 12000UNT	Tier 2	
CREON CAP 24000UNT	Tier 2	
CREON CAP 36000UNT	Tier 2	
ZENPEP CAP 3000UNIT	Tier 2	
ZENPEP CAP 5000UNIT	Tier 2	
ZENPEP CAP 10000UNT	Tier 2	
ZENPEP CAP 15000UNT	Tier 2	
ZENPEP CAP 20000UNT	Tier 2	
ZENPEP CAP 25000	Tier 2	
ZENPEP CAP 40000	Tier 2	

PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID

DEXILANT CAP 30MG DR	Tier 2	QL (30 caps / 30 days)
DEXILANT CAP 60MG DR	Tier 2	QL (30 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	Tier 1	QL (30 caps / 30 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	Tier 1	QL (30 caps / 30 days)
<i>esomeprazole sodium for intravenous soln 20 mg (base equiv)</i>	Tier 1	
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	Tier 1	
<i>lansoprazole cap delayed release 15 mg</i>	Tier 1	QL (30 caps / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>lansoprazole cap delayed release 30 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>omeprazole cap delayed release 10 mg</i>	Tier 1	
<i>omeprazole cap delayed release 20 mg</i>	Tier 1	
<i>omeprazole cap delayed release 40 mg</i>	Tier 1	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	Tier 1	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	Tier 1	
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	Tier 1	
<i>rabeprazole sodium ec tab 20 mg</i>	Tier 1	QL (30 tabs / 30 days)

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>	Tier 1	QL (30 tabs / 30 days)
<i>dutasteride cap 0.5 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	Tier 1	QL (30 caps / 30 days)
<i>finasteride tab 5 mg</i>	Tier 1	
<i>tamsulosin hcl cap 0.4 mg</i>	Tier 1	

MISCELLANEOUS

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

URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

MYRBETRIQ TAB 25MG	Tier 2	QL (60 tabs / 30 days)
MYRBETRIQ TAB 50MG	Tier 2	QL (30 tabs / 30 days)
<i>oxybutynin chloride syrup 5 mg/5ml</i>	Tier 1	
<i>oxybutynin chloride tab 5 mg</i>	Tier 1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 10 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>oxybutynin chloride tab er 24hr 15 mg</i>	Tier 1	QL (60 tabs / 30 days)
<i>solifenacin succinate tab 5 mg</i>	Tier 1	QL (30 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>solifenacin succinate tab 10 mg</i>	Tier 1	QL (30 tabs / 30 days)
<i>tolterodine tartrate cap er 24hr 2 mg</i>	Tier 1	QL (30 caps / 30 days), ST
<i>tolterodine tartrate cap er 24hr 4 mg</i>	Tier 1	QL (30 caps / 30 days), ST
<i>tolterodine tartrate tab 1 mg</i>	Tier 1	ST
<i>tolterodine tartrate tab 2 mg</i>	Tier 1	ST
TOVIAZ TAB 4MG	Tier 2	QL (30 tabs / 30 days)
TOVIAZ TAB 8MG	Tier 2	QL (30 tabs / 30 days)
<i>tropium chloride tab 20 mg</i>	Tier 1	QL (60 tabs / 30 days)

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal cream 2%</i>	Tier 1	
<i>clotrimazole cre 1% vag</i>	Tier 3	DP
<i>clotrimazole cre 3 day</i>	Tier 3	DP
<i>clotrimazole vaginal cream 1%</i>	Tier 3	DP
<i>3 day vaginl cre 2%</i>	Tier 3	DP
<i>metronidazole vaginal gel 0.75%</i>	Tier 1	
<i>miconazole 3 kit combinat</i>	Tier 3	DP
<i>miconazole 3 kit combo pk</i>	Tier 3	DP
<i>miconazole 7 cre 2%</i>	Tier 3	DP
<i>miconazole 7 cre tube/kit</i>	Tier 3	DP
<i>miconazole 7 sup 100mg</i>	Tier 3	DP
<i>miconazole nitrate vaginal cream 2%</i>	Tier 3	DP
<i>miconazole nitrate vaginal suppos 100 mg</i>	Tier 3	DP
<i>sm micon 7 sup 100mg</i>	Tier 3	DP
<i>terconazole vaginal cream 0.4%</i>	Tier 1	
<i>terconazole vaginal cream 0.8%</i>	Tier 1	
<i>terconazole vaginal suppos 80 mg</i>	Tier 1	
<i>vandazole gel 0.75%</i>	Tier 1	

HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS

ANTICOAGULANTS - BLOOD THINNERS

COUMADIN TAB 1MG	Tier 2
COUMADIN TAB 2.5MG	Tier 2
COUMADIN TAB 2MG	Tier 2
COUMADIN TAB 3MG	Tier 2
COUMADIN TAB 4MG	Tier 2
COUMADIN TAB 5MG	Tier 2
COUMADIN TAB 6MG	Tier 2
COUMADIN TAB 7.5MG	Tier 2
COUMADIN TAB 10MG	Tier 2

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
ELIQUIS ST P TAB 5MG	Tier 2	
ELIQUIS TAB 2.5MG	Tier 2	
ELIQUIS TAB 5MG	Tier 2	
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	Tier 1	
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	Tier 1	
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	Tier 1	
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	Tier 1	
<i>enoxaparin sodium inj 100 mg/ml</i>	Tier 1	
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	Tier 1	
<i>enoxaparin sodium inj 150 mg/ml</i>	Tier 1	
<i>enoxaparin sodium inj 300 mg/3ml</i>	Tier 1	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	Tier 1	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	Tier 2	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	Tier 2	
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	Tier 2	
HEP SOD/NACL INJ 25000UNT	Tier 2	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	Tier 2	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	Tier 1	B/D
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	Tier 1	B/D
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	Tier 1	B/D
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	Tier 1	B/D
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	Tier 2	
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	Tier 2	
HEPARIN/NACL INJ 25000UNT	Tier 2	
<i>jantoven tab 1mg</i>	Tier 1	
<i>jantoven tab 2.5mg</i>	Tier 1	
<i>jantoven tab 2mg</i>	Tier 1	
<i>jantoven tab 3mg</i>	Tier 1	
<i>jantoven tab 4mg</i>	Tier 1	
<i>jantoven tab 5mg</i>	Tier 1	
<i>jantoven tab 6mg</i>	Tier 1	
<i>jantoven tab 7.5mg</i>	Tier 1	
<i>jantoven tab 10mg</i>	Tier 1	
PRADAXA CAP 75MG	Tier 2	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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PRADAXA CAP 110MG	Tier 2
PRADAXA CAP 150MG	Tier 2
<i>warfarin sodium tab 1 mg</i>	Tier 1
<i>warfarin sodium tab 2 mg</i>	Tier 1
<i>warfarin sodium tab 2.5 mg</i>	Tier 1
<i>warfarin sodium tab 3 mg</i>	Tier 1
<i>warfarin sodium tab 4 mg</i>	Tier 1
<i>warfarin sodium tab 5 mg</i>	Tier 1
<i>warfarin sodium tab 6 mg</i>	Tier 1
<i>warfarin sodium tab 7.5 mg</i>	Tier 1
<i>warfarin sodium tab 10 mg</i>	Tier 1
XARELTO STAR TAB 15/20MG	Tier 2
XARELTO TAB 2.5MG	Tier 2
XARELTO TAB 10MG	Tier 2
XARELTO TAB 15MG	Tier 2
XARELTO TAB 20MG	Tier 2

HEMATOPOIETIC GROWTH FACTORS

GRANIX INJ 300/0.5	Tier 2	PA
GRANIX INJ 300/1ML	Tier 2	PA
GRANIX INJ 480/0.8	Tier 2	PA
GRANIX INJ 480/1.6	Tier 2	PA
NEUPOGEN INJ 300/0.5	Tier 2	PA
NEUPOGEN INJ 300MCG	Tier 2	PA
NEUPOGEN INJ 480/0.8	Tier 2	PA
NEUPOGEN INJ 480MCG	Tier 2	PA
PROCRIT INJ 2000/ML	Tier 2	PA
PROCRIT INJ 3000/ML	Tier 2	PA
PROCRIT INJ 4000/ML	Tier 2	PA
PROCRIT INJ 10000/ML	Tier 2	PA
PROCRIT INJ 20000/ML	Tier 2	PA
PROCRIT INJ 40000/ML	Tier 2	PA

IRON

DUOFER TAB 28MG	Tier 3	DP
EZFE 200 CAP 200MG	Tier 3	DP
FE SULFATE POW	Tier 3	DP
FERAHEME INJ 510/17ML	Tier 3	DP
<i>ferate tab 27mg</i>	Tier 3	DP
FERGON TAB 27MG	Tier 3	DP
<i>ferosul elx 220/5ml</i>	Tier 3	DP
<i>ferosul tab 325mg</i>	Tier 3	DP

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)		RESTRICTIONS OR LIMITS ON USE
FERRETTIS IPS SOL	Tier 3	DP	
FERRETTIS TAB 325MG	Tier 3	DP	
<i>ferrex 150 cap 150mg</i>	Tier 3	DP	
FERRIMIN 150 TAB	Tier 3	DP	
FERRLECIT INJ 12.5MG/M	Tier 3	DP	
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	Tier 3	DP	
FERROUS GLUC TAB 324MG	Tier 3	DP	
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	Tier 3	DP	
<i>ferrous gluconate tab 324 mg (37.5 mg elemental iron)</i>	Tier 3	DP	
FERROUS SUL LIQ 220/5ML	Tier 3	DP	
FERROUS SULF SYP 300/5ML	Tier 3	DP	
FERROUS SULF TAB 140MG	Tier 3	DP	
FERROUS SULF TAB 324MG EC	Tier 3	DP	
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	Tier 3	DP	
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	Tier 3	DP	
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	Tier 3	DP	
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	Tier 3	DP	
<i>ferrousul tab 325mg</i>	Tier 3	DP	
FOLITAB 500 TAB	Tier 3	DP	
FUSION CAP	Tier 3	DP	
<i>gnp iron tab 45mg</i>	Tier 3	DP	
<i>gnp iron tab 65mg</i>	Tier 3	DP	
HEMOCYTE TAB 324MG	Tier 3	DP	
<i>hm iron tab 65mg</i>	Tier 3	DP	
ICAR PEDS SUS GRAPE	Tier 3	DP	
ICAR-C TAB	Tier 3	DP	
<i>iferex 150 cap</i>	Tier 3	DP	
INFED INJ 50MG/ML	Tier 3	DP	
INTEGRA CAP	Tier 3	DP	
<i>iron 100 tab plus</i>	Tier 3	DP	
<i>iron 100/c tab 100-250</i>	Tier 3	DP	
NOVAFERRUM CAP 50MG	Tier 3	DP	
NOVAFERRUM DRO 15MG/ML	Tier 3	DP	
NOVAFERRUM LIQ 125	Tier 3	DP	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>nu-iron 150 cap 150mg</i>	Tier 3 DP
<i>poly-iron cap 150mg</i>	Tier 3 DP
PROFE CAP 180MG	Tier 3 DP
SLOW REL FE TAB 143MG CR	Tier 3 DP
<i>slow release tab 47.5mg</i>	Tier 3 DP
<i>sm iron slow tab 160mg cr</i>	Tier 3 DP
<i>sm iron tab 325mg</i>	Tier 3 DP
TANDEM CAP	Tier 3 DP
VENOFER INJ 20MG/ML	Tier 3 DP
<i>wee care sus 15/1.25</i>	Tier 3 DP

MISCELLANEOUS

<i>anagrelide hcl cap 0.5 mg</i>	Tier 1	
<i>anagrelide hcl cap 1 mg</i>	Tier 1	
BERINERT INJ 500UNIT	Tier 2	QL (24 boxes / 30 days), LA, PA
<i>cilostazol tab 50 mg</i>	Tier 1	
<i>cilostazol tab 100 mg</i>	Tier 1	
DROXIA CAP 200MG	Tier 2	
DROXIA CAP 300MG	Tier 2	
DROXIA CAP 400MG	Tier 2	
ENDARI POW 5GM	Tier 2	LA, PA
FIRAZYR INJ 30MG/3ML	Tier 2	QL (9 syringes / 30 days), PA
HAEGARDA INJ 2000UNIT	Tier 2	QL (30 vials / 30 days), LA, PA
HAEGARDA INJ 3000UNIT	Tier 2	QL (20 vials / 30 days), LA, PA
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	Tier 2	QL (9 syringes / 30 days), PA
<i>pentoxifylline tab er 400 mg</i>	Tier 1	
PROMACTA POW 12.5MG	Tier 2	QL (360 packets / 30 days), LA, PA
PROMACTA TAB 12.5MG	Tier 2	QL (360 tabs / 30 days), LA, PA
PROMACTA TAB 25MG	Tier 2	QL (180 tabs / 30 days), LA, PA
PROMACTA TAB 50MG	Tier 2	QL (90 tabs / 30 days), LA, PA
PROMACTA TAB 75MG	Tier 2	QL (60 tabs / 30 days), LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	Tier 1	
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<i>tranexamic acid tab 650 mg</i>	Tier 1	
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PLATELET AGGREGATION INHIBITORS

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	Tier 1	
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BRILINTA TAB 60MG	Tier 2	
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BRILINTA TAB 90MG	Tier 2	
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<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	Tier 1	
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<i>prasugrel hcl tab 5 mg (base equiv)</i>	Tier 1	
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<i>prasugrel hcl tab 10 mg (base equiv)</i>	Tier 1	
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ZONTIVITY TAB 2.08MG	Tier 2	
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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	Tier 2	QL (2 injections / 28 days), PA
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HUMIRA INJ 10MG/0.2	Tier 2	QL (2 syringes / 28 days), PA
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HUMIRA INJ 20/0.2ML	Tier 2	QL (2 injections / 28 days), PA
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HUMIRA INJ 40/0.4ML	Tier 2	QL (6 injections / 28 days), PA
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HUMIRA KIT 20MG/0.4	Tier 2	QL (2 syringes / 28 days), PA
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HUMIRA KIT 40MG/0.8	Tier 2	QL (6 syringes / 28 days), PA
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HUMIRA PEDIA INJ CROHNS	Tier 2	PA
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HUMIRA PEN INJ 40/0.4ML	Tier 2	QL (6 pens / 28 days), PA
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HUMIRA PEN INJ 40MG/0.8	Tier 2	QL (6 pens / 28 days), PA
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HUMIRA PEN INJ CD/UC/HS	Tier 2	PA
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HUMIRA PEN INJ PS/UV	Tier 2	PA
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HUMIRA PEN KIT CD/UC/HS	Tier 2	PA
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HUMIRA PEN KIT PS/UV	Tier 2	PA
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<i>hydroxychloroquine sulfate tab 200 mg</i>	Tier 1	
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<i>leflunomide tab 10 mg</i>	Tier 1	
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<i>leflunomide tab 20 mg</i>	Tier 1	
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Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	Tier 1	
REMICADE INJ 100MG	Tier 2	PA
XATMEP SOL 2.5MG/ML	Tier 2	B/D
XELJANZ TAB 5MG	Tier 2	QL (60 tabs / 30 days), PA
XELJANZ TAB 10MG	Tier 2	QL (60 tabs / 30 days), PA
XELJANZ XR TAB 11MG	Tier 2	QL (30 tabs / 30 days), PA

IMMUNOGLOBULINS

BIVIGAM INJ 10%	Tier 2	PA
CARIMUNE NF INJ 12GM	Tier 2	PA
FLEBOGAMMA INJ 5GM/50ML	Tier 2	PA
FLEBOGAMMA INJ 10/100ML	Tier 2	PA
FLEBOGAMMA INJ 10/200ML	Tier 2	PA
FLEBOGAMMA INJ 20/200ML	Tier 2	PA
FLEBOGAMMA INJ 20/400ML	Tier 2	PA
FLEBOGAMMA INJ DIF 5%	Tier 2	PA
GAMASTAN S/D INJ	Tier 2	B/D
GAMMAGARD INJ 1GM/10ML	Tier 2	PA
GAMMAGARD INJ 2.5GM/25	Tier 2	PA
GAMMAGARD INJ 5GM/50ML	Tier 2	PA
GAMMAGARD INJ 10GM/100	Tier 2	PA
GAMMAGARD INJ 20GM/200	Tier 2	PA
GAMMAGARD INJ 30GM/300	Tier 2	PA
GAMMAGARD SD INJ 5GM HU	Tier 2	PA
GAMMAGARD SD INJ 10GM HU	Tier 2	PA
GAMMAKED INJ 1GM/10ML	Tier 2	PA
GAMMAKED INJ 2.5GM/25	Tier 2	PA
GAMMAKED INJ 5GM/50ML	Tier 2	PA
GAMMAKED INJ 10GM/100	Tier 2	PA
GAMMAKED INJ 20GM/200	Tier 2	PA
GAMMAPLEX INJ 5%	Tier 2	PA
GAMMAPLEX INJ 10%	Tier 2	PA
GAMUNEX-C INJ 1GM/10ML	Tier 2	PA
GAMUNEX-C INJ 2.5GM/25	Tier 2	PA
GAMUNEX-C INJ 5GM/50ML	Tier 2	PA
GAMUNEX-C INJ 10GM/100	Tier 2	PA
GAMUNEX-C INJ 20GM/200	Tier 2	PA

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

GAMUNEX-C INJ 40/400ML	Tier 2	PA
OCTAGAM INJ 1GM	Tier 2	PA
OCTAGAM INJ 2.5GM	Tier 2	PA
OCTAGAM INJ 2GM/20ML	Tier 2	PA
OCTAGAM INJ 5GM	Tier 2	PA
OCTAGAM INJ 5GM/50ML	Tier 2	PA
OCTAGAM INJ 10/100ML	Tier 2	PA
OCTAGAM INJ 10GM	Tier 2	PA
OCTAGAM INJ 20/200ML	Tier 2	PA
OCTAGAM INJ 25GM	Tier 2	PA
OCTAGAM INJ 30/300ML	Tier 2	PA
PANZYGA SOL 1GM/10ML	Tier 2	PA
PANZYGA SOL 2.5/25ML	Tier 2	PA
PANZYGA SOL 5GM/50ML	Tier 2	PA
PANZYGA SOL 10/100ML	Tier 2	PA
PANZYGA SOL 20/200ML	Tier 2	PA
PANZYGA SOL 30/300ML	Tier 2	PA
PRIVIGEN INJ 5 GRAMS	Tier 2	PA
PRIVIGEN INJ 10GRAMS	Tier 2	PA
PRIVIGEN INJ 20GRAMS	Tier 2	PA
PRIVIGEN INJ 40GRAMS	Tier 2	PA

IMMUNOMODULATORS

ACTIMMUNE INJ 2MU/0.5	Tier 2	LA, PA
ARCALYST INJ 220MG	Tier 2	PA
INTRON A INJ 10MU	Tier 2	B/D
INTRON A INJ 18MU	Tier 2	B/D
INTRON A INJ 25MU	Tier 2	B/D
INTRON A INJ 50MU	Tier 2	B/D

IMMUNOSUPPRESSANTS

<i>azathioprine tab 50 mg</i>	Tier 1	B/D
BENLYSTA INJ 120MG	Tier 2	PA
BENLYSTA INJ 200MG/ML	Tier 2	PA
BENLYSTA INJ 400MG	Tier 2	PA
<i>cyclosporine cap 25 mg</i>	Tier 1	B/D
<i>cyclosporine cap 100 mg</i>	Tier 1	B/D
<i>cyclosporine iv soln 50 mg/ml</i>	Tier 1	B/D
<i>cyclosporine modified cap 25 mg</i>	Tier 1	B/D
<i>cyclosporine modified cap 50 mg</i>	Tier 1	B/D
<i>cyclosporine modified cap 100 mg</i>	Tier 1	B/D
<i>cyclosporine modified oral soln 100 mg/ml</i>	Tier 1	B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>gengraf cap 25mg</i>	Tier 1	B/D
<i>gengraf cap 100mg</i>	Tier 1	B/D
<i>gengraf sol 100mg/ml</i>	Tier 1	B/D
<i>mycophenolate mofetil cap 250 mg</i>	Tier 1	B/D
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	Tier 2	B/D
<i>mycophenolate mofetil tab 500 mg</i>	Tier 1	B/D
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	Tier 1	B/D
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	Tier 1	B/D
NULOJIX INJ 250MG	Tier 2	B/D
PROGRAF GRA 0.2MG	Tier 2	B/D
PROGRAF GRA 1MG	Tier 2	B/D
RAPAMUNE SOL 1MG/ML	Tier 2	B/D
SANDIMMUNE SOL 100MG/ML	Tier 2	B/D
<i>sirolimus oral soln 1 mg/ml</i>	Tier 2	B/D
<i>sirolimus tab 0.5 mg</i>	Tier 1	B/D
<i>sirolimus tab 1 mg</i>	Tier 1	B/D
<i>sirolimus tab 2 mg</i>	Tier 2	B/D
<i>tacrolimus cap 0.5 mg</i>	Tier 1	B/D
<i>tacrolimus cap 1 mg</i>	Tier 1	B/D
<i>tacrolimus cap 5 mg</i>	Tier 1	B/D
ZORTRESS TAB 0.5MG	Tier 2	B/D
ZORTRESS TAB 0.25MG	Tier 2	B/D
ZORTRESS TAB 0.75MG	Tier 2	B/D
ZORTRESS TAB 1MG	Tier 2	B/D

VACCINES

ACTHIB INJ	Tier 2	
ADACEL INJ	Tier 2	
BCG VACCINE INJ	Tier 2	
BEXSERO INJ	Tier 2	
BOOSTRIX INJ	Tier 2	
DAPTACEL INJ	Tier 2	
DIP/TET PED INJ 25-5LFU	Tier 2	B/D
ENGRIX-B INJ 10/0.5ML	Tier 2	B/D
ENGRIX-B INJ 20MCG/ML	Tier 2	B/D
GARDASIL 9 INJ	Tier 2	
HAVRIX INJ 720UNIT	Tier 2	
HAVRIX INJ 1440UNIT	Tier 2	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
HIBERIX SOL 10MCG	Tier 2
IMOVAX RABIE INJ 2.5/ML	Tier 2 B/D
INFANRIX INJ	Tier 2
IPOL INJ INACTIVE	Tier 2
IXIARO INJ	Tier 2
KINRIX INJ	Tier 2
M-M-R II INJ	Tier 2
MENACTRA INJ	Tier 2
MENVEO INJ	Tier 2
PEDIARIX INJ 0.5ML	Tier 2
PEDVAX HIB INJ	Tier 2
PENTACEL INJ	Tier 2
PROQUAD INJ	Tier 2
QUADRACEL INJ	Tier 2
RABAVERT INJ	Tier 2 B/D
RECOMBIVA HB INJ 5MCG/0.5	Tier 2 B/D
RECOMBIVA HB INJ 10MCG/ML	Tier 2 B/D
RECOMBIVA-HB INJ 40MCG/ML	Tier 2 B/D
ROTARIX SUS	Tier 2
ROTATEQ SOL	Tier 2
SHINGRIX INJ 50MCG	Tier 2 QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	Tier 2 B/D
TENIVAC INJ 5-2LF	Tier 2 B/D
TRUMENBA INJ	Tier 2
TWINRIX INJ	Tier 2
TYPHIM VI INJ	Tier 2
VAQTA INJ 25/0.5ML	Tier 2
VAQTA INJ 50UNT/ML	Tier 2
VARIVAX INJ	Tier 2
YF-VAX INJ	Tier 2
ZOSTAVAX INJ	Tier 2 QL (1 vial per lifetime)

NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS

ELECTROLYTES

<i>gnp pediatri sol electrol</i>	Tier 3	DP
<i>klor-con 8 tab 8meq er</i>	Tier 1	
<i>klor-con 10 tab 10meq er</i>	Tier 1	
MAGNESIUM SU INJ 2GM/50ML	Tier 2	
MAGNESIUM SU INJ 4G/100ML	Tier 2	
MAGNESIUM SU INJ 20/500ML	Tier 2	
MAGNESIUM SU INJ 40G/1000	Tier 2	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
MAGNESIUM SU INJ 80MG/ML	Tier 2	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	Tier 2	
<i>magnesium sulfate inj 50%</i>	Tier 2	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	Tier 2	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	Tier 2	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	Tier 2	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	Tier 2	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	Tier 2	
MG SO4/D5W INJ 10MG/ML	Tier 2	
<i>oral electrolyte solution</i>	Tier 3	DP
<i>oralyte sol</i>	Tier 3	DP
<i>oralyte sol freeze</i>	Tier 3	DP
<i>ped elctrylt sol freezer</i>	Tier 3	DP
<i>ped elctrylt sol fruit</i>	Tier 3	DP
<i>ped elctrylt sol grape</i>	Tier 3	DP
<i>ped elctrylt sol unflavrd</i>	Tier 3	DP
<i>potassium chloride cap er 8 meq</i>	Tier 1	
<i>potassium chloride cap er 10 meq</i>	Tier 1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	Tier 1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	Tier 2	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	Tier 1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	Tier 1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	Tier 1	
<i>potassium chloride powder packet 20 meq</i>	Tier 1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	Tier 1	
<i>potassium chloride tab er 10 meq</i>	Tier 1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	Tier 1	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	Tier 1	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>tpn electrol inj</i>	Tier 2	B/D
IV NUTRITION		
<i>amino acid infusion 6%</i>	Tier 1	B/D
AMINOSYN II INJ 10%	Tier 2	B/D
AMINOSYN-PF INJ 7%	Tier 2	B/D
AMINOSYN-PF INJ 10%	Tier 2	B/D
<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	Tier 3	DP
CLINIMIX INJ 4.25/D5W	Tier 2	B/D
CLINIMIX INJ 4.25/D10	Tier 2	B/D
CLINIMIX INJ 4.25/D25	Tier 2	B/D
CLINIMIX INJ 5%/D15W	Tier 2	B/D
CLINIMIX INJ 5%/D20W	Tier 2	B/D
CLINIMIX INJ 5%/D25W	Tier 2	B/D
CLINOLIPID EMU 20%	Tier 2	B/D
COPPER SULF CRY	Tier 3	DP
<i>cupric chloride inj 0.4 mg/ml</i>	Tier 3	DP
FREAMINE HBC INJ 6.9%	Tier 2	B/D
FREAMINE III INJ 10%	Tier 2	B/D
<i>hepatamine sol 8%</i>	Tier 2	B/D
INTRALIPID INJ 20%	Tier 2	B/D
INTRALIPID INJ 30%	Tier 2	B/D
NEPHRAMINE INJ 5.4%	Tier 2	B/D
NUTRILIPID EMU 20%	Tier 2	B/D
PREMASOL SOL 10%	Tier 2	B/D
PROCALAMINE INJ 3%	Tier 2	B/D
PROSOL INJ 20%	Tier 2	B/D
TRAVASOL INJ 10%	Tier 2	B/D
TROPHAMINE INJ 10%	Tier 2	B/D
<i>zinc chloride inj 1 mg/ml</i>	Tier 3	DP

IV REPLACEMENT SOLUTIONS

D5W/LYTES INJ #48	Tier 2
D5W/NACL INJ 0.3%	Tier 2
D10W/NACL INJ 0.2%	Tier 2
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	Tier 1
<i>dextrose 5% in lactated ringers</i>	Tier 1
<i>dextrose 5% w/ sodium chloride 0.2%</i>	Tier 1
<i>dextrose 5% w/ sodium chloride 0.9%</i>	Tier 1
<i>dextrose 5% w/ sodium chloride 0.33%</i>	Tier 1
<i>dextrose 5% w/ sodium chloride 0.45%</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>dextrose 5% w/ sodium chloride 0.225%</i>	Tier 1
<i>dextrose 10% w/ sodium chloride 0.45%</i>	Tier 1
<i>dextrose inj 5%</i>	Tier 1
<i>dextrose inj 10%</i>	Tier 1
<i>dextrose inj 50%</i>	Tier 1
<i>dextrose inj 70%</i>	Tier 1
IONOSOL-MB INJ D5W	Tier 2
ISOLYTE-P INJ /D5W	Tier 2
ISOLYTE-S INJ	Tier 2
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	Tier 1
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	Tier 1
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	Tier 1
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.33% inj</i>	Tier 1
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	Tier 1
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	Tier 1
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	Tier 1
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	Tier 1
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	Tier 1
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	Tier 1
KCL/D5W/NACL INJ 0.3/0.9%	Tier 2
KCL/D5W/NACL INJ 0.15/0.2	Tier 2
<i>lactated ringer's solution</i>	Tier 1
NORMOSOL -M INJ /D5W	Tier 2
NORMOSOL -R INJ /D5W	Tier 2
NORMOSOL-R INJ PH 7.4	Tier 2
PLASMA-LYTE INJ -148	Tier 2
PLASMA-LYTE INJ -A	Tier 2
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	Tier 1
<i>potassium chloride 40 meq/l (0.3%) in dextrose 5% inj</i>	Tier 1
<i>potassium chloride inj 2 meq/ml</i>	Tier 1
<i>potassium chloride inj 10 meq/50ml</i>	Tier 1
<i>potassium chloride inj 10 meq/100ml</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>potassium chloride inj 20 meq/50ml</i>	Tier 1	
<i>potassium chloride inj 20 meq/100ml</i>	Tier 1	
<i>potassium chloride inj 40 meq/100ml</i>	Tier 1	
<i>sodium chloride iv soln 0.9%</i>	Tier 1	
<i>sodium chloride iv soln 0.45%</i>	Tier 1	
<i>sodium chloride iv soln 3%</i>	Tier 1	
<i>sodium chloride iv soln 5%</i>	Tier 1	

MINERALS

BEELITH TAB	Tier 3	DP
CA PHOS DIHY POW DIBASIC	Tier 3	DP
CALCET CHW BITES	Tier 3	DP
CALCET PETIT TAB 200-250	Tier 3	DP
CALCI-CHEW CHW 1250MG	Tier 3	DP
CALCI-MIX CAP 1250MG	Tier 3	DP
<i>calcitrate tab</i>	Tier 3	DP
<i>calcitrate tab 950mg</i>	Tier 3	DP
<i>calcium 600 chw +d/miner</i>	Tier 3	DP
<i>calcium 600 tab</i>	Tier 3	DP
<i>calcium 600 tab + d</i>	Tier 3	DP
<i>calcium 600 tab +d/mnrls</i>	Tier 3	DP
<i>calcium 600 tab -d</i>	Tier 3	DP
<i>calcium +d tab maximum</i>	Tier 3	DP
CALCIUM CARB POW	Tier 3	DP
CALCIUM CARB POW EX-LIGHT	Tier 3	DP
CALCIUM CARB POW HEAVY	Tier 3	DP
<i>calcium carb-vit d w/ minerals chew tab 600 mg-400 unit</i>	Tier 3	DP
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	Tier 3	DP
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	Tier 3	DP
<i>calcium carbonate tab 1500 mg (600 mg elemental ca)</i>	Tier 3	DP
<i>calcium carbonate-cholecalciferol chew tab 500 mg-100 unit</i>	Tier 3	DP
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	Tier 3	DP
<i>calcium carbonate-cholecalciferol tab 500 mg-200 unit</i>	Tier 3	DP
<i>calcium carbonate-cholecalciferol tab 500 mg-400 unit</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)		RESTRICTIONS OR LIMITS ON USE
<i>calcium carbonate-cholecalciferol tab 600 mg-200 unit</i>	Tier 3		DP
<i>calcium carbonate-cholecalciferol tab 600 mg-400 unit</i>	Tier 3		DP
<i>calcium carbonate-vitamin d tab 500 mg-200 unit</i>	Tier 3		DP
<i>calcium carbonate-vitamin d tab 500 mg-400 unit</i>	Tier 3		DP
<i>calcium carbonate-vitamin d tab 600 mg-125 unit</i>	Tier 3		DP
<i>calcium chloride inj 10%</i>	Tier 3		DP
<i>calcium citr tab w/vit d3</i>	Tier 3		DP
<i>calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)</i>	Tier 3		DP
CALCIUM GLUC POW	Tier 3		DP
CALCIUM GLUC TAB 500MG	Tier 3		DP
CALCIUM LACT POW PENTAHYD	Tier 3		DP
CALCIUM LACT TAB 648MG	Tier 3		DP
CALCIUM PHOS POW TRIBASIC	Tier 3		DP
<i>calcium plus tab 600 +d</i>	Tier 3		DP
<i>calcium soft chw mlk choc</i>	Tier 3		DP
<i>calcium tab 500/d</i>	Tier 3		DP
<i>calcium tab 600mg</i>	Tier 3		DP
<i>calcium tab vit d</i>	Tier 3		DP
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	Tier 3		DP
<i>calcium-magnesium-zinc tab 334-134-5 mg</i>	Tier 3		DP
<i>calcium/d3 tab</i>	Tier 3		DP
<i>calcium/d chw 500-400</i>	Tier 3		DP
<i>cit calc/d tab 315-250</i>	Tier 3		DP
<i>gnp ca/mg/zn tab</i>	Tier 3		DP
<i>gnp ca/vit d chw minerals</i>	Tier 3		DP
<i>gnp calcium tab 500/d</i>	Tier 3		DP
<i>gnp calcium tab 600/d</i>	Tier 3		DP
<i>gnp calcium tab cit +d3</i>	Tier 3		DP
<i>gnp magnesiu tab 250mg</i>	Tier 3		DP
<i>gnp zinc tab 50mg</i>	Tier 3		DP
MAG CARBONAT POW HEAVY	Tier 3		DP
<i>mag-g tab 500mg</i>	Tier 3		DP
MAG-TAB SR TAB 84MG	Tier 3		DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
MAGDELAY TAB 70MG	Tier 3	DP
MAGN CHLORID POW	Tier 3	DP
MAGNEBIND TAB 200	Tier 3	DP
MAGNEBIND TAB 300	Tier 3	DP
<i>magnesium gluconate tab 500 mg (27 mg elemental mg)</i>	Tier 3	DP
<i>magnesium lactate tab er 84 mg (elemental mg) (7 meq)</i>	Tier 3	DP
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	Tier 3	DP
<i>magnesium oxide tab 400 mg (241.3 mg elemental mg)</i>	Tier 3	DP
<i>magnesium oxide tab 500 mg (mg supplement)</i>	Tier 3	DP
<i>magnesium tab 250 mg</i>	Tier 3	DP
<i>magnesium tab 250mg</i>	Tier 3	DP
MAGONATE LIQ 1000/5ML	Tier 3	DP
<i>magonate tab 500mg</i>	Tier 3	DP
<i>manganese chloride inj 0.1 mg/ml</i>	Tier 3	DP
<i>oysco 500 tab 500mg</i>	Tier 3	DP
<i>oysco 500+d chw</i>	Tier 3	DP
<i>oysco 500+d tab</i>	Tier 3	DP
<i>oyst cal/d tab 500mg</i>	Tier 3	DP
<i>oyst shell/d tab 500mg</i>	Tier 3	DP
<i>oyst-cal d tab 250mg</i>	Tier 3	DP
<i>oyster shell calcium tab 500 mg</i>	Tier 3	DP
<i>oyster shell tab 500mg</i>	Tier 3	DP
PHOS-NAK POW CONCENTR	Tier 3	DP
RISACAL-D TAB	Tier 3	DP
<i>sm ca/mg/zn tab</i>	Tier 3	DP
<i>sm calcium chw</i>	Tier 3	DP
<i>sm calcium/d tab 600-400</i>	Tier 3	DP
SM CORAL CAL TAB 1000MG	Tier 3	DP
<i>sm zinc tab 50mg</i>	Tier 3	DP
SOD ACETATE POW ANHYDR	Tier 3	DP
SOD CHLORIDE GRA	Tier 3	DP
<i>sodium chloride tab 1 gm</i>	Tier 3	DP
VITAMIN D TAB 400UNIT	Tier 3	DP
<i>zinc gluconate tab 50 mg (elemental zn)</i>	Tier 3	DP
<i>zinc sulfate cap 50mg</i>	Tier 3	DP
ZINC SULFATE POW GRANULAR	Tier 3	DP

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

ZINC SULFATE POW MONOHYD	Tier 3	DP
<i>zinc sulfate tab 220 mg (50 mg zinc equivalent)</i>	Tier 3	DP
<i>zinc tab 50 mg</i>	Tier 3	DP

MISCELLANEOUS

ACACIA POW	Tier 3	DP
APPLE FLAVOR LIQ	Tier 3	DP
ASPARTAME POW	Tier 3	DP
AZ CREAM CRE	Tier 3	DP
BANANA LIQ FLAVOR	Tier 3	DP
BENZYL ALC LIQ	Tier 3	DP
BITTERNESS POW NATURAL	Tier 3	DP
BUFFER CREAM POW	Tier 3	DP
BUTTER RUM LIQ FLAVOR	Tier 3	DP
BUTYLPARABEN POW	Tier 3	DP
CARBOGEL GEL 940	Tier 3	DP
CARBOHOL GEL 940	Tier 3	DP
CETYL ALCOHO GRA	Tier 3	DP
CHERRY CON	Tier 3	DP
CHERRY SYP	Tier 3	DP
CHERRY SYP CONCENTR	Tier 3	DP
CHOCOLATE CON FLAVOR	Tier 3	DP
CINNAMON OIL FLAVOR	Tier 3	DP
CLOVE FLAVOR OIL	Tier 3	DP
CO-ENZYME WAF Q10/E	Tier 3	DP
COCOA BUTTER MIS	Tier 3	DP
<i>coenzyme q10 cap 10 mg</i>	Tier 3	DP
<i>coenzyme q10 cap 30 mg</i>	Tier 3	DP
<i>coenzyme q10 cap 30mg</i>	Tier 3	DP
<i>coenzyme q10 cap 50 mg</i>	Tier 3	DP
<i>coenzyme q10 cap 50mg</i>	Tier 3	DP
<i>coenzyme q10 cap 60 mg</i>	Tier 3	DP
<i>coenzyme q10 cap 75 mg</i>	Tier 3	DP
<i>coenzyme q10 cap 100 mg</i>	Tier 3	DP
<i>coenzyme q10 cap 100mg</i>	Tier 3	DP
<i>coenzyme q10 cap 150 mg</i>	Tier 3	DP
COENZYME Q10 CHW 60MG	Tier 3	DP
COENZYME Q10 LIQ 30MG/5ML	Tier 3	DP
COENZYME Q10 TAB 25MG	Tier 3	DP
<i>coenzyme q10 tab 60 mg</i>	Tier 3	DP

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
L-METHIONINE POW	Tier 3	DP
L-TYROSINE POW	Tier 3	DP
L-VALINE POW	Tier 3	DP
LACTOSE POW	Tier 3	DP
LACTOSE POW ANHYDROU	Tier 3	DP
LACTOSE POW HYDROUS	Tier 3	DP
LACTOSE POW MONOHYDR	Tier 3	DP
LECITHIN GRA	Tier 3	DP
LEMON FLAVOR OIL	Tier 3	DP
LIP BALM OIN BASE	Tier 3	DP
LIP BALM OIN NATURAL	Tier 3	DP
LIPOBASE CRE	Tier 3	DP
LIPOIL OIL	Tier 3	DP
LIPOVAN BASE CRE	Tier 3	DP
LOLLIBASE POW	Tier 3	DP
LOZIBASE MIS	Tier 3	DP
METHYLCELLUL GEL 1%	Tier 3	DP
METHYLCELLUL GEL 2%	Tier 3	DP
METHYLCELLUL GEL 3%	Tier 3	DP
METHYLCELLUL POW 1500CPS	Tier 3	DP
METHYLCELLUL POW 4000CPS	Tier 3	DP
METHYLPARABE POW	Tier 3	DP
MICRODERM CRE BASE	Tier 3	DP
MICROSOME CRE BASE	Tier 3	DP
NICE DISTILL LIQ WATER	Tier 3	DP
ORA-BLEND SF SUS	Tier 3	DP
ORA-BLEND SUS	Tier 3	DP
ORA-HESIVE PST BASE	Tier 3	DP
ORA-PLUS LIQ	Tier 3	DP
ORA-SWEET SF SYP	Tier 3	DP
ORA-SWEET SYP	Tier 3	DP
ORANGE CONC LIQ	Tier 3	DP
PCCA BASE CRE 7542	Tier 3	DP
PCCA MBK MIS FAT ACID	Tier 3	DP
PEG 300 LIQ	Tier 3	DP
PEG 1000 LIQ	Tier 3	DP
PEG 3350 POW	Tier 3	DP
PEG BLEND OIN	Tier 3	DP
PEPPERMINT OIL FLAVOR	Tier 3	DP
PFCB CRE	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
PHARMABASE CRE ANTIOXID	Tier 3	DP
PHARMABASE CRE COSMETIC	Tier 3	DP
PHARMABASE CRE LIGHT	Tier 3	DP
PHARMABASE CRE VAGINAL	Tier 3	DP
PHYTOBASE CRE	Tier 3	DP
PLO20 GEL FLOWABLE	Tier 3	DP
PLO LECITHIN GEL BASE	Tier 3	DP
PLO ULTRAMAX GEL	Tier 3	DP
PNA-HRT BASE CRE	Tier 3	DP
POLOX GEL 20%	Tier 3	DP
POLOX GEL 30%	Tier 3	DP
POLOXAMER POW 407	Tier 3	DP
POLY GLYCOL LIQ 1450	Tier 3	DP
POLY GLYCOL POW 8000	Tier 3	DP
POLYETHYLENE LIQ GLY 400	Tier 3	DP
POLYOXYL 40 POW STEARATE	Tier 3	DP
POT SORBATE CRY	Tier 3	DP
<i>prasterone (dhea) cap 25 mg</i>	Tier 3	DP
PROPYLENE GL LIQ	Tier 3	DP
PROPYLENE LIQ GLYCOL	Tier 3	DP
PROPYPARABEN POW	Tier 3	DP
Q-DERM CRE	Tier 3	DP
<i>q-sorb cap 30mg</i>	Tier 3	DP
<i>q-sorb cap 75mg</i>	Tier 3	DP
<i>q-sorb cap 150mg</i>	Tier 3	DP
<i>q-sorb co-q cap 100mg</i>	Tier 3	DP
RASPBERRY LIQ FLAVOR	Tier 3	DP
RDT BASE POW	Tier 3	DP
SACCHARIN POW	Tier 3	DP
SACCHARIN POW SODIUM	Tier 3	DP
SALTSTABLE CRE	Tier 3	DP
SHEA BUTTER MIS	Tier 3	DP
SIMPLE SYP	Tier 3	DP
<i>sm coq-10 cap 50mg</i>	Tier 3	DP
SOD BENZOATE POW	Tier 3	DP
SOD LAURYL POW SULFATE	Tier 3	DP
SOD SACCHARI GRA	Tier 3	DP
SORBIC ACID POW	Tier 3	DP
SORBITOL SOL 70%	Tier 3	DP
STRAWBERRY LIQ FLAVOR	Tier 3	DP

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

VITAMINS

ADULT 50+ CAP OCUVITE	Tier 3	DP
<i>animal shape chw</i>	Tier 3	DP
<i>animal shape chw complete</i>	Tier 3	DP
ANIMAL SHAPE CHW IRON	Tier 3	DP
ANTIOXIDANT CAP	Tier 3	DP
<i>antioxidant tab</i>	Tier 3	DP
<i>antioxidant tab vitamins</i>	Tier 3	DP
APATATE FORT LIQ	Tier 3	DP
APATATE LIQ	Tier 3	DP
AQUADEKS CHW	Tier 3	DP
<i>aquadeks dro</i>	Tier 3	DP
AQUASOL A INJ 50000/ML	Tier 3	DP
AQUASOL E DRO 15/0.3ML	Tier 3	DP
<i>aqueous e dro 15/0.3ml</i>	Tier 3	DP
<i>ascorbic acid cap er 500 mg</i>	Tier 3	DP
<i>ascorbic acid chew tab 250 mg</i>	Tier 3	DP
<i>ascorbic acid chew tab 500 mg</i>	Tier 3	DP
<i>ascorbic acid tab 250 mg</i>	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ascorbic acid tab 500 mg</i>	Tier 3	DP
<i>ascorbic acid tab 1000 mg</i>	Tier 3	DP
<i>B-12 DOTS TAB 500MCG</i>	Tier 3	DP
<i>b-complex vitamin cap</i>	Tier 3	DP
<i>b-complex vitamin tab</i>	Tier 3	DP
<i>b-complex w/ c & calcium tab</i>	Tier 3	DP
<i>b-complex w/ c tab</i>	Tier 3	DP
<i>balanc b-50 tab</i>	Tier 3	DP
<i>balanc b-100 tab 100mg</i>	Tier 3	DP
<i>bee zee tab</i>	Tier 3	DP
<i>biotin cap 5 mg</i>	Tier 3	DP
<i>biotin tab 5 mg</i>	Tier 3	DP
<i>biotin tab 300 mcg</i>	Tier 3	DP
<i>brewers yeast tab</i>	Tier 3	DP
<i>c 250 tab</i>	Tier 3	DP
<i>c-500 chw 500mg</i>	Tier 3	DP
<i>c-1000/rh tab 1000mg</i>	Tier 3	DP
<i>c/rosehip tr tab 1000mg</i>	Tier 3	DP
<i>ca citrate + tab</i>	Tier 3	DP
<i>cal-mag-zinc tab +d3</i>	Tier 3	DP
<i>calciferol dro 8000/ml</i>	Tier 3	DP
<i>calcitriol cap 0.5 mcg</i>	Tier 1	B/D
<i>calcitriol cap 0.25 mcg</i>	Tier 1	B/D
<i>calcitriol inj 1 mcg/ml</i>	Tier 1	B/D
<i>calcitriol oral soln 1 mcg/ml</i>	Tier 1	B/D
<i>centamin liq</i>	Tier 3	DP
<i>centavite liq</i>	Tier 3	DP
<i>century tab</i>	Tier 3	DP
<i>century tab mature</i>	Tier 3	DP
<i>cerovite jr chw</i>	Tier 3	DP
<i>cerovite tab advanced</i>	Tier 3	DP
<i>cerovite tab senior</i>	Tier 3	DP
<i>CERTAVITE TAB SENIOR</i>	Tier 3	DP
<i>certavite/ tab antioxid</i>	Tier 3	DP
<i>chewabl vite chw childrns</i>	Tier 3	DP
<i>chewable c chw 500mg</i>	Tier 3	DP
<i>child chew chw iron</i>	Tier 3	DP
<i>child chew chw vitamins</i>	Tier 3	DP
<i>child chew/ chw extra c</i>	Tier 3	DP
<i>childrens chw /iron</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
CHILDRENS CHW COMPLETE	Tier 3	DP
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	Tier 3	DP
<i>cholecalciferol cap 10 mcg (400 unit)</i>	Tier 3	DP
<i>cholecalciferol cap 25 mcg (1000 unit)</i>	Tier 3	DP
<i>cholecalciferol cap 50 mcg (2000 unit)</i>	Tier 3	DP
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	Tier 3	DP
<i>cholecalciferol cap 250 mcg (10000 unit)</i>	Tier 3	DP
<i>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</i>	Tier 3	DP
<i>cholecalciferol tab 10 mcg (400 unit)</i>	Tier 3	DP
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	Tier 3	DP
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	Tier 3	DP
CL PRENATAL TAB 28-0.8MG	Tier 3	DP
<i>cod liver cap</i>	Tier 3	DP
<i>cod liver oil cap</i>	Tier 3	DP
COD LIVER OIL OIL	Tier 3	DP
<i>complete tab</i>	Tier 3	DP
<i>complete tab</i>	Tier 3	DP
<i>complete tab senior</i>	Tier 3	DP
<i>cyanocobalamin inj 1000 mcg/ml</i>	Tier 3	DP
<i>cyanocobalamin tab 100 mcg</i>	Tier 3	DP
<i>cyanocobalamin tab 250 mcg</i>	Tier 3	DP
<i>cyanocobalamin tab 500 mcg</i>	Tier 3	DP
<i>cyanocobalamin tab 1000 mcg</i>	Tier 3	DP
<i>cyanocobalamin tab er 1000 mcg</i>	Tier 3	DP
<i>cyanocobalamin tab er 2000 mcg</i>	Tier 3	DP
<i>d3 cap 1000unit</i>	Tier 3	DP
<i>d3 super str cap 2000unit</i>	Tier 3	DP
<i>d 400 tab 400unit</i>	Tier 3	DP
<i>daily multi tab</i>	Tier 3	DP
<i>daily vit tab</i>	Tier 3	DP
<i>daily-vite tab</i>	Tier 3	DP
<i>daily-vite/ tab iron</i>	Tier 3	DP
DIALYVIT 800 TAB ZINC 15	Tier 3	DP
<i>dialyvite d cap 5000unit</i>	Tier 3	DP
<i>dialyvite tab 800</i>	Tier 3	DP
<i>dialyvite tab 800/d</i>	Tier 3	DP
DIALYVITE TAB 800/ZINC	Tier 3	DP
<i>e-400 cap 400unit</i>	Tier 3	DP
<i>ecee plus tab</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)		RESTRICTIONS OR LIMITS ON USE
ELDERTONIC LIQ	Tier 3		DP
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	Tier 3		DP
<i>ergocalciferol soln 200 mcg/ml (8000 unit/ml)</i>	Tier 3		DP
<i>essentl one tab daily</i>	Tier 3		DP
<i>ester-c tab 500mg</i>	Tier 3		DP
EZFE FORTE CAP	Tier 3		DP
FOLGARD TAB	Tier 3		DP
<i>folic acid inj 5 mg/ml</i>	Tier 3		DP
<i>folic acid tab 1 mg</i>	Tier 3		DP
<i>folic acid tab 400 mcg</i>	Tier 3		DP
<i>folic acid tab 400mcg</i>	Tier 3		DP
<i>folic acid tab 800 mcg</i>	Tier 3		DP
FOSFREE TAB	Tier 3		DP
<i>geriaton liq</i>	Tier 3		DP
GERIATRIC LIQ VITAMIN	Tier 3		DP
<i>gnp b-50 tab balanced</i>	Tier 3		DP
<i>gnp b-100 tab</i>	Tier 3		DP
<i>gnp century tab</i>	Tier 3		DP
<i>gnp century tab cardio</i>	Tier 3		DP
GNP CENTURY TAB ENERGY	Tier 3		DP
<i>gnp century tab mature</i>	Tier 3		DP
<i>gnp century tab senior</i>	Tier 3		DP
<i>gnp century tab ultimate</i>	Tier 3		DP
<i>gnp healthy tab eyes</i>	Tier 3		DP
<i>gnp little chw ones</i>	Tier 3		DP
<i>gnp niacin tab 250mg tr</i>	Tier 3		DP
<i>gnp one dail tab maximum</i>	Tier 3		DP
<i>gnp opti-vit tab</i>	Tier 3		DP
GNP PRENATAL TAB 28-0.8MG	Tier 3		DP
<i>gnp vit b1 tab 100mg</i>	Tier 3		DP
<i>gnp vit b-6 tab 100mg</i>	Tier 3		DP
<i>gnp vit b-12 tab 500mcg</i>	Tier 3		DP
<i>gnp vit b-12 tab 1000 cr</i>	Tier 3		DP
<i>gnp vit c chw 500mg</i>	Tier 3		DP
<i>gnp vit c loz 60mg</i>	Tier 3		DP
<i>gnp vit c tab 250mg</i>	Tier 3		DP
<i>gnp vit c tab 1000mg</i>	Tier 3		DP
<i>gnp vit d tab 1000unit</i>	Tier 3		DP
<i>gnp vit e cap 200unit</i>	Tier 3		DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL RESTRICTIONS OR COST YOU LIMITS ON USE (TIER LEVEL)	
<i>gnp vit e cap 400unit</i>	Tier 3	DP
<i>gnp vit e cap 1000unit</i>	Tier 3	DP
<i>gnp zoochews chw gummies</i>	Tier 3	DP
<i>healthy eyes cap supervis</i>	Tier 3	DP
<i>healthy eyes tab</i>	Tier 3	DP
<i>hm niacin tab 250mg</i>	Tier 3	DP
<i>hm vit b1 tab 100mg</i>	Tier 3	DP
<i>hm vitamin e cap 200unit</i>	Tier 3	DP
<i>hm vitamin e cap 1000unit</i>	Tier 3	DP
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	Tier 3	DP
<i>i-vite prote tab</i>	Tier 3	DP
<i>i-vite tab</i>	Tier 3	DP
ICAPS AREDS TAB FORMULA	Tier 3	DP
<i>icaps cap</i>	Tier 3	DP
<i>icaps lutein cap /omega-3</i>	Tier 3	DP
ICAPS LUTEIN TAB ZEAXANTH	Tier 3	DP
<i>icaps mv tab</i>	Tier 3	DP
ICAPS PLUS TAB	Tier 3	DP
INFUVITE INJ	Tier 3	DP
INFUVITE INJ ADULT	Tier 3	DP
INFUVITE INJ PEDIATRI	Tier 3	DP
M-NATAL PLUS TAB	Tier 2	
M.V.I PEDIAT INJ	Tier 3	DP
M.V.I. ADULT INJ	Tier 3	DP
<i>maximum d3 cap 325mcg</i>	Tier 3	DP
<i>mega multi tab men</i>	Tier 3	DP
<i>mega multi tab women</i>	Tier 3	DP
MEGA MULTIVI TAB MEN	Tier 3	DP
MEGA MULTIVI TAB WOMEN	Tier 3	DP
MEPHYTON TAB 5MG	Tier 3	DP
<i>mult vitamin tab essent</i>	Tier 3	DP
<i>mult vitamin tab mens</i>	Tier 3	DP
<i>mult vitamin tab womens</i>	Tier 3	DP
<i>multi-delyn liq</i>	Tier 3	DP
MULTI-DELYN LIQ /IRON	Tier 3	DP
<i>multi-vitam tab</i>	Tier 3	DP
<i>multilex tab</i>	Tier 3	DP
<i>multilex-t&m tab</i>	Tier 3	DP
<i>multiple vitamins w/ minerals tab</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>nail-ex tab 2.5mg</i>	Tier 3	DP
NASCOBAL SPR 500MCG	Tier 3	DP
NEPHRO-VITE TAB	Tier 3	DP
NEPHRONEX LIQ 0.9/5ML	Tier 3	DP
<i>niacin cap 500mg</i>	Tier 3	DP
<i>niacin cap er 250 mg</i>	Tier 3	DP
<i>niacin cap er 500 mg</i>	Tier 3	DP
NIACIN POW	Tier 3	DP
<i>niacin tab 100 mg</i>	Tier 3	DP
<i>niacin tab 500 mg</i>	Tier 3	DP
<i>niacin tab er 500 mg</i>	Tier 3	DP
<i>niacin tab er 750 mg</i>	Tier 3	DP
NIACIN TR TAB 1000MG	Tier 3	DP
NIACINAMIDE POW	Tier 3	DP
<i>niacinamide tab 500 mg</i>	Tier 3	DP
<i>nutr-e-sol liq 400/15ml</i>	Tier 3	DP
OCUVITE CAP ADULT	Tier 3	DP
<i>ocuvite tab lutein</i>	Tier 3	DP
<i>ocuvite xtra tab</i>	Tier 3	DP
<i>once daily tab</i>	Tier 3	DP
<i>once daily tab iron</i>	Tier 3	DP
ONCOVITE TAB	Tier 3	DP
<i>one daily tab</i>	Tier 3	DP
<i>one daily tab maximum</i>	Tier 3	DP
<i>one daily tab men 50+</i>	Tier 3	DP
<i>one daily tab mens</i>	Tier 3	DP
<i>one daily tab mens 50+</i>	Tier 3	DP
<i>one daily tab pls iron</i>	Tier 3	DP
<i>one daily tab wom 50+</i>	Tier 3	DP
<i>one daily tab womens</i>	Tier 3	DP
<i>paricalcitol cap 1 mcg</i>	Tier 1	B/D
<i>paricalcitol cap 2 mcg</i>	Tier 1	B/D
<i>paricalcitol cap 4 mcg</i>	Tier 1	B/D
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	Tier 3	DP
<i>phytonadione inj 10 mg/ml</i>	Tier 3	DP
PNV FOLIC AC TAB + IRON	Tier 2	
<i>poly vitamin chw</i>	Tier 3	DP
POLY-VI-SOL DRO /IRON	Tier 3	DP
<i>polyvitamin chw /iron</i>	Tier 3	DP
PRENATAL PLUS	Tier 2	

PA - Prior Authorization
under Medicare B or D
DP - The drug is not a Part D drug.

QL - Quantity Limits
LA - Limited Access

ST - Step Therapy
NDS - Non-Extended Days Supply
B/D - Covered

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
PRENATAL TAB	Tier 3	DP
PRENATAL TAB 27-0.8MG	Tier 3	DP
PRENATAL TAB 27-1MG	Tier 2	
PRENATAL TAB 28-0.8MG	Tier 3	DP
PRENATAL TAB LOW IRON	Tier 3	DP
PRENATAL TAB PLUS	Tier 2	
PRENATAL VIT TAB LOW IRON	Tier 2	
PRESERVISION CAP AREDS	Tier 3	DP
PRESERVISION CAP AREDS 2	Tier 3	DP
PRESERVISION CAP LUTEIN	Tier 3	DP
PRESERVISION TAB AREDS	Tier 3	DP
PROFE FORTE CAP 155-1MG	Tier 3	DP
<i>prosight tab</i>	Tier 3	DP
<i>pyridoxine hcl inj 100 mg/ml</i>	Tier 3	DP
<i>pyridoxine hcl tab 25 mg</i>	Tier 3	DP
<i>pyridoxine hcl tab 50 mg</i>	Tier 3	DP
<i>pyridoxine hcl tab 100 mg</i>	Tier 3	DP
<i>qc therin-m tab</i>	Tier 3	DP
RAYALDEE CAP 30MCG	Tier 2	
<i>rena-vite tab</i>	Tier 3	DP
<i>sentry tab</i>	Tier 3	DP
<i>sentry tab senior</i>	Tier 3	DP
<i>slo-niacin tab 250mg cr</i>	Tier 3	DP
SLO-NIACIN TAB 500MG CR	Tier 3	DP
SLO-NIACIN TAB 750MG CR	Tier 3	DP
<i>sm animal chw shapes</i>	Tier 3	DP
<i>sm balanced tab b-50</i>	Tier 3	DP
<i>sm balanced tab b-100</i>	Tier 3	DP
<i>sm complete tab</i>	Tier 3	DP
<i>sm complete tab adv form</i>	Tier 3	DP
<i>sm complete tab senior</i>	Tier 3	DP
<i>sm folic acd tab 400mcg</i>	Tier 3	DP
<i>sm multiple tab vit/iron</i>	Tier 3	DP
<i>sm multiple tab vitamins</i>	Tier 3	DP
<i>sm opti-vita tab</i>	Tier 3	DP
SM PRENATAL TAB VITAMINS	Tier 3	DP
<i>sm vit b-6 tab 100mg</i>	Tier 3	DP
<i>sm vit b-12 tab 100mcg</i>	Tier 3	DP
<i>sm vit b-12 tab 500mcg</i>	Tier 3	DP
<i>sm vit b-12 tab 1000 tr</i>	Tier 3	DP

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>vitamin a cap 8000unit</i>	Tier 3	DP
<i>vitamin a cap 10000 unit</i>	Tier 3	DP
<i>vitamin b12 tab 1000mcg</i>	Tier 3	DP
<i>vitamin c tab 500mg</i>	Tier 3	DP
<i>vitamin c tab 500mg tr</i>	Tier 3	DP
<i>vitamin d3 dro 400unit</i>	Tier 3	DP
<i>vitamin d3 tab 1000unit</i>	Tier 3	DP
<i>vitamin d3 tab 50000unt</i>	Tier 3	DP
<i>vitamin d tab 1000unit</i>	Tier 3	DP
<i>vitamin d-3 tab 5000unit</i>	Tier 3	DP
<i>vitamin e cap 100 unit</i>	Tier 3	DP
<i>vitamin e cap 200 unit</i>	Tier 3	DP
<i>vitamin e cap 400 unit</i>	Tier 3	DP
<i>vitamin e cap 1000 unit</i>	Tier 3	DP
<i>vite/iron chw children</i>	Tier 3	DP
<i>womens one tab daily</i>	Tier 3	DP
<i>zoo friends chw</i>	Tier 3	DP
ZOO FRIENDS CHW COMPLETE	Tier 3	DP
<i>zoo friends chw extra c</i>	Tier 3	DP
<i>zoo friends chw gummies</i>	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>	Tier 1
BLEPHAMIDE OIN S.O.P.	Tier 2
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	Tier 1
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	Tier 1
<i>neomycin-polymyxin-hc ophth susp</i>	Tier 1
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	Tier 1
TOBRADEX OIN 0.3-0.1%	Tier 2
TOBRADEX ST SUS 0.3-0.05	Tier 2
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	Tier 1
ZYLET SUS 0.5-0.3%	Tier 2

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

AZASITE SOL 1%	Tier 2
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>bacitracin ophth oint 500 unit/gm</i>	Tier 1
<i>bacitracin-polymyxin b ophth oint</i>	Tier 1
BESIVANCE SUS 0.6%	Tier 2
CILOXAN OIN 0.3% OP	Tier 2
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	Tier 1
<i>erythromycin ophth oint 5 mg/gm</i>	Tier 1
<i>gatifloxacin ophth soln 0.5%</i>	Tier 1
<i>gentak oin 0.3% op</i>	Tier 1
<i>gentamicin sulfate ophth soln 0.3%</i>	Tier 1
MOXEZA SOL 0.5%	Tier 2
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	Tier 1
NATACYN SUS 5% OP	Tier 2
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	Tier 1
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	Tier 1
<i>ofloxacin ophth soln 0.3%</i>	Tier 1
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	Tier 1
<i>sulfacetamide sodium ophth oint 10%</i>	Tier 1
<i>sulfacetamide sodium ophth soln 10%</i>	Tier 1
<i>tobramycin ophth soln 0.3%</i>	Tier 1
<i>trifluridine ophth soln 1%</i>	Tier 1
ZIRGAN GEL 0.15%	Tier 2

ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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LOTEMAX OIN 0.5%	Tier 2
LOTEMAX SUS 0.5%	Tier 2
<i>loteprednol etabonate ophth susp 0.5%</i>	Tier 1
PRED SOD PHO SOL 1% OP	Tier 2
<i>prednisolone acetate ophth susp 1%</i>	Tier 1
PROLENSA SOL 0.07%	Tier 2

ANTIALLERGICS - DRUGS TO TREAT ALLERGIES

<i>allergy eye dro</i>	Tier 3	DP
<i>allergy eye dro op</i>	Tier 3	DP
<i>azelastine hcl ophth soln 0.05%</i>	Tier 1	
BEPREVE DRO 1.5%	Tier 2	
<i>cromolyn sodium ophth soln 4%</i>	Tier 1	
<i>eye allergy sol relief</i>	Tier 3	DP
LASTACFT SOL 0.25%	Tier 2	
NAPHCON-A SOL OP	Tier 3	DP
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	Tier 1	
OPCON-A SOL OP	Tier 3	DP
PAZEO DRO 0.7%	Tier 2	
<i>visine-a sol op</i>	Tier 3	DP

ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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SIMBRINZA SUS 1-0.2%	Tier 2	
<i>timolol maleate ophth gel forming soln 0.5%</i>	Tier 1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	Tier 1	
<i>timolol maleate ophth soln 0.5%</i>	Tier 1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	Tier 1	
<i>timolol maleate ophth soln 0.25%</i>	Tier 1	
TRAVATAN Z DRO 0.004%	Tier 2	

MISCELLANEOUS

ATROPINE SUL SOL 1% OP	Tier 2	
CYSTARAN SOL 0.44%	Tier 2	LA, PA
<i>proparacaine hcl ophth soln 0.5%</i>	Tier 1	
RESTASIS EMU 0.05%	Tier 2	QL (60 single use vials / 30 days)
RESTASIS MUL EMU 0.05%	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	Tier 2	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	Tier 2	QL (1 inhaler / 30 days)
COMBIVENT AER 20-100	Tier 2	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	Tier 1	B/D
TRELEGY AER ELLIPTA	Tier 2	QL (60 blisters / 30 days)

ANTICHOLINERGICS - DRUGS TO TREAT COPD

ATROVENT HFA AER 17MCG	Tier 2	QL (2 inhalers / 30 days)
INCRUSE ELPT INH 62.5MCG	Tier 2	QL (30 blisters / 30 days)
<i>ipratropium bromide inhal soln 0.02%</i>	Tier 1	B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	Tier 1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	Tier 1	

ANTI-HISTAMINES - DRUGS TO TREAT ALLERGIES

<i>all day allg chw 10mg</i>	Tier 3	DP
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Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>all day allg sol 1mg/ml</i>	Tier 3	DP
<i>all day allg sol 5mg/5ml</i>	Tier 3	DP
<i>all day allg tab 10mg</i>	Tier 3	DP
<i>aller-chlor tab 4mg</i>	Tier 3	DP
<i>aller-ease tab 60mg</i>	Tier 3	DP
<i>aller-ease tab 180mg</i>	Tier 3	DP
<i>aller-tec tab 10mg</i>	Tier 3	DP
<i>allerclear tab 10mg</i>	Tier 3	DP
<i>allergy cap 25mg</i>	Tier 3	DP
<i>allergy chld liq 12.5/5ml</i>	Tier 3	DP
<i>allergy comp sol 1mg/ml</i>	Tier 3	DP
<i>allergy liq 12.5/5ml</i>	Tier 3	DP
<i>allergy med tab 25mg</i>	Tier 3	DP
<i>allergy relf cap 25mg</i>	Tier 3	DP
<i>allergy relf liq 12.5/5ml</i>	Tier 3	DP
<i>allergy relf tab 1.34mg</i>	Tier 3	DP
<i>allergy relf tab 10mg</i>	Tier 3	DP
<i>allergy relf tab 25mg</i>	Tier 3	DP
<i>allergy tab 4mg</i>	Tier 3	DP
<i>allergy tab 10mg</i>	Tier 3	DP
<i>allergy tab 25mg</i>	Tier 3	DP
<i>allergy-time tab 4mg</i>	Tier 3	DP
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	Tier 1	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	Tier 1	
<i>banophen cap 25mg</i>	Tier 3	DP
<i>banophen cap 50mg</i>	Tier 3	DP
<i>banophen liq 12.5/5ml</i>	Tier 3	DP
<i>banophen tab 25mg</i>	Tier 3	DP
<i>cetirizine hcl chew tab 5 mg</i>	Tier 3	DP
<i>cetirizine hcl chew tab 10 mg</i>	Tier 3	DP
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	Tier 1	
<i>cetirizine hcl tab 5 mg</i>	Tier 3	DP
<i>cetirizine hcl tab 10 mg</i>	Tier 3	DP
<i>cetirizine sol 1mg/ml</i>	Tier 3	DP
<i>cetirizine sol 5mg/5ml</i>	Tier 3	DP
<i>chld allergy liq 12.5/5ml</i>	Tier 3	DP
<i>chlor-phenir tab 4mg</i>	Tier 3	DP
<i>comp allergy cap 25mg</i>	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	Tier 2	PA; PA if 70 years and older
<i>cyproheptadine hcl tab 4 mg</i>	Tier 2	PA; PA if 70 years and older
<i>dayhist alrg tab 12 hour</i>	Tier 3	DP
<i>diphenhist cap 25mg</i>	Tier 3	DP
<i>diphenhist liq 12.5/5ml</i>	Tier 3	DP
<i>diphenhist tab 25mg</i>	Tier 3	DP
<i>diphenhydramine hcl cap 25 mg</i>	Tier 3	DP
<i>diphenhydramine hcl cap 50 mg</i>	Tier 3	DP
<i>diphenhydramine hcl inj 50 mg/ml</i>	Tier 1	
<i>diphenhydramine hcl tab 25 mg</i>	Tier 3	DP
<i>ed chlorped syp jr</i>	Tier 3	DP
<i>fexofenadine hcl tab 60 mg</i>	Tier 3	DP
<i>fexofenadine hcl tab 180 mg</i>	Tier 3	DP
<i>fexofenadine tab 60mg</i>	Tier 3	DP
<i>fexofenadine tab 180mg</i>	Tier 3	DP
<i>gnp all day tab allergy</i>	Tier 3	DP
<i>gnp allergy cap 25mg</i>	Tier 3	DP
<i>gnp allergy tab 4mg</i>	Tier 3	DP
<i>gnp allergy tab 25mg</i>	Tier 3	DP
<i>gnp allergy tab 180mg</i>	Tier 3	DP
<i>gnp dayhist tab 1.34mg</i>	Tier 3	DP
<i>hm allergy tab 4mg</i>	Tier 3	DP
<i>hm allergy tab 25mg</i>	Tier 3	DP
<i>hydroxyzine hcl im soln 25 mg/ml</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine hcl im soln 50 mg/ml</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine hcl tab 10 mg</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine hcl tab 25 mg</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine hcl tab 50 mg</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 25 mg</i>	Tier 2	PA; PA if 70 years and older
<i>hydroxyzine pamoate cap 50 mg</i>	Tier 2	PA; PA if 70 years and older

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Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	Tier 1	
<i>levocetirizine dihydrochloride tab 5 mg</i>	Tier 1	
<i>loratadine sol 5mg/5ml</i>	Tier 3	DP
<i>loratadine syp 5mg/5ml</i>	Tier 3	DP
<i>loratadine tab 10 mg</i>	Tier 3	DP
<i>loratadine tab 10mg</i>	Tier 3	DP
<i>medi-phedryl cap 25mg</i>	Tier 3	DP
<i>mucinex allr tab 180mg</i>	Tier 3	DP
<i>pharbecchlor tab 4mg</i>	Tier 3	DP
<i>pharbedryl cap 25mg</i>	Tier 3	DP
<i>pharbedryl cap 50mg</i>	Tier 3	DP
<i>qc allergy tab 10mg</i>	Tier 3	DP
<i>sb allergy tab 10mg</i>	Tier 3	DP
<i>sb allergy tab 25mg med</i>	Tier 3	DP
<i>siladryl alr liq 12.5/5ml</i>	Tier 3	DP
<i>sm all day tab allergy</i>	Tier 3	DP
<i>sm allergy tab 4mg</i>	Tier 3	DP
<i>sm allergy tab 25mg rlf</i>	Tier 3	DP
<i>sm loratadin tab 10mg</i>	Tier 3	DP

BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	Tier 1	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	Tier 1	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	Tier 1	B/D
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 1	B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	Tier 1	B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 1	B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	Tier 1	
<i>albuterol sulfate tab 2 mg</i>	Tier 1	
<i>albuterol sulfate tab 4 mg</i>	Tier 1	
<i>albuterol sulfate tab er 12hr 4 mg</i>	Tier 1	
<i>albuterol sulfate tab er 12hr 8 mg</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	Tier 1	B/D
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	Tier 1	B/D
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	Tier 1	B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	Tier 1	B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	Tier 1	QL (2 inhalers / 30 days)
SEREVENT DIS AER 50MCG	Tier 2	QL (60 inhalations / 30 days)
<i>terbutaline sulfate tab 2.5 mg</i>	Tier 1	
<i>terbutaline sulfate tab 5 mg</i>	Tier 1	
VENTOLIN HFA AER	Tier 2	QL (2 inhalers / 30 days)

COUGH AND COLD

AERCHMBR PLS MIS FLOW-VU	Tier 3	DP
AERCHMBR PLS MIS LRG MASK	Tier 3	DP
AERCHMBR PLS MIS MED MASK	Tier 3	DP
AERCHMBR PLS MIS SM MASK	Tier 3	DP
AERCHMBR Z- MIS STAT PLS	Tier 3	DP
AEROCHAMBER MIS CHAMBER	Tier 3	DP
AEROCHAMBER MIS FLOSIGNA	Tier 3	DP
AEROCHAMBER MIS MV	Tier 3	DP
AEROCHAMBER MIS PLUS	Tier 3	DP
AEROVENT MIS PLUS	Tier 3	DP
<i>aller/conges tab 10-240mg</i>	Tier 3	DP
<i>allergy d tab 5-120mg</i>	Tier 3	DP
<i>allergy rel/ tab deconges</i>	Tier 3	DP
<i>allergy relf tab /nsl dec</i>	Tier 3	DP
<i>allergy relf tab d-24</i>	Tier 3	DP
<i>allergy-d tab 5-120mg</i>	Tier 3	DP
<i>allergy/cong tab 5-120mg</i>	Tier 3	DP
<i>allgy comp-d tab 5-120mg</i>	Tier 3	DP
<i>ambi 10peh/ tab 400gfn</i>	Tier 3	DP
<i>ambi 40pse/ tab 400gfn</i>	Tier 3	DP
ARIAL MIS CHAMBER	Tier 3	DP
<i>benzonatate cap 100 mg</i>	Tier 3	DP
<i>benzonatate cap 200 mg</i>	Tier 3	DP
BREATHERITE MIS	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
BREATHERITE MIS LG MASK	Tier 3	DP
BREATHERITE MIS MED MASK	Tier 3	DP
BREATHERITE MIS SM MASK	Tier 3	DP
BREATHERITE MIS SPACER	Tier 3	DP
BREATHERITE MIS W/MASK	Tier 3	DP
<i>bromfed dm syp</i>	Tier 3	DP
CAPCOF SYP 5-2-10MG	Tier 3	DP
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	Tier 3	DP
<i>cheratussin syp ac</i>	Tier 3	DP
<i>child silfed liq 15mg/5ml</i>	Tier 3	DP
CODAR AR LIQ 2-8/5ML	Tier 3	DP
<i>cold/allergy elx children</i>	Tier 3	DP
COMPACT SPAC MIS CHAMBER	Tier 3	DP
COMPACT SPAC MIS LG MASK	Tier 3	DP
COMPACT SPAC MIS MD MASK	Tier 3	DP
COMPACT SPAC MIS SM MASK	Tier 3	DP
<i>cough cont liq dm max</i>	Tier 3	DP
<i>cough dm sus 30mg/5ml</i>	Tier 3	DP
<i>cough syp 100/5ml</i>	Tier 3	DP
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	Tier 3	DP
<i>cvs cough dm sus 30mg/5ml</i>	Tier 3	DP
<i>decongestant tab 120mg er</i>	Tier 3	DP
DELSYM SUS 30MG/5ML	Tier 3	DP
<i>dextromethorphan polistirex extended release susp 30 mg/5ml</i>	Tier 3	DP
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	Tier 3	DP
<i>diabetic tus liq 100/5ml</i>	Tier 3	DP
<i>diabetic tus liq dm</i>	Tier 3	DP
<i>diabetic tus liq max st</i>	Tier 3	DP
E-Z SPACER MIS	Tier 3	DP
E-Z SPACER MIS BODY GRD	Tier 3	DP
EASIVENT MIS	Tier 3	DP
EASIVENT MIS MASK LG	Tier 3	DP
EASIVENT MIS MASK MED	Tier 3	DP
EASIVENT MIS MASK SM	Tier 3	DP
<i>eq cough dm sus 30mg/5ml</i>	Tier 3	DP
<i>extra action syp 100-10/5</i>	Tier 3	DP
FLEXICHAMBER MIS	Tier 3	DP

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Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>genaphed tab 30mg</i>	Tier 3	DP
<i>gnp cough dm sus 30mg/5ml</i>	Tier 3	DP
<i>gnp suphedrn liq 15mg/5ml</i>	Tier 3	DP
<i>gnp tussin liq dm</i>	Tier 3	DP
<i>gnp tussin liq dm cough</i>	Tier 3	DP
<i>gnp tussin liq dm max</i>	Tier 3	DP
<i>gnp tussin syp cf</i>	Tier 3	DP
<i>guaiatuss ac syp 100-10/5</i>	Tier 3	DP
<i>guaifenesin liquid 100 mg/5ml</i>	Tier 3	DP
<i>guaifenesin syp 100-10/5</i>	Tier 3	DP
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	Tier 3	DP
<i>hm cough dm sus 30mg/5ml</i>	Tier 3	DP
<i>hm tussin liq adlt dm</i>	Tier 3	DP
HOLD CHAMBER MIS ADLT LG	Tier 3	DP
HOLD CHAMBER MIS MEDIUM	Tier 3	DP
HOLD CHAMBER MIS SMALL	Tier 3	DP
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	Tier 3	DP
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	Tier 3	DP
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	Tier 3	DP
<i>hydromet syp 5-1.5/5</i>	Tier 3	DP
INSPIRACHAMB MIS LARGE	Tier 3	DP
INSPIRACHAMB MIS MEDIUM	Tier 3	DP
INSPIRACHAMB MIS MOUTHPC	Tier 3	DP
INSPIRACHAMB MIS SMALL	Tier 3	DP
INSPIREASE MIS DD SYST	Tier 3	DP
LITEAIRE MIS	Tier 3	DP
LOHIST-DM SYP 5-2-10MG	Tier 3	DP
<i>lorata-dine tab d 24hr</i>	Tier 3	DP
<i>loratadine d tab 5-120mg</i>	Tier 3	DP
<i>loratadine-d tab 5-120mg</i>	Tier 3	DP
<i>loratadine-d tab 10-240mg</i>	Tier 3	DP
LORTUSS EX LIQ	Tier 3	DP
<i>m-clear wc liq 100-6.3</i>	Tier 3	DP
MAR-COF CG LIQ 225-7.5	Tier 3	DP
<i>medi-tussin syp dm</i>	Tier 3	DP
MICROCHAMBER MIS	Tier 3	DP
MICROSPACER MIS	Tier 3	DP
<i>mucinex chld liq 100/5ml</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)	
<i>mucus relief liq 100/5ml</i>	Tier 3	DP
<i>mucus relief liq 400/20ml</i>	Tier 3	DP
<i>nasal decong tab 10mg</i>	Tier 3	DP
<i>nasal decong tab 30mg</i>	Tier 3	DP
<i>nasal decong tab 120mg er</i>	Tier 3	DP
NASALCROM SPR 5.2/ACT	Tier 3	DP
NINJACOF-XG LIQ 200-8/5	Tier 3	DP
OPTICHAMBER MIS ADV LRG	Tier 3	DP
OPTICHAMBER MIS ADV MED	Tier 3	DP
OPTICHAMBER MIS ADV SM	Tier 3	DP
OPTICHAMBER MIS DIA LG	Tier 3	DP
OPTICHAMBER MIS DIA MD	Tier 3	DP
OPTICHAMBER MIS DIA SM	Tier 3	DP
OPTICHAMBER MIS DIAMOND	Tier 3	DP
OPTICHAMBER MIS FACE MAS	Tier 3	DP
OPTIHALER MIS	Tier 3	DP
<i>10peh/400gfn tab /20dm</i>	Tier 3	DP
POCKET CHAMB MIS	Tier 3	DP
POCKET SPACE MIS	Tier 3	DP
POLY-TUSSIN LIQ 10-4-10	Tier 3	DP
PRO-RED AC SYP 5-1-9/5	Tier 3	DP
<i>prometh vc/ syp codeine</i>	Tier 3	DP
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	Tier 3	DP
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	Tier 3	DP
<i>pseudoeph-chlorphen w/ hydrocodone soln 60-4-5 mg/5ml</i>	Tier 3	DP
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	Tier 3	DP
<i>pseudoephedr tab 120mg er</i>	Tier 3	DP
<i>pseudoephedrine hcl tab 30 mg</i>	Tier 3	DP
<i>pseudoephedrine hcl tab 60 mg</i>	Tier 3	DP
<i>pseudoephedrine hcl tab er 12hr 120 mg</i>	Tier 3	DP
<i>qc suphedrin tab 120mg sr</i>	Tier 3	DP
<i>ra cough dm sus 30mg/5ml</i>	Tier 3	DP
REFENESEN TAB CHST CNG	Tier 3	DP
RITEFLO MIS	Tier 3	DP
<i>robafen dm syp 100-10/5</i>	Tier 3	DP
<i>robafen syp 100/5ml</i>	Tier 3	DP
RYDEX LIQ	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)		RESTRICTIONS OR LIMITS ON USE
<i>rynex pse liq</i>	Tier 3		DP
<i>sb cgh contr liq dm</i>	Tier 3		DP
<i>siltuss das liq 100/5ml</i>	Tier 3		DP
<i>siltussin dm liq das</i>	Tier 3		DP
<i>siltussin sa syp 100/5ml</i>	Tier 3		DP
<i>siltussin-dm liq diabetic</i>	Tier 3		DP
<i>siltussin-dm liq max st</i>	Tier 3		DP
<i>siltussin-dm syp alc free</i>	Tier 3		DP
<i>sm nasal dec tab 30mg</i>	Tier 3		DP
<i>sm tussin cf liq</i>	Tier 3		DP
<i>sm tussin dm syp 100-10/5</i>	Tier 3		DP
<i>sm tussin syp dm</i>	Tier 3		DP
<i>sudogest pe tab 10mg</i>	Tier 3		DP
<i>sudogest tab 30mg</i>	Tier 3		DP
<i>sudogest tab 60mg</i>	Tier 3		DP
<i>sudogest tab 120mg er</i>	Tier 3		DP
TESSALON PER CAP 100MG	Tier 3		DP
<i>trymine cg liq 225-7.5</i>	Tier 3		DP
TUSNEL C SYP	Tier 3		DP
<i>tusnel diabt liq 10-100/5</i>	Tier 3		DP
TUSSICAPS CAP 5-4MG	Tier 3		DP
TUSSICAPS CAP 10-8MG	Tier 3		DP
<i>tussigon tab 5-1.5mg</i>	Tier 3		DP
<i>tussin adult liq 100/5ml</i>	Tier 3		DP
<i>tussin adult liq cgh/cong</i>	Tier 3		DP
<i>tussin adult liq cold</i>	Tier 3		DP
<i>tussin cf liq</i>	Tier 3		DP
<i>tussin cf liq cgh/cold</i>	Tier 3		DP
<i>tussin chest syp 100/5ml</i>	Tier 3		DP
<i>tussin dm liq</i>	Tier 3		DP
<i>tussin dm liq 10-200/5</i>	Tier 3		DP
<i>tussin dm liq 100-10/5</i>	Tier 3		DP
<i>tussin dm liq max</i>	Tier 3		DP
<i>tussin dm syp 100-10/5</i>	Tier 3		DP
VALVD HOLDNG MIS CHAMBER	Tier 3		DP
VORTEX VALVE MIS CHAMBER	Tier 3		DP
WATCHHALER MIS	Tier 3		DP
ZUTRIPRO LIQ 60-4-5MG	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>	Tier 1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	Tier 1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	Tier 1	
<i>montelukast sodium tab 10 mg (base equiv)</i>	Tier 1	
<i>zafirlukast tab 10 mg</i>	Tier 1	
<i>zafirlukast tab 20 mg</i>	Tier 1	

MAST CELL STABILIZERS - DRUGS TO TREAT ALLERGIES

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	Tier 1	B/D
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MISCELLANEOUS

<i>acetylcysteine inhal soln 10%</i>	Tier 1	NDS, B/D
<i>acetylcysteine inhal soln 20%</i>	Tier 1	NDS, B/D
ARALAST NP INJ 500MG	Tier 2	LA, PA
ARALAST NP INJ 1000MG	Tier 2	NDS, LA, PA
AYR SALINE KIT NETI RNS	Tier 3	DP
AYR SALINE KIT RINSE	Tier 3	DP
DALIRESP TAB 250MCG	Tier 2	
DALIRESP TAB 500MCG	Tier 2	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	Tier 1	(generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	Tier 1	(generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	Tier 1	(generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	Tier 1	(generic of Adrenaclick)
ESBRIET CAP 267MG	Tier 2	PA
ESBRIET TAB 267MG	Tier 2	PA
ESBRIET TAB 801MG	Tier 2	PA
KALYDECO PAK 25MG	Tier 2	PA
KALYDECO PAK 50MG	Tier 2	PA
KALYDECO PAK 75MG	Tier 2	PA
KALYDECO TAB 150MG	Tier 2	PA
OFEV CAP 100MG	Tier 2	PA
OFEV CAP 150MG	Tier 2	PA
ORKAMBI GRA 100-125	Tier 2	PA

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Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ORKAMBI GRA 150-188	Tier 2	PA
ORKAMBI TAB 100-125	Tier 2	PA
ORKAMBI TAB 200-125	Tier 2	PA
PROLASTIN-C INJ 1000MG	Tier 2	LA, PA
PROLASTIN-C INJ 1000MG	Tier 2	NDS, LA, PA
PULMOZYME SOL 1MG/ML	Tier 2	PA
SYMDEKO TAB 50-75MG	Tier 2	LA, PA
SYMDEKO TAB 100-150	Tier 2	LA, PA
SYMJEPI INJ 0.3MG	Tier 2	
SYMJEPI INJ 0.15MG	Tier 2	
THEO-24 CAP 100MG CR	Tier 2	
THEO-24 CAP 200MG CR	Tier 2	
THEO-24 CAP 300MG CR	Tier 2	
THEO-24 CAP 400MG ER	Tier 2	
<i>theophylline soln 80 mg/15ml</i>	Tier 1	
<i>theophylline tab er 12hr 300 mg</i>	Tier 1	
<i>theophylline tab er 12hr 450 mg</i>	Tier 1	
<i>theophylline tab er 24hr 400 mg</i>	Tier 1	
<i>theophylline tab er 24hr 600 mg</i>	Tier 1	
XOLAIR INJ 75/0.5	Tier 2	LA, PA
XOLAIR INJ 150MG/ML	Tier 2	LA, PA
XOLAIR SOL 150MG	Tier 2	LA, PA
ZEMAIRA INJ 1000MG	Tier 2	NDS, LA, PA

NASAL STEROIDS - DRUGS TO TREAT ALLERGIES

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

STERIOD INHALANTS - DRUGS TO TREAT ASTHMA

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

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

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

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

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

<i>amnesteeem cap 10mg</i>	Tier 1	PA
<i>amnesteeem cap 20mg</i>	Tier 1	PA
<i>amnesteeem cap 40mg</i>	Tier 1	PA
<i>avita cre 0.025%</i>	Tier 1	PA
<i>avita gel 0.025%</i>	Tier 1	PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	Tier 1	
<i>claravis cap 10mg</i>	Tier 1	PA
<i>claravis cap 20mg</i>	Tier 1	PA
<i>claravis cap 30mg</i>	Tier 1	PA
<i>claravis cap 40mg</i>	Tier 1	PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>clindacin-p pad 1%</i>	Tier 1	
<i>clindamycin phosphate gel 1%</i>	Tier 1	
<i>clindamycin phosphate lotion 1%</i>	Tier 1	
<i>clindamycin phosphate soln 1%</i>	Tier 1	
<i>clindamycin phosphate swab 1%</i>	Tier 1	
<i>erythromycin gel 2%</i>	Tier 1	
<i>erythromycin pads 2%</i>	Tier 1	
<i>erythromycin soln 2%</i>	Tier 1	
<i>isotretinoin cap 10 mg</i>	Tier 1	PA
<i>isotretinoin cap 20 mg</i>	Tier 1	PA
<i>isotretinoin cap 30 mg</i>	Tier 1	PA
<i>isotretinoin cap 40 mg</i>	Tier 1	PA
<i>myorisan cap 10mg</i>	Tier 1	PA
<i>myorisan cap 20mg</i>	Tier 1	PA
<i>myorisan cap 30mg</i>	Tier 1	PA
<i>myorisan cap 40mg</i>	Tier 1	PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	Tier 1	
<i>tretinoin cream 0.1%</i>	Tier 1	PA
<i>tretinoin cream 0.05%</i>	Tier 1	PA
<i>tretinoin cream 0.025%</i>	Tier 1	PA
<i>tretinoin gel 0.01%</i>	Tier 1	PA
<i>tretinoin gel 0.025%</i>	Tier 1	PA
<i>zenatane cap 10mg</i>	Tier 1	PA
<i>zenatane cap 20mg</i>	Tier 1	PA
<i>zenatane cap 30mg</i>	Tier 1	PA
<i>zenatane cap 40mg</i>	Tier 1	PA

DERMATOLOGY, ANTIBIOTICS

<i>bacitr zinc oin 500/gm</i>	Tier 3	DP
<i>bacitracin oin 500/gm</i>	Tier 3	DP
<i>bacitracin oint 500 unit/gm</i>	Tier 3	DP
<i>bacitracin zinc oint 500 unit/gm</i>	Tier 3	DP
<i>double antib oin</i>	Tier 3	DP
<i>gentamicin sulfate cream 0.1%</i>	Tier 1	
<i>gentamicin sulfate oint 0.1%</i>	Tier 1	
<i>hm triple oin antibiot</i>	Tier 3	DP
<i>mupirocin oint 2%</i>	Tier 1	
<i>neomycin-bacitracin-polymyxin oint</i>	Tier 3	DP
<i>sb triple oin antibiot</i>	Tier 3	DP
<i>silver sulfadiazine cream 1%</i>	Tier 1	
<i>sm antibioti oin 500/gm</i>	Tier 3	DP

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Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>sm triple oin antibiot</i>	Tier 3	DP
<i>ssd cre 1%</i>	Tier 1	
SULFAMYLON CRE 85MG/GM	Tier 2	
<i>tri-biozene oin</i>	Tier 3	DP
<i>triple antib oin</i>	Tier 3	DP
<i>triple antib oin max st</i>	Tier 3	DP
<i>triple antib oin plus</i>	Tier 3	DP

DERMATOLOGY, ANTIFUNGALS

<i>anti-fungal cre 1%</i>	Tier 3	DP
<i>anti-fungal pow 1%</i>	Tier 3	DP
<i>antifungal aer 1%</i>	Tier 3	DP
<i>antifungal cre 1%</i>	Tier 3	DP
<i>antifungal cre 2%</i>	Tier 3	DP
<i>athlete foot cre 1%</i>	Tier 3	DP
<i>athlete foot cre af</i>	Tier 3	DP
<i>baza antifun cre 2%</i>	Tier 3	DP
BENZOIN TIN	Tier 3	DP
BENZOIN TIN PLAIN	Tier 3	DP
<i>castellani paint</i>	Tier 3	DP
<i>ciclopirox gel 0.77%</i>	Tier 1	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	Tier 1	
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	Tier 1	
<i>ciclopirox shampoo 1%</i>	Tier 1	
<i>clotrimazole cre 1%</i>	Tier 3	DP
<i>clotrimazole cream 1%</i>	Tier 1	
<i>clotrimazole cream 1%</i>	Tier 3	DP
<i>clotrimazole soln 1%</i>	Tier 1	
<i>clotrimazole soln 1%</i>	Tier 3	DP
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	Tier 1	
<i>fungoid-d cre 1%</i>	Tier 3	DP
<i>jock itch aer 1%</i>	Tier 3	DP
<i>ketoconazole cream 2%</i>	Tier 1	
<i>miconazole nitrate cream 2%</i>	Tier 3	DP
<i>nyamyc pow 100000</i>	Tier 1	
<i>nystatin cream 100000 unit/gm</i>	Tier 1	
<i>nystatin oint 100000 unit/gm</i>	Tier 1	
<i>nystatin topical powder 100000 unit/gm</i>	Tier 1	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>nystop pow 100000</i>	Tier 1	
<i>podactin pow 1%</i>	Tier 3	DP
<i>sm antifungl cre 1%</i>	Tier 3	DP
<i>sm antifungl cre 2%</i>	Tier 3	DP
<i>soothe&cool cre inzo 2%</i>	Tier 3	DP
<i>terbinafine cre 1%</i>	Tier 3	DP
<i>terbinafine hcl cream 1%</i>	Tier 3	DP
<i>tolnaftate cre 1%</i>	Tier 3	DP
<i>tolnaftate cream 1%</i>	Tier 3	DP
<i>tolnaftate powder 1%</i>	Tier 3	DP

DERMATOLOGY, ANTIPSORIATICS

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

DERMATOLOGY, ANTISEBORRHEICS

<i>ketoconazole shampoo 2%</i>	Tier 1	
<i>selenium sulfide lotion 2.5%</i>	Tier 1	

DERMATOLOGY, CORTICOSTEROIDS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>betamethasone dipropionate oint 0.05%</i>	Tier 1	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	Tier 1	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	Tier 1	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	Tier 1	
ENSTILAR AER	Tier 2	PA
<i>fluocinolone acetonide cream 0.01%</i>	Tier 1	
<i>fluocinolone acetonide cream 0.025%</i>	Tier 1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	Tier 1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	Tier 1	
<i>fluocinolone acetonide oint 0.025%</i>	Tier 1	
<i>fluocinolone acetonide soln 0.01%</i>	Tier 1	
<i>fluocinonide cream 0.05%</i>	Tier 1	
<i>fluocinonide emulsified base cream 0.05%</i>	Tier 1	
<i>fluocinonide gel 0.05%</i>	Tier 1	
<i>fluocinonide soln 0.05%</i>	Tier 1	
<i>fluticasone propionate cream 0.05%</i>	Tier 1	
<i>fluticasone propionate oint 0.005%</i>	Tier 1	
<i>halobetasol propionate cream 0.05%</i>	Tier 1	
<i>halobetasol propionate oint 0.05%</i>	Tier 1	
<i>hydrocortisone butyrate cream 0.1%</i>	Tier 1	
<i>hydrocortisone butyrate oint 0.1%</i>	Tier 1	
<i>hydrocortisone cream 1%</i>	Tier 1	
<i>hydrocortisone cream 2.5%</i>	Tier 1	
<i>hydrocortisone lotion 2.5%</i>	Tier 1	
<i>hydrocortisone oint 2.5%</i>	Tier 1	
<i>hydrocortisone valerate cream 0.2%</i>	Tier 1	
<i>hydrocortisone valerate oint 0.2%</i>	Tier 1	
<i>mometasone furoate cream 0.1%</i>	Tier 1	
<i>mometasone furoate oint 0.1%</i>	Tier 1	
<i>mometasone furoate solution 0.1% (lotion)</i>	Tier 1	
TEXACORT SOL 2.5%	Tier 2	
<i>triamcinolone acetonide cream 0.1%</i>	Tier 1	
<i>triamcinolone acetonide cream 0.5%</i>	Tier 1	
<i>triamcinolone acetonide cream 0.025%</i>	Tier 1	
<i>triamcinolone acetonide lotion 0.1%</i>	Tier 1	
<i>triamcinolone acetonide lotion 0.025%</i>	Tier 1	
<i>triamcinolone acetonide oint 0.1%</i>	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	THE NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>triamcinolone acetonide oint 0.5%</i>	Tier 1	
<i>triamcinolone acetonide oint 0.025%</i>	Tier 1	
DERMATOLOGY, LOCAL ANESTHETICS		
<i>glydo gel 2%</i>	Tier 1	QL (30 mL / 30 days), PA
<i>lidocaine hcl soln 4%</i>	Tier 1	QL (50 mL / 30 days), PA
<i>lidocaine hcl urethral/mucosal gel 2%</i>	Tier 1	QL (30 mL / 30 days), PA
<i>lidocaine oint 5%</i>	Tier 1	QL (50 grams / 30 days), PA
<i>lidocaine patch 5%</i>	Tier 1	QL (3 patches / 1 day), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	Tier 1	QL (30 grams / 30 days), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
ACESULFAME POW POTASSIU	Tier 3	DP
ACETAMIN POW	Tier 3	DP
ACETIC ACID SOL 3%	Tier 3	DP
ACETIC ACID SOL GLACIAL	Tier 3	DP
ACETYL-L-CAR POW HCL	Tier 3	DP
ALLANTOIN POW	Tier 3	DP
ALMOND OIL SWEET	Tier 3	DP
ALOE VERA POW	Tier 3	DP
ALUM AMMONIU POW	Tier 3	DP
ALUMINUM CL CRY	Tier 3	DP
ALUMINUM POW HYDROXID	Tier 3	DP
<i>amlactin lot 12%</i>	Tier 3	DP
AMMONIUM GRA CHLORIDE	Tier 3	DP
AMMONIUM POW ALUMINUM	Tier 3	DP
ARGININE HCL POW	Tier 3	DP
ASCORBIC ACD GRA	Tier 3	DP
ASCORBIC ACD POW	Tier 3	DP
ASCORBYL POW PALMITAT	Tier 3	DP
BETAINE POW ANHYDROU	Tier 3	DP
BIOFLAVINOID POW LEMON	Tier 3	DP
BIOFLAVONOID POW CITRUS	Tier 3	DP
BISMUTH POW SUBNITRA	Tier 3	DP
BISMUTH SUBC POW	Tier 3	DP
BORIC ACID GRA	Tier 3	DP

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

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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>fluorouracil cream 5%</i>	Tier 1
<i>fluorouracil soln 2%</i>	Tier 1
<i>fluorouracil soln 5%</i>	Tier 1
FORMALDEHYDE SOL 37%	Tier 3 DP
FREE & CLEAR SHA	Tier 3 DP
FULLERS POW EARTH	Tier 3 DP
GLUCOSAMINE POW HCL	Tier 3 DP
GLUCOSAMINE POW SULFATE	Tier 3 DP
GLYCERIN LIQ	Tier 3 DP
GLYCOLIC ACD CRY	Tier 3 DP
GLYCOLIC ACD SOL 70%	Tier 3 DP
GRAPE SEED OIL	Tier 3 DP
GREEN TEA EX LIQ 90%	Tier 3 DP
HYDROCHL ACD LIQ 37%	Tier 3 DP
<i>hydrocortisone rectal cream 2.5%</i>	Tier 1
ICHTHAMMOL POW	Tier 3 DP
<i>imiquimod cream 5%</i>	Tier 1
INDOLE-3- POW CARBINOL	Tier 3 DP
INOSITOL POW HEXANICO	Tier 3 DP
IODINE CRY RESUBLIM	Tier 3 DP
ODOFORM POW	Tier 3 DP
ISOPROPYL LIQ PALMITAT	Tier 3 DP
JESSNERS SOL	Tier 3 DP
KOJIC ACID POW	Tier 3 DP
L-CITRULLINE POW	Tier 3 DP
LAC-HYDRIN LOT 12%	Tier 3 DP
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 1
<i>lactic acid (ammonium lactate) cream 12%</i>	Tier 3 DP
<i>lactic acid (ammonium lactate) lotion 12%</i>	Tier 1
<i>lactic acid (ammonium lactate) lotion 12%</i>	Tier 3 DP
LACTIC ACID SOL	Tier 3 DP
LIPOIC ACID POW	Tier 3 DP
MAG CITRATE POW TRIBASIC	Tier 3 DP
MAGNESIUM POW HYDROXID	Tier 3 DP
MALIC ACID POW	Tier 3 DP
MANNITOL POW	Tier 3 DP
MENTHOL CRY	Tier 3 DP
MENTHOL-L CRY	Tier 3 DP
METHYL SULF CRY	Tier 3 DP
<i>metronidazole cream 0.75%</i>	Tier 1

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>metronidazole gel 0.75%</i>	Tier 1
<i>metronidazole lotion 0.75%</i>	Tier 1
NA PHOS MONO POW ANHYDROU	Tier 3 DP
NEW SKIN AER	Tier 3 DP
OIL-ALMOND OIL SWEET	Tier 3 DP
OIL-COCONUT OIL	Tier 3 DP
ORNITHINE POW HCL	Tier 3 DP
OXALIC ACID CRY	Tier 3 DP
PANRETIN GEL 0.1%	Tier 2
PENTRAVAN CRE	Tier 3 DP
PENTRAVAN CRE PLUS	Tier 3 DP
PERUVIAN LIQ BALSAM	Tier 3 DP
PHENOL LIQ	Tier 3 DP
PHOSPHATIDYL POW 20%	Tier 3 DP
PICATO GEL 0.05%	Tier 2 QL (2 tubes / 30 days)
PICATO GEL 0.015%	Tier 2 QL (3 tubes / 30 days)
<i>podofilox soln 0.5%</i>	Tier 1
POLYSORBATE SOL 20	Tier 3 DP
POT GLUCONAT POW ANHYDROU	Tier 3 DP
POT HYDROXID SOL 10%	Tier 3 DP
POT HYDROXID SOL 20%	Tier 3 DP
POT NITRATE GRA	Tier 3 DP
POT NITRATE GRA PURIFIED	Tier 3 DP
POTASSIUM CRY BROMIDE	Tier 3 DP
POTASSIUM CRY IODIDE	Tier 3 DP
POTASSIUM MIS HYDROXID	Tier 3 DP
<i>procto-med cre hc 2.5%</i>	Tier 1
<i>procto-pak cre 1%</i>	Tier 1
<i>proctozone cre -hc 2.5%</i>	Tier 1
PSYLLIUM POW HUSK 95%	Tier 3 DP
PX CALAMINE LOT	Tier 3 DP
PYRUVIC ACID LIQ	Tier 3 DP
RA CALAMINE LOT	Tier 3 DP
RED YEAST POW RICE	Tier 3 DP
RESORCINOL POW	Tier 3 DP
<i>rosadan cre 0.75%</i>	Tier 1
SAFFLOWER OIL	Tier 3 DP
SALICYLIC POW ACID	Tier 3 DP
SM CALAMINE LOT	Tier 3 DP
SM CALAMINE LOT PHENOLAT	Tier 3 DP

PA - Prior Authorization
under Medicare B or D

QL - Quantity Limits
LA - Limited Access

ST - Step Therapy
NDS - Non-Extended Days Supply

B/D - Covered

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)	
SOD BROMIDE GRA	Tier 3	DP
SOD FLUORIDE POW	Tier 3	DP
SOD METABISU GRA ANHYDR	Tier 3	DP
SOD PERBORAT CRY	Tier 3	DP
SOD PHOSPHAT GRA DIBASIC	Tier 3	DP
SOD PROPION POW	Tier 3	DP
SOD SULFITE POW ANHYDROU	Tier 3	DP
SODIUM BORAT POW	Tier 3	DP
SODIUM CITRA GRA DIHYDRAT	Tier 3	DP
SODIUM MIS HYDROXID	Tier 3	DP
SODIUM POW BICARBON	Tier 3	DP
SOYBEAN OIL	Tier 3	DP
SPERMACETI MIS	Tier 3	DP
SQUARIC ACID LIQ BUTANOL	Tier 3	DP
SQUARIC ACID POW DI-N-BUT	Tier 3	DP
STEVIA POW EXTRACT	Tier 3	DP
SULFUR POW	Tier 3	DP
SULFUR POW PRECIPIT	Tier 3	DP
<i>tacrolimus oint 0.1%</i>	Tier 1	
<i>tacrolimus oint 0.03%</i>	Tier 1	
TALC POW	Tier 3	DP
TANNIC ACID POW	Tier 3	DP
TARGRETIN GEL 1%	Tier 2	PA
TARTARIC ACD GRA	Tier 3	DP
THYMOL CRY	Tier 3	DP
TURPENTINE LIQ SPIRITS	Tier 3	DP
UNDECYLENIC LIQ ACID	Tier 3	DP
UREA BEA	Tier 3	DP
UREA POW PEROXIDE	Tier 3	DP
VALCHLOR GEL 0.016%	Tier 2	LA, PA
VEEGUM MIS LUMP	Tier 3	DP
VITAMIN K-1 POW	Tier 3	DP
XYLITOL POW	Tier 3	DP
ZINC CHLORID GRA	Tier 3	DP
ZINC OXIDE POW	Tier 3	DP
<i>zostrix hp cre 0.1%</i>	Tier 3	DP
ZOSTRIX NAT CRE 0.033%	Tier 3	DP
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>complete kit lice</i>	Tier 3	DP
<i>gnp lice kit</i>	Tier 3	DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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<i>lice killing sha</i>	Tier 3	DP
<i>lice killing sha 0.33-4%</i>	Tier 3	DP
<i>lice treatmt lot 1%</i>	Tier 3	DP
<i>lice treatmt sha 0.33-4%</i>	Tier 3	DP
<i>lice trtmnt liq</i>	Tier 3	DP
<i>lice trtmnt liq 1%</i>	Tier 3	DP
<i>licide sha 0.33-4%</i>	Tier 3	DP
<i>malathion lotion 0.5%</i>	Tier 1	
<i>permethrin cream 5%</i>	Tier 1	
<i>ra lice liq max st</i>	Tier 3	DP
RID COMPLETE KIT LICE	Tier 3	DP
RID ESS LICE KIT 0.33-4%	Tier 3	DP
<i>rid lice kil sha 0.33-4%</i>	Tier 3	DP
<i>rid licekill sha 0.33-4%</i>	Tier 3	DP
<i>sm lice soln kit</i>	Tier 3	DP
<i>tgt lice kit complete</i>	Tier 3	DP

DERMATOLOGY, WOUND CARE AGENTS

<i>acetic acid irrigation soln 0.25%</i>	Tier 1	
REGRANEX GEL 0.01%	Tier 2	PA
SANTYL OIN 250/GM	Tier 2	
<i>sodium chloride irrigation soln 0.9%</i>	Tier 1	
<i>water for irrigation, sterile irrigation soln</i>	Tier 1	

MOUTH/THROAT/DENTAL AGENTS

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

OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR

<i>acetic acid otic soln 2%</i>	Tier 1	
CIPRODEX SUS 0.3-0.1%	Tier 2	
<i>flac oil 0.01%</i>	Tier 1	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	Tier 1	

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

D. Index of Covered Drugs

1		<i>acetazolamide cap er 12hr 500 mg</i>	45
10	<i>10peh/400gfn tab /20dm</i>	<i>acetazolamide tab 125 mg</i>	45
3		<i>acetazolamide tab 250 mg</i>	45
3	<i>3 day vaginl cre 2%</i>	<i>acetic acid irrigation soln 0.25%</i>	155
8		<i>acetic acid otic soln 2%</i>	155
8	<i>8 hour pain tab 650mg</i>	ACETIC ACID SOL 3%	150
A		ACETIC ACID SOL GLACIAL	150
	<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	<i>acetylcysteine inhal soln 10%</i>	143
		<i>acetylcysteine inhal soln 20%</i>	143
	<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	ACETYL-L-CAR POW HCL	150
		<i>acitretin cap 10 mg</i>	148
	<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	<i>acitretin cap 17.5 mg</i>	148
		<i>acitretin cap 25 mg</i>	148
	<i>abacavir sulfate tab 300 mg (base equiv)</i>	ACTHIB INJ	111
		ACTIMMUNE INJ 2MU/0.5	110
	ABELCET INJ 5MG/ML	<i>acyclovir cap 200 mg</i>	16
	ABILIFY MAIN INJ 300MG	<i>acyclovir sodium iv soln 50 mg/ml</i>	16
	ABILIFY MAIN INJ 400MG	<i>acyclovir susp 200 mg/5ml</i>	16
	<i>abiraterone acetate tab 250 mg</i>	<i>acyclovir tab 400 mg</i>	16
	ABRAXANE INJ 100MG	<i>acyclovir tab 800 mg</i>	16
	ACACIA POW	ADACEL INJ	111
	<i>acamprosate calcium tab delayed release 333 mg</i>	<i>adefovir dipivoxil tab 10 mg</i>	16
		ADEMPAS TAB 0.5MG	48
	<i>acarbose tab 100 mg</i>	ADEMPAS TAB 1.5MG	48
	<i>acarbose tab 25 mg</i>	ADEMPAS TAB 1MG	48
	<i>acarbose tab 50 mg</i>	ADEMPAS TAB 2.5MG	48
	<i>acebutolol hcl cap 200 mg</i>	ADEMPAS TAB 2MG	48
	<i>acebutolol hcl cap 400 mg</i>	ADIPEX-P CAP 37.5MG	72
	<i>acephen sup 120mg</i>	ADIPEX-P TAB 37.5MG	72
	<i>acephen sup 325mg</i>	<i>adriamycin inj 20mg</i>	23
	<i>acephen sup 650mg</i>	<i>adrucil inj 2.5g/50m</i>	23
	ACESULFAME POW POTASSIU	<i>adrucil inj 500/10ml</i>	23
		<i>adrucil inj 5gm/100m</i>	23
	<i>acetaminophen suppos 120 mg</i>	ADULT 50+ CAP OCUVITE	123
	<i>acetaminophen suppos 650 mg</i>	ADVAIR DISKU AER 100/50	145
	<i>acetaminophen tab 325 mg</i>	ADVAIR DISKU AER 250/50	145
	<i>acetaminophen tab 500 mg</i>	ADVAIR DISKU AER 500/50	145
	<i>acetaminophen tab er 650 mg</i>	ADVAIR HFA AER 115/21	145
	<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	ADVAIR HFA AER 230/21	145
		ADVAIR HFA AER 45/21	145
	<i>acetaminophen w/ codeine tab 300-15 mg</i>	<i>advanced sus antacid</i>	93
		AERCHMBR PLS MIS FLOW-VU	138
	<i>acetaminophen w/ codeine tab 300-30 mg</i>	AERCHMBR PLS MIS LRG MASK	138
		AERCHMBR PLS MIS MED MASK	138
	<i>acetaminophen w/ codeine tab 300-60 mg</i>	AERCHMBR PLS MIS SM MASK	138
		AERCHMBR Z- MIS STAT PLS	138
	<i>acetaminophn sus 160/5ml</i>	AEROCHAMBER MIS CHAMBER	138
	ACETAMIN POW		

AEROCHAMBER MIS FLOSIGNA.....	138	ALIMTA INJ 500MG	24
AEROCHAMBER MIS MV	138	ALINIA SUS 100/5ML	9
AEROCHAMBER MIS PLUS	138	ALINIA TAB 500MG.....	9
AEROVENT MIS PLUS	138	<i>aliskiren fumarate tab 150 mg (base</i>	
AFINITOR DIS TAB 2MG	28	<i>equivalent)</i>	45
AFINITOR DIS TAB 3MG	28	<i>aliskiren fumarate tab 300 mg (base</i>	
AFINITOR DIS TAB 5MG	28	<i>equivalent)</i>	45
AFINITOR TAB 10MG.....	28	ALLANTOIN POW	150
AFINITOR TAB 2.5MG.....	28	<i>all day allg chw 10mg</i>	134
AFINITOR TAB 5MG	28	<i>all day allg sol 1mg/ml</i>	135
AFINITOR TAB 7.5MG.....	28	<i>all day allg sol 5mg/5ml</i>	135
AIMOVIG INJ 140MG/ML.....	69	<i>all day allg tab 10mg</i>	135
AIMOVIG INJ 70MG/ML.....	69	<i>aller/conges tab 10-240mg</i>	138
AIMSCO MIS LUBRICAT	79	<i>aller-chlor tab 4mg</i>	135
<i>ala-cort cre 1%</i>	148	<i>allerclear tab 10mg</i>	135
<i>ala-cort cre 2.5%</i>	148	<i>aller-ease tab 180mg</i>	135
<i>albendazole tab 200 mg</i>	9	<i>aller-ease tab 60mg</i>	135
<i>albuterol sulfate inhal aero 108 mcg/act</i>		<i>allergy/cong tab 5-120mg</i>	138
<i>(90mcg base equiv)</i>	137	<i>allergy cap 25mg</i>	135
<i>albuterol sulfate soln nebu 0.083% (2.5</i>		<i>allergy chld liq 12.5/5ml</i>	135
<i>mg/3ml)</i>	137	<i>allergy comp sol 1mg/ml</i>	135
<i>albuterol sulfate soln nebu 0.5% (5</i>		<i>allergy d tab 5-120mg</i>	138
<i>mg/ml)</i>	137	<i>allergy-d tab 5-120mg</i>	138
<i>albuterol sulfate soln nebu 0.63 mg/3ml</i>		<i>allergy eye dro</i>	133
<i>(base equiv)</i>	137	<i>allergy eye dro op</i>	133
<i>albuterol sulfate soln nebu 1.25 mg/3ml</i>		<i>allergy liq 12.5/5ml</i>	135
<i>(base equiv)</i>	137	<i>allergy med tab 25mg</i>	135
<i>albuterol sulfate syrup 2 mg/5ml</i>	137	<i>allergy rel/ tab deconges</i>	138
<i>albuterol sulfate tab 2 mg</i>	137	<i>allergy relf cap 25mg</i>	135
<i>albuterol sulfate tab 4 mg</i>	137	<i>allergy relf liq 12.5/5ml</i>	135
<i>albuterol sulfate tab er 12hr 4 mg</i>	137	<i>allergy relf tab /nsl dec</i>	138
<i>albuterol sulfate tab er 12hr 8 mg</i>	137	<i>allergy relf tab 1.34mg</i>	135
<i>alclometasone dipropionate cream 0.05%</i>		<i>allergy relf tab 10mg</i>	135
.....	148	<i>allergy relf tab 25mg</i>	135
<i>alclometasone dipropionate oint 0.05%</i>		<i>allergy relf tab d-24</i>	138
.....	148	<i>allergy tab 10mg</i>	135
ALCOHOL SWABS	75	<i>allergy tab 25mg</i>	135
ALDURAZYME INJ 2.9MG/5M	86	<i>allergy tab 4mg</i>	135
ALECENSA CAP 150MG	28	<i>allergy-time tab 4mg</i>	135
<i>alendronate sodium oral soln 70</i>		<i>aller-tec tab 10mg</i>	135
<i>mg/75ml</i>	78	<i>allgy comp-d tab 5-120mg</i>	138
<i>alendronate sodium tab 10 mg</i>	78	<i>allopurinol tab 100 mg</i>	1
<i>alendronate sodium tab 35 mg</i>	78	<i>allopurinol tab 300 mg</i>	1
<i>alendronate sodium tab 40 mg</i>	78	<i>almacone chw</i>	93
<i>alendronate sodium tab 5 mg</i>	78	<i>almacone dbl sus strength</i>	94
<i>alendronate sodium tab 70 mg</i>	78	<i>almacone sus</i>	94
<i>alfuzosin hcl tab er 24hr 10 mg</i>	102	ALMOND OIL SWEET	150
ALIMTA INJ 100MG	23	ALOE VERA POW.....	150

<i>alose tron hcl tab 0.5 mg (base equiv)</i>	100	<i>AMITIZA CAP 8MCG</i>	100
<i>alose tron hcl tab 1 mg (base equiv)</i>	100	<i>amitriptyline hcl tab 100 mg</i>	56
<i>ALPHAGAN P SOL 0.1%</i>	133	<i>amitriptyline hcl tab 10 mg</i>	56
<i>alprazolam tab 0.25 mg</i>	49	<i>amitriptyline hcl tab 150 mg</i>	56
<i>alprazolam tab 0.5 mg</i>	49	<i>amitriptyline hcl tab 25 mg</i>	56
<i>alprazolam tab 1 mg</i>	49	<i>amitriptyline hcl tab 50 mg</i>	56
<i>alprazolam tab 2 mg</i>	49	<i>amitriptyline hcl tab 75 mg</i>	56
<i>ALREX SUS 0.2%</i>	132	<i>amlactin lot 12%</i>	150
<i>ALUM AMMONIU POW</i>	150	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>ALUM HYDROX SUS 320/5ML</i>	94	<i>10-20 mg</i>	33
<i>ALUMINUM CL CRY</i>	150	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>ALUMINUM POW HYDROXID</i>	150	<i>10-40 mg</i>	33
<i>ALUNBRIG PAK</i>	28	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>ALUNBRIG TAB 180MG</i>	28	<i>2.5-10 mg</i>	33
<i>ALUNBRIG TAB 30MG</i>	28	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>ALUNBRIG TAB 90MG</i>	28	<i>5-10 mg</i>	33
<i>alyacen tab 1/35</i>	79	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>amantadine hcl cap 100 mg</i>	60	<i>5-20 mg</i>	33
<i>amantadine hcl syrup 50 mg/5ml</i>	60	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>amantadine hcl tab 100 mg</i>	60	<i>5-40 mg</i>	33
<i>ambi 10peh/ tab 400gfn</i>	138	<i>amlodipine besylate-olmesartan</i>	
<i>ambi 40pse/ tab 400gfn</i>	138	<i>medoxomil tab 10-20 mg</i>	35
<i>AMBISOME INJ 50MG</i>	12	<i>amlodipine besylate-olmesartan</i>	
<i>ambrisentan tab 10 mg</i>	48	<i>medoxomil tab 10-40 mg</i>	35
<i>ambrisentan tab 5 mg</i>	48	<i>amlodipine besylate-olmesartan</i>	
<i>amethia lo tab</i>	79	<i>medoxomil tab 5-20 mg</i>	35
<i>amethia tab</i>	79	<i>amlodipine besylate-olmesartan</i>	
<i>amikacin sulfate inj 1 gm/4ml (250</i>		<i>medoxomil tab 5-40 mg</i>	35
<i>mg/ml)</i>	9	<i>amlodipine besylate tab 10 mg (base</i>	
<i>amikacin sulfate inj 500 mg/2ml (250</i>		<i>equivalent)</i>	43
<i>mg/ml)</i>	9	<i>amlodipine besylate tab 2.5 mg (base</i>	
<i>amiloride & hydrochlorothiazide tab 5-50</i>		<i>equivalent)</i>	43
<i>mg</i>	45	<i>amlodipine besylate tab 5 mg (base</i>	
<i>amiloride hcl tab 5 mg</i>	45	<i>equivalent)</i>	43
<i>amino acid infusion 6%</i>	114	<i>amlodipine besylate-valsartan tab</i>	
<i>AMINOSYN II INJ 10%</i>	114	<i>10-160 mg</i>	36
<i>AMINOSYN-PF INJ 10%</i>	114	<i>amlodipine besylate-valsartan tab</i>	
<i>AMINOSYN-PF INJ 7%</i>	114	<i>10-320 mg</i>	36
<i>amiodarone hcl inj 150 mg/3ml (50</i>		<i>amlodipine besylate-valsartan tab 5-160</i>	
<i>mg/ml)</i>	38	<i>mg</i>	36
<i>amiodarone hcl inj 450 mg/9ml (50</i>		<i>amlodipine besylate-valsartan tab 5-320</i>	
<i>mg/ml)</i>	38	<i>mg</i>	36
<i>amiodarone hcl inj 900 mg/18ml (50</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>mg/ml)</i>	38	<i>tab 10-160-12.5 mg</i>	36
<i>amiodarone hcl tab 100 mg</i>	38	<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>amiodarone hcl tab 200 mg</i>	38	<i>tab 10-160-25 mg</i>	36
<i>amiodarone hcl tab 400 mg</i>	38	<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>AMITIZA CAP 24MCG</i>	100	<i>tab 10-320-25 mg</i>	36

<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 5-160-12.5 mg</i>	36
<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 5-160-25 mg</i>	36
AMMONIUM GRA CHLORIDE	150
AMMONIUM POW ALUMINUM	150
<i>amnestem cap 10mg</i>	145
<i>amnestem cap 20mg</i>	145
<i>amnestem cap 40mg</i>	145
<i>amoxapine tab 100 mg</i>	56
<i>amoxapine tab 150 mg</i>	56
<i>amoxapine tab 25 mg</i>	56
<i>amoxapine tab 50 mg</i>	56
<i>amoxicillin (trihydrate) cap 250 mg</i>	20
<i>amoxicillin (trihydrate) cap 500 mg</i>	20
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	
.....	21
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	
.....	21
<i>amoxicillin (trihydrate) for susp 125</i>	
<i>mg/5ml</i>	21
<i>amoxicillin (trihydrate) for susp 200</i>	
<i>mg/5ml</i>	21
<i>amoxicillin (trihydrate) for susp 250</i>	
<i>mg/5ml</i>	21
<i>amoxicillin (trihydrate) for susp 400</i>	
<i>mg/5ml</i>	21
<i>amoxicillin (trihydrate) tab 500 mg</i>	21
<i>amoxicillin (trihydrate) tab 875 mg</i>	21
<i>amoxicillin & k clavulanate chew tab</i>	
<i>200-28.5 mg</i>	20
<i>amoxicillin & k clavulanate chew tab</i>	
<i>400-57 mg</i>	20
<i>amoxicillin & k clavulanate for susp</i>	
<i>200-28.5 mg/5ml</i>	20
<i>amoxicillin & k clavulanate for susp</i>	
<i>250-62.5 mg/5ml</i>	20
<i>amoxicillin & k clavulanate for susp</i>	
<i>400-57 mg/5ml</i>	20
<i>amoxicillin & k clavulanate for susp</i>	
<i>600-42.9 mg/5ml</i>	20
<i>amoxicillin & k clavulanate tab 250-125</i>	
<i>mg</i>	20
<i>amoxicillin & k clavulanate tab 500-125</i>	
<i>mg</i>	20
<i>amoxicillin & k clavulanate tab 875-125</i>	
<i>mg</i>	20
<i>amoxicillin & k clavulanate tab er 12hr</i>	
<i>1000-62.5 mg</i>	20
<i>amphetamine-dextroamphetamine cap er</i>	
<i>24hr 10 mg</i>	67
<i>amphetamine-dextroamphetamine cap er</i>	
<i>24hr 15 mg</i>	67
<i>amphetamine-dextroamphetamine cap er</i>	
<i>24hr 20 mg</i>	67
<i>amphetamine-dextroamphetamine cap er</i>	
<i>24hr 25 mg</i>	67
<i>amphetamine-dextroamphetamine cap er</i>	
<i>24hr 30 mg</i>	67
<i>amphetamine-dextroamphetamine cap er</i>	
<i>24hr 5 mg</i>	67
<i>amphetamine-dextroamphetamine tab</i>	
<i>10 mg</i>	67
<i>amphetamine-dextroamphetamine tab</i>	
<i>12.5 mg</i>	67
<i>amphetamine-dextroamphetamine tab</i>	
<i>15 mg</i>	67
<i>amphetamine-dextroamphetamine tab</i>	
<i>20 mg</i>	67
<i>amphetamine-dextroamphetamine tab</i>	
<i>30 mg</i>	67
<i>amphetamine-dextroamphetamine tab 5</i>	
<i>mg</i>	67
<i>amphetamine-dextroamphetamine tab</i>	
<i>7.5 mg</i>	67
<i>amphotericin b for iv soln 50 mg</i>	12
<i>ampicillin & sulbactam sodium for inj 1.5</i>	
<i>(1-0.5) gm</i>	21
<i>ampicillin & sulbactam sodium for inj 3</i>	
<i>(2-1) gm</i>	21
<i>ampicillin & sulbactam sodium for iv soln</i>	
<i>15 (10-5) gm</i>	21
<i>ampicillin cap 500 mg</i>	21
<i>ampicillin sodium for inj 125 mg</i>	21
<i>ampicillin sodium for inj 1 gm</i>	21
<i>ampicillin sodium for inj 250 mg</i>	21
<i>ampicillin sodium for inj 2 gm</i>	21
<i>ampicillin sodium for inj 500 mg</i>	21
<i>ampicillin sodium for iv soln 10 gm</i>	21
<i>ampicillin sodium for iv soln 1 gm</i>	21
<i>ampicillin sodium for iv soln 2 gm</i>	21
ANADROL-50 TAB 50MG	74
<i>anagrelide hcl cap 0.5 mg</i>	107
<i>anagrelide hcl cap 1 mg</i>	107
<i>anastrozole tab 1 mg</i>	26
ANDRODERM DIS 2MG/24HR	74

ANDRODERM DIS 4MG/24HR	74	ARALAST NP INJ 500MG	143
<i>animal shape chw</i>	123	<i>aranelle tab</i>	79
<i>animal shape chw complete</i>	123	ARCALYST INJ 220MG	110
ANIMAL SHAPE CHW IRON	123	ARGININE HCL POW	150
ANORO ELLIPT AER 62.5-25	134	ARIAL MIS CHAMBER.....	138
<i>antacid/sime sus ds</i>	94	<i>aripiprazole orally disintegrating tab 10</i>	
<i>antacid fast sus acting</i>	94	<i>mg</i>	62
<i>antacid fast sus relief</i>	94	<i>aripiprazole orally disintegrating tab 15</i>	
<i>antacid plus sus anti-gas</i>	94	<i>mg</i>	62
<i>antacid plus sus gas rel</i>	94	<i>aripiprazole oral solution 1 mg/ml</i>	62
<i>antacid sus</i>	94	<i>aripiprazole tab 10 mg</i>	62
<i>antacid sus anti-gas</i>	94	<i>aripiprazole tab 15 mg</i>	62
<i>antacid sus max st</i>	94	<i>aripiprazole tab 20 mg</i>	62
<i>antacid sus mint crm</i>	94	<i>aripiprazole tab 2 mg</i>	62
<i>antacid sus reg st</i>	94	<i>aripiprazole tab 30 mg</i>	62
<i>anti-diarrhe cap 2mg</i>	95	<i>aripiprazole tab 5 mg</i>	62
<i>anti-diarrhe tab 2mg</i>	95	ARISTADA INJ 1064MG	62
<i>antifungal aer 1%</i>	147	ARISTADA INJ 441MG/1.	62
<i>antifungal cre 1%</i>	147	ARISTADA INJ 662MG/2	62
<i>anti-fungal cre 1%</i>	147	ARISTADA INJ 882MG/3	62
<i>antifungal cre 2%</i>	147	ARISTADA INJ INITIO	62
<i>anti-fungal pow 1%</i>	147	<i>armodafinil tab 150 mg</i>	72
ANTIOXIDANT CAP.....	123	<i>armodafinil tab 200 mg</i>	72
<i>antioxidant tab</i>	123	<i>armodafinil tab 250 mg</i>	72
<i>antioxidant tab vitamins</i>	123	<i>armodafinil tab 50 mg</i>	72
APATATE FORT LIQ	123	ARNUITY ELPT INH 100MCG	144
APATATE LIQ.....	123	ARNUITY ELPT INH 200MCG	144
APOKYN INJ 10MG/ML.....	60	ARNUITY ELPT INH 50MCG.....	144
APPLE FLAVOR LIQ.....	119	<i>arthrts pain tab 650mg</i>	1
<i>aprepitant capsule 125 mg</i>	95	ASCORBIC ACD GRA	150
<i>aprepitant capsule 40 mg</i>	95	ASCORBIC ACD POW	150
<i>aprepitant capsule 80 mg</i>	95	<i>ascorbic acid cap er 500 mg</i>	123
<i>aprepitant capsule therapy pack 80 &</i>		<i>ascorbic acid chew tab 250 mg</i>	123
<i>125 mg</i>	95	<i>ascorbic acid chew tab 500 mg</i>	123
APRISO CAP 0.375GM	97	<i>ascorbic acid tab 1000 mg</i>	124
<i>apri tab</i>	79	<i>ascorbic acid tab 250 mg</i>	123
APTIOM TAB 200MG.....	49	<i>ascorbic acid tab 500 mg</i>	124
APTIOM TAB 400MG.....	49	ASCORBYL POW PALMITAT.....	150
APTIOM TAB 600MG.....	49	<i>ashlyna tab</i>	79
APTIOM TAB 800MG.....	49	ASPARTAME POW.....	119
APTIVUS CAP 250MG	13	<i>aspirin-dipyridamole cap er 12hr 25-200</i>	
APTIVUS SOL	13	<i>mg</i>	108
AQUADEKS CHW.....	123	<i>aspirin low tab 81mg ec</i>	1
<i>aquadeks dro</i>	123	ASPIRIN POW	1
AQUASOL A INJ 50000/ML	123	ASPIRIN SUP 600MG.....	1
AQUASOL E DRO 15/0.3ML	123	<i>aspirin tab 325mg</i>	1
<i>aqueous e dro 15/0.3ml</i>	123	<i>aspirin tab 325 mg</i>	1
ARALAST NP INJ 1000MG.....	143	<i>aspirin tab 325mg ec</i>	1

<i>aspirin tab delayed release 325 mg</i>.....1	ATROPINE SUL SOL 1% OP .....134
<i>atazanavir sulfate cap 150 mg (base equiv)</i> .....13	ATROVENT HFA AER 17MCG .....134
<i>atazanavir sulfate cap 200 mg (base equiv)</i> .....13	<i>aubra tab 0.1-0.02</i> .....80
<i>atazanavir sulfate cap 300 mg (base equiv)</i> .....13	AURYXIA TAB 210MG .....91
<i>atenolol & chlorthalidone tab 100-25 mg</i> .....41	AUSTEDO TAB 12MG .....70
<i>atenolol & chlorthalidone tab 50-25 mg</i> .....41	AUSTEDO TAB 6MG.....70
<i>atenolol tab 100 mg</i>.....41	AUSTEDO TAB 9MG.....70
<i>atenolol tab 25 mg</i> .....41	AVASTIN INJ.....25
<i>atenolol tab 50 mg</i> .....41	AVASTIN INJ 400/16ML.....25
<i>athlete foot cre 1%</i> .....147	<i>aviane tab</i> .....80
<i>athlete foot cre af</i> .....147	<i>avita cre 0.025%</i> .....145
ATLAS CONDOM MIS COLR/SPM .....79	<i>avita gel 0.025%</i> .....145
ATLAS CONDOM MIS LUB/COLR.....80	AYR SALINE KIT NETI RNS .....143
ATLAS CONDOM MIS LUB/SPMC .....80	AYR SALINE KIT RINSE.....143
ATLAS CONDOM MIS LUBRICAT.....80	<i>azacitidine for inj 100 mg</i> .....24
<i>atomoxetine hcl cap 100 mg (base equiv)</i> .....67	AZACTAM INJ 1GM .....9
<i>atomoxetine hcl cap 10 mg (base equiv)</i> .....67	AZACTAM INJ 2GM .....9
<i>atomoxetine hcl cap 18 mg (base equiv)</i> .....67	AZASITE SOL 1%.....131
<i>atomoxetine hcl cap 25 mg (base equiv)</i> .....67	<i>azathioprine tab 50 mg</i>.....110
<i>atomoxetine hcl cap 40 mg (base equiv)</i> .....67	AZ CREAM CRE.....119
<i>atomoxetine hcl cap 60 mg (base equiv)</i> .....67	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i> .....135
<i>atomoxetine hcl cap 80 mg (base equiv)</i> .....67	<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i> .....135
<i>atorvastatin calcium tab 10 mg (base equivalent)</i> .....39	<i>azelastine hcl ophth soln 0.05%</i>.....133
<i>atorvastatin calcium tab 20 mg (base equivalent)</i> .....39	<i>azithromycin for susp 100 mg/5ml</i>.....19
<i>atorvastatin calcium tab 40 mg (base equivalent)</i> .....39	<i>azithromycin for susp 200 mg/5ml</i>.....19
<i>atorvastatin calcium tab 80 mg (base equivalent)</i> .....39	<i>azithromycin iv for soln 500 mg</i>.....19
<i>atovaquone-proguanil hcl tab 250-100 mg</i> .....13	<i>azithromycin powd pack for susp 1 gm</i> 19
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i> .....13	<i>azithromycin tab 250 mg</i> .....19
<i>atovaquone susp 750 mg/5ml</i> .....9	<i>azithromycin tab 500 mg</i> .....19
ATRIPLA TAB .....15	<i>azithromycin tab 600 mg</i> .....19
	AZOPT SUS 1% OP .....133
	<i>aztreonam for inj 1 gm</i> .....9
	<i>aztreonam for inj 2 gm</i> .....9
	B
	B-12 DOTS TAB 500MCG .....124
	<i>bacitracin oin 500/gm</i>.....146
	<i>bacitracin oint 500 unit/gm</i> .....146
	<i>bacitracin ophth oint 500 unit/gm</i> ....132
	<i>bacitracin-polymyxin b ophth oint</i> ....132
	<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i> .....131
	<i>bacitracin zinc oint 500 unit/gm</i> .....146
	<i>bacitr zinc oin 500/gm</i> .....146
	<i>baclofen tab 10 mg</i> .....71
	<i>baclofen tab 20 mg</i> .....71
	<i>balanc b-100 tab 100mg</i> .....124

<i>balanc b-50 tab</i>	124	.....	145
<i>balsalazide disodium cap 750 mg</i>	97	<i>benzphetamine hcl tab 50 mg</i>	72
BALVERSA TAB 3MG	28	<i>benztropine mesylate inj 1 mg/ml</i>	60
BALVERSA TAB 4MG	28	<i>benztropine mesylate tab 0.5 mg</i>	60
BALVERSA TAB 5MG	28	<i>benztropine mesylate tab 1 mg</i>	60
<i>balziva tab</i>	80	<i>benztropine mesylate tab 2 mg</i>	60
BANANA LIQ FLAVOR	119	BENZYL ALC LIQ	119
<i>banophen cap 25mg</i>	135	BEPREVE DRO 1.5%	133
<i>banophen cap 50mg</i>	135	BERINERT INJ 500UNIT	107
<i>banophen liq 12.5/5ml</i>	135	BESIVANCE SUS 0.6%	132
<i>banophen tab 25mg</i>	135	BETAINE POW ANHYDROU	150
BANZEL SUS 40MG/ML	49	<i>betamethasone dipropionate augmented cream 0.05%</i>	148
BANZEL TAB 200MG	49	<i>betamethasone dipropionate augmented gel 0.05%</i>	148
BANZEL TAB 400MG	49	<i>betamethasone dipropionate augmented lotion 0.05%</i>	148
BARACLUDE SOL .05MG/ML	16	<i>betamethasone dipropionate augmented oint 0.05%</i>	148
BASAGLAR INJ 100UNIT	75	<i>betamethasone dipropionate cream 0.05%</i>	148
<i>baza antifun cre 2%</i>	147	<i>betamethasone dipropionate lotion 0.05%</i>	148
BCG VACCINE INJ	111	<i>betamethasone dipropionate oint 0.05%</i>	148
<i>b-complex vitamin cap</i>	124	<i>betamethasone dipropionate cream 0.05%</i>	148
<i>b-complex vitamin tab</i>	124	<i>betamethasone dipropionate lotion 0.05%</i>	148
<i>b-complex w/ c & calcium tab</i>	124	<i>betamethasone dipropionate oint 0.05%</i>	149
<i>b-complex w/ c tab</i>	124	<i>betamethasone valerate cream 0.1% (base equivalent)</i>	149
BD ULTRAFINE/NANO PEN NEEDLES	75	<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	149
BD ULTRAFINE INSULIN SYRINGE	75	<i>betamethasone valerate oint 0.1% (base equivalent)</i>	149
BEELITH TAB	116	BETASERON INJ 0.3MG	71
<i>bee zee tab</i>	124	<i>betatemp sus 160/5ml</i>	1
<i>bekyree tab</i>	80	<i>betaxolol hcl ophth soln 0.5%</i>	133
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	33	<i>betaxolol hcl tab 10 mg</i>	41
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	33	<i>betaxolol hcl tab 20 mg</i>	41
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	33	<i>bethanechol chloride tab 10 mg</i>	102
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	33	<i>bethanechol chloride tab 25 mg</i>	102
<i>benazepril hcl tab 10 mg</i>	34	<i>bethanechol chloride tab 50 mg</i>	102
<i>benazepril hcl tab 20 mg</i>	34	<i>bethanechol chloride tab 5 mg</i>	102
<i>benazepril hcl tab 40 mg</i>	34	BETOPTIC-S SUS 0.25% OP	133
<i>benazepril hcl tab 5 mg</i>	34	BEVESPI AER 9-4.8MCG	134
BENDEKA INJ 100/4ML	23	<i>bexarotene cap 75 mg</i>	31
BENLYSTA INJ 120MG	110	BEXSERO INJ	111
BENLYSTA INJ 200MG/ML	110	<i>bicalutamide tab 50 mg</i>	27
BENLYSTA INJ 400MG	110	BICILLIN L-A INJ 1200000	21
BENZOIN TIN	147	BICILLIN L-A INJ 2400000	21
BENZOIN TIN PLAIN	147	BICILLIN L-A INJ 600000	21
<i>benzonatate cap 100 mg</i>	138		
<i>benzonatate cap 200 mg</i>	138		
<i>benzoyl peroxide-erythromycin gel 5-3%</i>			

BIKTARVY TAB	15	BREO ELLIPTA INH 100-25	145
BIOFLAVINOID POW LEMON	150	BREO ELLIPTA INH 200-25	145
BIOFLAVONOID POW CITRUS	150	<i>brewers yeast tab</i>	124
<i>biotin cap 5 mg</i>	124	<i>briellyn tab</i>	80
<i>biotin tab 300 mcg</i>	124	BRILINTA TAB 60MG	108
<i>biotin tab 5 mg</i>	124	BRILINTA TAB 90MG	108
<i>bisac-evac sup 10mg</i>	98	<i>brimonidine tartrate ophth soln 0.15%</i>	133
<i>bisacodyl suppos 10 mg</i>	98	<i>brimonidine tartrate ophth soln 0.2%</i>	133
<i>bisacodyl tab 5mg ec</i>	98	BRIVIACT INJ 50MG/5ML	49
<i>biscolax sup 10mg</i>	98	BRIVIACT SOL 10MG/ML	49
<i>bismatrol chw 262mg</i>	95	BRIVIACT TAB 100MG	49
<i>bismatrol sus 262/15ml</i>	95	BRIVIACT TAB 10MG	49
BISMUTH POW SUBGALLA	95	BRIVIACT TAB 25MG	49
BISMUTH POW SUBNITRA	150	BRIVIACT TAB 50MG	49
BISMUTH SUBC POW	150	BRIVIACT TAB 75MG	49
<i>bismuth subsalicylate chew tab 262 mg</i>	95	<i>bromfed dm syp</i>	139
<i>bisoprolol & hydrochlorothiazide tab</i> <i>10-6.25 mg</i>	41	<i>bromfenac sodium ophth soln 0.09%</i> <i>(base equiv) (once-daily)</i>	132
<i>bisoprolol & hydrochlorothiazide tab</i> <i>2.5-6.25 mg</i>	41	<i>bromocriptine mesylate cap 5 mg (base</i> <i>equivalent)</i>	60
<i>bisoprolol & hydrochlorothiazide tab</i> <i>5-6.25 mg</i>	41	<i>bromocriptine mesylate tab 2.5 mg (base</i> <i>equivalent)</i>	60
<i>bisoprolol fumarate tab 10 mg</i>	41	BROMSITE DRO 0.075%	132
<i>bisoprolol fumarate tab 5 mg</i>	41	<i>budesonide delayed release particles cap</i> <i>3 mg</i>	97
BITTERNESS POW NATURAL	119	<i>budesonide inhalation susp 0.25 mg/2ml</i>	144
BIVIGAM INJ 10%	109	<i>budesonide inhalation susp 0.5 mg/2ml</i>	144
<i>bleomycin sulfate for inj 15 unit</i>	23	BUFFER CREAM POW	119
<i>bleomycin sulfate for inj 30 unit</i>	23	<i>bumetanide inj 0.25 mg/ml</i>	45
BLEPHAMIDE OIN S.O.P.	131	<i>bumetanide tab 0.5 mg</i>	45
<i>blisovi 24 tab fe 1/20</i>	80	<i>bumetanide tab 1 mg</i>	45
<i>blisovi fe tab 1.5/30</i>	80	<i>bumetanide tab 2 mg</i>	45
BOOSTRIX INJ	111	<i>buprenorphine hcl-naloxone hcl sl film</i> <i>12-3 mg (base equiv)</i>	72
BORIC ACID GRA	150	<i>buprenorphine hcl-naloxone hcl sl film</i> <i>2-0.5 mg (base equiv)</i>	72
BORIC ACID POW	151	<i>buprenorphine hcl-naloxone hcl sl film</i> <i>4-1 mg (base equiv)</i>	72
BORTEZOMIB INJ 3.5MG	25	<i>buprenorphine hcl-naloxone hcl sl film</i> <i>8-2 mg (base equiv)</i>	72
<i>bosentan tab 125 mg</i>	48	<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>2-0.5 mg (base equiv)</i>	72
<i>bosentan tab 62.5 mg</i>	48	<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>8-2 mg (base equiv)</i>	72
BOSULIF TAB 100MG	28	<i>buprenorphine hcl sl tab 2 mg (base</i>	
BOSULIF TAB 400MG	28		
BOSULIF TAB 500MG	28		
BRAFTOVI CAP 75MG	28		
BREATHERITE MIS	138		
BREATHERITE MIS LG MASK	139		
BREATHERITE MIS MED MASK	139		
BREATHERITE MIS SM MASK	139		
BREATHERITE MIS SPACER	139		
BREATHERITE MIS W/MASK	139		

<i>equiv)</i>	72
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	72
<i>buprenorphine td patch weekly 10 mcg/hr</i>	4
<i>buprenorphine td patch weekly 15 mcg/hr</i>	4
<i>buprenorphine td patch weekly 20 mcg/hr</i>	4
<i>buprenorphine td patch weekly 5 mcg/hr</i>	4
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	4
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	73
<i>bupropion hcl tab 100 mg</i>	56
<i>bupropion hcl tab 75 mg</i>	56
<i>bupropion hcl tab er 12hr 100 mg</i>	56
<i>bupropion hcl tab er 12hr 150 mg</i>	56
<i>bupropion hcl tab er 12hr 200 mg</i>	56
<i>bupropion hcl tab er 24hr 150 mg</i>	56
<i>bupropion hcl tab er 24hr 300 mg</i>	56
<i>buspirone hcl tab 10 mg</i>	49
<i>buspirone hcl tab 15 mg</i>	49
<i>buspirone hcl tab 30 mg</i>	49
<i>buspirone hcl tab 5 mg</i>	49
<i>buspirone hcl tab 7.5 mg</i>	49
<i>butorphanol tartrate inj 1 mg/ml</i>	4
<i>butorphanol tartrate inj 2 mg/ml</i>	4
<i>BUTRANS DIS 10MCG/HR</i>	4
<i>BUTRANS DIS 15MCG/HR</i>	5
<i>BUTRANS DIS 20MCG/HR</i>	5
<i>BUTRANS DIS 5MCG/HR</i>	4
<i>BUTRANS DIS 7.5/HR</i>	4
<i>BUTTER RUM LIQ FLAVOR</i>	119
<i>BUTYLPARABEN POW</i>	119
<i>BYDUREON BC INJ 2/0.85ML</i>	75
<i>BYDUREON INJ 2MG</i>	75
<i>BYDUREON PEN INJ 2MG</i>	75
<i>BYETTA INJ 10MCG</i>	75
<i>BYETTA INJ 5MCG</i>	75
<i>BYSTOLIC TAB 10MG</i>	42
<i>BYSTOLIC TAB 2.5MG</i>	41
<i>BYSTOLIC TAB 20MG</i>	42
<i>BYSTOLIC TAB 5MG</i>	42
C	
<i>c/rosehip tr tab 1000mg</i>	124
<i>c-1000/rh tab 1000mg</i>	124

<i>c 250 tab</i>	124
<i>c-500 chw 500mg</i>	124
<i>cabergoline tab 0.5 mg</i>	89
<i>CABOMETYX TAB 20MG</i>	29
<i>CABOMETYX TAB 40MG</i>	29
<i>CABOMETYX TAB 60MG</i>	29
<i>ca citrate + tab</i>	124
<i>CAFFEINE POW ANHYDROU</i>	73
<i>CALAMINE LOT</i>	151
<i>CALAMINE LOT 8-8%</i>	151
<i>CALAMINE LOT PHENOLAT</i>	151
<i>CALAMINE POW</i>	151
<i>CALCET CHW BITES</i>	116
<i>CALCET PETIT TAB 200-250</i>	116
<i>CALCI-CHEW CHW 1250MG</i>	116
<i>calciferol dro 8000/ml</i>	124
<i>CALCI-MIX CAP 1250MG</i>	116
<i>calcipotriene cream 0.005%</i>	148
<i>calcipotriene oint 0.005%</i>	148
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	148
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	89
<i>calcitrate tab</i>	116
<i>calcitrate tab 950mg</i>	116
<i>calcitriol cap 0.25 mcg</i>	124
<i>calcitriol cap 0.5 mcg</i>	124
<i>calcitriol inj 1 mcg/ml</i>	124
<i>calcitriol oral soln 1 mcg/ml</i>	124
<i>calcium/d3 tab</i>	117
<i>calcium/d chw 500-400</i>	117
<i>calcium +d tab maximum</i>	116
<i>calcium 600 chw +d/miner</i>	116
<i>calcium 600 tab</i>	116
<i>calcium 600 tab + d</i>	116
<i>calcium 600 tab +d/mnrsls</i>	116
<i>calcium 600 tab -d</i>	116
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	91
<i>calcium acetate (phosphate binder) tab 667 mg</i>	91
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	116
<i>calcium carbonate-cholecalciferol chew tab 500 mg-100 unit</i>	116
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	116
<i>calcium carbonate-cholecalciferol tab 500</i>	

<i>mg-200 unit</i>	116	<i>camrese lo tab</i>	80
<i>calcium carbonate-cholecalciferol tab 500</i>		<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>mg-400 unit</i>	116	<i>tab 16-12.5 mg</i>	36
<i>calcium carbonate-cholecalciferol tab 600</i>		<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>mg-200 unit</i>	117	<i>tab 32-12.5 mg</i>	36
<i>calcium carbonate-cholecalciferol tab 600</i>		<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>mg-400 unit</i>	117	<i>tab 32-25 mg</i>	36
<i>calcium carbonate tab 1250 mg (500 mg</i>		<i>candesartan cilexetil tab 16 mg</i>	37
<i>elemental ca)</i>	116	<i>candesartan cilexetil tab 32 mg</i>	37
<i>calcium carbonate tab 1500 mg (600 mg</i>		<i>candesartan cilexetil tab 4 mg</i>	37
<i>elemental ca)</i>	116	<i>candesartan cilexetil tab 8 mg</i>	37
<i>calcium carbonate-vitamin d tab 500</i>		CAPCOF SYP 5-2-10MG.....	139
<i>mg-200 unit</i>	117	CA PHOS DIHY POW DIBASIC.....	116
<i>calcium carbonate-vitamin d tab 500</i>		CAPRELSA TAB 100MG	29
<i>mg-400 unit</i>	117	CAPRELSA TAB 300MG	29
<i>calcium carbonate-vitamin d tab 600</i>		<i>capsaicin cre 0.1%</i>	151
<i>mg-125 unit</i>	117	<i>capsaicin cream 0.025%</i>	151
CALCIUM CARB POW	116	CAPSAICIN LIQ 0.15%	151
CALCIUM CARB POW EX-LIGHT.....	116	CAPSAICIN POW	151
CALCIUM CARB POW HEAVY.....	116	<i>captopril & hydrochlorothiazide tab 25-15</i>	
CALCIUM CARB TAB 648MG	94	<i>mg</i>	33
<i>calcium carb-vit d w/ minerals chew tab</i>		<i>captopril & hydrochlorothiazide tab 25-25</i>	
<i>600 mg-400 unit</i>	116	<i>mg</i>	33
<i>calcium chloride inj 10%</i>	117	<i>captopril & hydrochlorothiazide tab 50-15</i>	
<i>calcium citrate-vitamin d tab 200</i>		<i>mg</i>	33
<i>mg-250 unit (elemental ca)</i>	117	<i>captopril & hydrochlorothiazide tab 50-25</i>	
<i>calcium citr tab w/vit d3</i>	117	<i>mg</i>	33
CALCIUM GLUC POW	117	<i>captopril tab 100 mg</i>	34
CALCIUM GLUC TAB 500MG.....	117	<i>captopril tab 12.5 mg</i>	34
CALCIUM LACT POW PENTAHYD	117	<i>captopril tab 25 mg</i>	34
CALCIUM LACT TAB 648MG	117	<i>captopril tab 50 mg</i>	34
<i>calcium-magnesium-zinc tab 333-133-5</i>		CARBAGLU TAB 200MG	86
<i>mg</i>	117	<i>carbamazepine cap er 12hr 100 mg</i> ...	49
<i>calcium-magnesium-zinc tab 334-134-5</i>		<i>carbamazepine cap er 12hr 200 mg</i> ...	49
<i>mg</i>	117	<i>carbamazepine cap er 12hr 300 mg</i> ...	49
CALCIUM PHOS POW TRIBASIC	117	<i>carbamazepine chew tab 100 mg</i>	50
<i>calcium plus tab 600 +d</i>	117	<i>carbamazepine susp 100 mg/5ml</i>	50
CALCIUM POW CITRATE.....	151	<i>carbamazepine tab 200 mg</i>	50
CALCIUM POW HYDROXID.....	151	<i>carbamazepine tab er 12hr 100 mg</i>	50
CALCIUM POW SACCHARA	151	<i>carbamazepine tab er 12hr 200 mg</i>	50
<i>calcium soft chw mlk choc</i>	117	<i>carbamazepine tab er 12hr 400 mg</i>	50
<i>calcium tab 500/d</i>	117	<i>carbidopa & levodopa orally</i>	
<i>calcium tab 600mg</i>	117	<i>disintegrating tab 10-100 mg</i>	60
<i>calcium tab vit d</i>	117	<i>carbidopa & levodopa orally</i>	
<i>cal-mag-zinc tab +d3</i>	124	<i>disintegrating tab 25-100 mg</i>	60
CALQUENCE CAP 100MG.....	29	<i>carbidopa & levodopa orally</i>	
<i>camila tab 0.35mg</i>	80	<i>disintegrating tab 25-250 mg</i>	60
CAMPBOR CRY	151	<i>carbidopa & levodopa tab 10-100 mg</i> ..	60

<i>carbidopa & levodopa tab 25-100 mg</i> ..60	<i>cefazolin sodium for inj 10 gm</i>.....18
<i>carbidopa & levodopa tab 25-250 mg</i> ..60	<i>cefazolin sodium for inj 1 gm</i> .....18
<i>carbidopa & levodopa tab er 25-100 mg</i>.....60	<i>cefazolin sodium for inj 20 gm</i>.....18
<i>carbidopa & levodopa tab er 50-200 mg</i>.....60	<i>cefazolin sodium for inj 500 mg</i> .....18
<i>carbidopa-levodopa-entacapone tabs</i> <i>12.5-50-200 mg</i> .....60	<i>cefazolin sodium for iv soln 1 gm</i> .....18
<i>carbidopa-levodopa-entacapone tabs</i> <i>18.75-75-200 mg</i> .....60	CEFAZOLIN SOL .....18
<i>carbidopa-levodopa-entacapone tabs</i> <i>25-100-200 mg</i> .....60	<i>cefdinir cap 300 mg</i> .....18
<i>carbidopa-levodopa-entacapone tabs</i> <i>31.25-125-200 mg</i> .....61	<i>cefdinir for susp 125 mg/5ml</i> .....18
<i>carbidopa-levodopa-entacapone tabs</i> <i>37.5-150-200 mg</i> .....61	<i>cefdinir for susp 250 mg/5ml</i> .....18
<i>carbidopa-levodopa-entacapone tabs</i> <i>50-200-200 mg</i> .....61	<i>cefepime hcl for inj 1 gm</i> .....18
CARBOGEL GEL 940 .....119	<i>cefepime hcl for inj 2 gm</i> .....18
CARBOHOL GEL 940.....119	<i>cefixime cap 400 mg</i> .....18
CARBOMER POW HOMOPOLY .....151	<i>cefixime for susp 100 mg/5ml</i> .....18
<i>carboplatin iv soln 150 mg/15ml</i>.....32	<i>cefixime for susp 200 mg/5ml</i> .....18
<i>carboplatin iv soln 450 mg/45ml</i>.....32	<i>cefotaxime sodium for inj 1 gm</i> .....18
<i>carboplatin iv soln 50 mg/5ml</i> .....32	<i>cefotaxime sodium for inj 500 mg</i> .....18
<i>carboplatin iv soln 600 mg/60ml</i>.....32	<i>cefoxitin sodium for inj 10 gm</i> .....18
CARBOXYMETHY POW SODIUM .....151	<i>cefoxitin sodium for iv soln 1 gm</i> .....18
CARIMUNE NF INJ 12GM .....109	<i>cefoxitin sodium for iv soln 2 gm</i> .....18
<i>carisoprodol tab 350 mg</i> .....71	<i>cefpodoxime proxetil for susp 100</i> <i>mg/5ml</i> .....18
<i>carteolol hcl ophth soln 1%</i> .....133	<i>cefpodoxime proxetil for susp 50 mg/5ml</i>.....18
<i>carvedilol tab 12.5 mg</i> .....42	<i>cefpodoxime proxetil tab 100 mg</i>.....18
<i>carvedilol tab 25 mg</i> .....42	<i>cefpodoxime proxetil tab 200 mg</i>.....18
<i>carvedilol tab 3.125 mg</i>.....42	<i>cefprozil for susp 125 mg/5ml</i> .....18
<i>carvedilol tab 6.25 mg</i> .....42	<i>cefprozil for susp 250 mg/5ml</i> .....18
<i>caspofungin acetate for iv soln 50 mg</i> .12	<i>cefprozil tab 250 mg</i> .....18
<i>caspofungin acetate for iv soln 70 mg</i> .12	<i>cefprozil tab 500 mg</i> .....18
<i>castellani paint</i> .....147	CEFTAZIDIME/ SOL D5W 1GM .....18
CAYSTON INH 75MG .....9	CEFTAZIDIME/ SOL D5W 2GM .....18
<i>cefaclor cap 250 mg</i>.....17	<i>ceftazidime for inj 1 gm</i>.....18
<i>cefaclor cap 500 mg</i>.....17	<i>ceftazidime for inj 2 gm</i>.....18
CEFACLOR ER TAB 500MG .....17	<i>ceftazidime for inj 6 gm</i>.....18
<i>cefaclor for susp 125 mg/5ml</i> .....17	<i>ceftriaxone sodium for inj 10 gm</i> .....18
<i>cefaclor for susp 250 mg/5ml</i> .....17	<i>ceftriaxone sodium for inj 1 gm</i> .....18
<i>cefaclor for susp 375 mg/5ml</i> .....17	<i>ceftriaxone sodium for inj 250 mg</i>.....18
<i>cefadroxil cap 500 mg</i> .....17	<i>ceftriaxone sodium for inj 2 gm</i> .....18
<i>cefadroxil for susp 250 mg/5ml</i> .....17	<i>ceftriaxone sodium for inj 500 mg</i>.....18
<i>cefadroxil for susp 500 mg/5ml</i> .....17	<i>ceftriaxone sodium for iv soln 1 gm</i>....18
<i>cefadroxil tab 1 gm</i> .....17	<i>ceftriaxone sodium for iv soln 2 gm</i>....18
CEFAZOLIN INJ 1GM/50ML.....17	<i>cefuroxime axetil tab 250 mg</i> .....18
	<i>cefuroxime axetil tab 500 mg</i> .....19
	<i>cefuroxime sodium for inj 7.5 gm</i> .....19
	<i>cefuroxime sodium for inj 750 mg</i>.....19
	<i>cefuroxime sodium for iv soln 1.5 gm</i> ..19
	<i>celecoxib cap 100 mg</i> .....3
	<i>celecoxib cap 200 mg</i> .....3

<i>celecoxib cap 400 mg</i>	3	<i>child silfed liq 15mg/5ml</i>	139
<i>celecoxib cap 50 mg</i>	3	<i>chld allergy liq 12.5/5ml</i>	135
CELONTIN CAP 300MG	50	<i>chld silapap liq 160/5ml</i>	1
<i>centamin liq</i>	124	<i>chlorhexidine gluconate soln 0.12%</i> ..	155
<i>centavite liq</i>	124	CHLOROFORM SOL.....	151
<i>century tab</i>	124	<i>chloroquine phosphate tab 250 mg</i>	13
<i>century tab mature</i>	124	<i>chloroquine phosphate tab 500 mg</i>	13
<i>cephalexin cap 250 mg</i>	19	<i>chlorothiazide tab 250 mg</i>	45
<i>cephalexin cap 500 mg</i>	19	<i>chlorothiazide tab 500 mg</i>	45
<i>cephalexin for susp 125 mg/5ml</i>	19	<i>chlor-phenir tab 4mg</i>	135
<i>cephalexin for susp 250 mg/5ml</i>	19	<i>chlorpromazine hcl tab 100 mg</i>	62
CERDELGA CAP 84MG	86	<i>chlorpromazine hcl tab 10 mg</i>	62
CEREZYME INJ 400UNIT	86	<i>chlorpromazine hcl tab 200 mg</i>	62
<i>cerovite jr chw</i>	124	<i>chlorpromazine hcl tab 25 mg</i>	62
<i>cerovite tab advanced</i>	124	<i>chlorpromazine hcl tab 50 mg</i>	62
<i>cerovite tab senior</i>	124	CHLORPROMAZ INJ 25MG/ML.....	62
<i>certavite/ tab antioxid</i>	124	CHLORPROMAZ INJ 50MG/2ML	62
CERTAVITE TAB SENIOR	124	<i>chlorthalidone tab 25 mg</i>	45
<i>cetirizine hcl chew tab 10 mg</i>	135	<i>chlorthalidone tab 50 mg</i>	45
<i>cetirizine hcl chew tab 5 mg</i>	135	CHOCOLATE CON FLAVOR.....	119
<i>cetirizine hcl oral soln 1 mg/ml (5</i> <i>mg/5ml)</i>	135	<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	125
<i>cetirizine hcl tab 10 mg</i>	135	<i>cholecalciferol cap 10 mcg (400 unit)</i> ..	125
<i>cetirizine hcl tab 5 mg</i>	135	<i>cholecalciferol cap 125 mcg (5000 unit)</i>	125
<i>cetirizine-pseudoephedrine tab er 12hr</i> <i>5-120 mg</i>	139	<i>cholecalciferol cap 250 mcg (10000 unit)</i>	125
<i>cetirizine sol 1mg/ml</i>	135	<i>cholecalciferol cap 25 mcg (1000 unit)</i>	125
<i>cetirizine sol 5mg/5ml</i>	135	<i>cholecalciferol cap 50 mcg (2000 unit)</i>	125
CETYL ALCOHO GRA.....	119	<i>cholecalciferol oral liquid 10 mcg/ml (400</i> <i>unit/ml)</i>	125
<i>cevimeline hcl cap 30 mg</i>	155	<i>cholecalciferol tab 10 mcg (400 unit)</i> ..	125
CHANTIX PAK 0.5& 1MG	73	<i>cholecalciferol tab 25 mcg (1000 unit)</i>	125
CHANTIX PAK 1MG	73	<i>cholecalciferol tab 50 mcg (2000 unit)</i>	125
CHANTIX TAB 0.5MG.....	73	CHOLESTEROL POW ACETATE.....	151
CHANTIX TAB 1MG	73	<i>cholestyramine light powder 4 gm/dose</i>	40
CHARCOAL POW	89	<i>cholestyramine light powder packets 4</i> <i>gm</i>	40
CHEMET CAP 100MG	79	<i>cholestyramine powder 4 gm/dose</i>	40
CHEMSTRIP TES UGK	89	<i>cholestyramine powder packets 4 gm</i> ..	40
<i>cheratussin syp ac</i>	139	<i>chromic chloride inj 40 mcg/10ml (4</i> <i>mcg/ml) (elemental cr)</i>	114
CHERRY CON.....	119	CHRYSIN POW	151
CHERRY SYP	119		
CHERRY SYP CONCENTR	119		
<i>chewable c chw 500mg</i>	124		
<i>chewabl vite chw childrns</i>	124		
<i>child chew/ chw extra c</i>	124		
<i>child chew chw iron</i>	124		
<i>child chew chw vitamins</i>	124		
<i>childrens chw /iron</i>	124		
CHILDRENS CHW COMPLETE	125		

ciclopirox gel 0.77%.....147
ciclopirox olamine cream 0.77% (base equiv)147
ciclopirox olamine susp 0.77% (base equiv)147
ciclopirox shampoo 1%.....147
cilostazol tab 100 mg107
cilostazol tab 50 mg107
 CILOXAN OIN 0.3% OP.....132
 CIMDUO TAB 300-300.....15
cinacalcet hcl tab 30 mg (base equiv)..79
cinacalcet hcl tab 60 mg (base equiv)..79
cinacalcet hcl tab 90 mg (base equiv)..79
 CINNAMON OIL FLAVOR.....119
 CIPRODEX SUS 0.3-0.1%155
ciprofloxacin 200 mg/100ml in d5w.....20
ciprofloxacin 400 mg/200ml in d5w.....20
ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)20
ciprofloxacin hcl ophth soln 0.3% (base equivalent)132
ciprofloxacin hcl tab 100 mg (base equiv)20
ciprofloxacin hcl tab 250 mg (base equiv)20
ciprofloxacin hcl tab 500 mg (base equiv)20
ciprofloxacin hcl tab 750 mg (base equiv)20
cisplatin inj 100 mg/100ml (1 mg/ml) .32
cisplatin inj 200 mg/200ml (1 mg/ml) .32
cisplatin inj 50 mg/50ml (1 mg/ml).....32
citalopram hydrobromide oral soln 10 mg/5ml.....57
citalopram hydrobromide tab 10 mg (base equiv)57
citalopram hydrobromide tab 20 mg (base equiv)57
citalopram hydrobromide tab 40 mg (base equiv)57
cit calc/d tab 315-250117
 CITRIC ACID GRA ANHYDROU151
 CITRIC ACID GRA MONOHYDR.....151
 CITRIC ACID POW ANHYDROU.....151
claravis cap 10mg.....145
claravis cap 20mg.....145
claravis cap 30mg.....145
claravis cap 40mg.....145

clarithromycin for susp 125 mg/5ml19
clarithromycin for susp 250 mg/5ml19
clarithromycin tab 250 mg19
clarithromycin tab 500 mg19
clarithromycin tab er 24hr 500 mg19
 CLASS ACT MIS LUBRICAT80
clindacin-p pad 1%146
clindamycin hcl cap 150 mg9
clindamycin hcl cap 300 mg10
clindamycin hcl cap 75 mg.....9
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)10
clindamycin phosphate gel 1%.....146
clindamycin phosphate in d5w iv soln 300 mg/50ml.....10
clindamycin phosphate in d5w iv soln 600 mg/50ml.....10
clindamycin phosphate in d5w iv soln 900 mg/50ml.....10
*clindamycin phosphate inj 300 mg/2ml*10
*clindamycin phosphate inj 600 mg/4ml*10
*clindamycin phosphate inj 900 mg/6ml*10
clindamycin phosphate inj 9 gm/60ml .10
clindamycin phosphate iv soln 300 mg/2ml.....10
clindamycin phosphate iv soln 900 mg/6ml.....10
clindamycin phosphate lotion 1%146
clindamycin phosphate soln 1%146
clindamycin phosphate swab 1%.....146
clindamycin phosphate vaginal cream 2%103
 CLINDMYC/NAC INJ 300/50ML.....10
 CLINDMYC/NAC INJ 600/50ML.....10
 CLINDMYC/NAC INJ 900/50ML.....10
 CLINIMIX INJ 4.25/D10114
 CLINIMIX INJ 4.25/D25114
 CLINIMIX INJ 4.25/D5W114
 CLINIMIX INJ 5%/D15W114
 CLINIMIX INJ 5%/D20W114
 CLINIMIX INJ 5%/D25W114
 CLINOLIPID EMU 20%114
clobazam suspension 2.5 mg/ml50
clobazam tab 10 mg50
clobazam tab 20 mg50
clomipramine hcl cap 25 mg.....57
clomipramine hcl cap 50 mg.....57
clomipramine hcl cap 75 mg.....57

<i>clonazepam orally disintegrating tab 0.125 mg</i>	50	<i>clozapine tab 25 mg</i>	62
<i>clonazepam orally disintegrating tab 0.25 mg</i>	50	<i>clozapine tab 50 mg</i>	62
<i>clonazepam orally disintegrating tab 0.5 mg</i>	50	CL PRENATAL TAB 28-0.8MG	125
<i>clonazepam orally disintegrating tab 1 mg</i>	50	COAL TAR SOL 20%	151
<i>clonazepam orally disintegrating tab 2 mg</i>	50	COARTEM TAB 20-120MG	13
<i>clonazepam tab 0.5 mg</i>	50	COCOA BUTTER MIS.....	119
<i>clonazepam tab 1 mg</i>	50	COCONUT OIL	151
<i>clonazepam tab 2 mg</i>	50	CODAR AR LIQ 2-8/5ML.....	139
<i>clonidine hcl tab 0.1 mg</i>	46	<i>cod liver cap</i>	125
<i>clonidine hcl tab 0.2 mg</i>	46	<i>cod liver oil cap</i>	125
<i>clonidine hcl tab 0.3 mg</i>	46	COD LIVER OIL OIL.....	125
<i>clonidine td patch weekly 0.1 mg/24hr</i>	46	<i>coenzyme q10 cap 100mg</i>	119
<i>clonidine td patch weekly 0.2 mg/24hr</i>	46	<i>coenzyme q10 cap 100 mg</i>	119
<i>clonidine td patch weekly 0.3 mg/24hr</i>	46	<i>coenzyme q10 cap 10 mg</i>	119
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	108	<i>coenzyme q10 cap 150 mg</i>	119
<i>clorazepate dipotassium tab 15 mg</i>	50	<i>coenzyme q10 cap 30mg</i>	119
<i>clorazepate dipotassium tab 3.75 mg</i> ..	50	<i>coenzyme q10 cap 30 mg</i>	119
<i>clorazepate dipotassium tab 7.5 mg</i> ...	50	<i>coenzyme q10 cap 50mg</i>	119
CLORPACTIN POW WCS-90	151	<i>coenzyme q10 cap 50 mg</i>	119
<i>clotrimazole cre 1%</i>	147	<i>coenzyme q10 cap 60 mg</i>	119
<i>clotrimazole cre 1% vag</i>	103	<i>coenzyme q10 cap 75 mg</i>	119
<i>clotrimazole cre 3 day</i>	103	COENZYME Q10 CHW 60MG	119
<i>clotrimazole cream 1%</i>	147	COENZYME Q10 LIQ 30MG/5ML	119
<i>clotrimazole soln 1%</i>	147	COENZYME Q10 POW	151
<i>clotrimazole troche 10 mg</i>	155	COENZYME Q10 TAB 200MG.....	120
<i>clotrimazole vaginal cream 1%</i>	103	COENZYME Q10 TAB 25MG	119
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	147	<i>coenzyme q10 tab 60 mg</i>	119
CLOVE FLAVOR OIL	119	CO-ENZYME WAF Q10/E	119
CLOVE OIL.....	151	<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1
<i>clozapine orally disintegrating tab 100 mg</i>	62	COLCRYS TAB 0.6MG	1
<i>clozapine orally disintegrating tab 12.5 mg</i>	62	<i>cold/allergy elx children</i>	139
<i>clozapine orally disintegrating tab 150 mg</i>	62	<i>colesevelam hcl packet for susp 3.75 gm</i>	40
<i>clozapine orally disintegrating tab 200 mg</i>	62	<i>colesevelam hcl tab 625 mg</i>	40
<i>clozapine orally disintegrating tab 25 mg</i>	62	<i>colestipol hcl granule packets 5 gm</i>	40
<i>clozapine tab 100 mg</i>	62	<i>colestipol hcl granules 5 gm</i>	40
<i>clozapine tab 200 mg</i>	62	<i>colestipol hcl tab 1 gm</i>	40
		<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	10
		COLLODION LIQ	120
		COLLODION LIQ FLEXIBLE	120
		COLOR CONDOM MIS + LUBE.....	80
		COMBIGAN SOL 0.2/0.5%.....	133
		COMBIVENT AER 20-100.....	134
		COMETRIQ KIT 100MG	29
		COMETRIQ KIT 140MG	29
		COMETRIQ KIT 60MG	29

COMPACT SPAC MIS CHAMBER	139	.....	100
COMPACT SPAC MIS LG MASK	139	<i>cromolyn sodium soln nebu 20 mg/2ml</i>	
COMPACT SPAC MIS MD MASK	139	.....	143
COMPACT SPAC MIS SM MASK.....	139	CROTON OIL	151
<i>comp allergy cap 25mg</i>	135	<i>cryselle-28 tab 28 tabs</i>	80
<i>compete tab</i>	125	<i>cupric chloride inj 0.4 mg/ml</i>	114
COMPLERA TAB	15	<i>cvs cough dm sus 30mg/5ml</i>	139
<i>complete kit lice</i>	154	<i>cyanocobalamin inj 1000 mcg/ml</i>	125
<i>complete tab</i>	125	<i>cyanocobalamin tab 1000 mcg</i>	125
<i>complete tab senior</i>	125	<i>cyanocobalamin tab 100 mcg</i>	125
<i>compro sup 25mg</i>	95	<i>cyanocobalamin tab 250 mcg</i>	125
CONDOMS MIS.....	80	<i>cyanocobalamin tab 500 mcg</i>	125
CONDOMS MIS LUBRICAT	80	<i>cyanocobalamin tab er 1000 mcg</i>	125
<i>constulose sol 10gm/15</i>	98	<i>cyanocobalamin tab er 2000 mcg</i>	125
COPIKTRA CAP 15MG	29	<i>cyclafem tab 1/35</i>	80
COPIKTRA CAP 25MG	29	<i>cyclafem tab 7/7/7</i>	80
COPPER SULF CRY	114	<i>cyclobenzaprine hcl tab 10 mg</i>	71
COQ-10 CAP 100MG TR	120	<i>cyclobenzaprine hcl tab 5 mg</i>	71
CORLANOR TAB 5MG.....	46	<i>cyclophosphamide cap 25 mg</i>	23
CORLANOR TAB 7.5MG.....	46	<i>cyclophosphamide cap 50 mg</i>	23
CORN STARCH POW	151	<i>cyclophosphamide for inj 1 gm</i>	23
<i>cortisone acetate tab 25 mg</i>	88	<i>cyclophosphamide for inj 2 gm</i>	23
COTELLIC TAB 20MG.....	29	<i>cyclophosphamide for inj 500 mg</i>	23
COTTONSEED OIL.....	151	<i>cycloserine cap 250 mg</i>	16
<i>cough cont liq dm max</i>	139	<i>cyclosporine cap 100 mg</i>	110
<i>cough dm sus 30mg/5ml</i>	139	<i>cyclosporine cap 25 mg</i>	110
<i>cough syp 100/5ml</i>	139	<i>cyclosporine iv soln 50 mg/ml</i>	110
COUMADIN TAB 10MG	103	<i>cyclosporine modified cap 100 mg</i>	110
COUMADIN TAB 1MG.....	103	<i>cyclosporine modified cap 25 mg</i>	110
COUMADIN TAB 2.5MG.....	103	<i>cyclosporine modified cap 50 mg</i>	110
COUMADIN TAB 2MG.....	103	<i>cyclosporine modified oral soln 100</i>	
COUMADIN TAB 3MG.....	103	<i>mg/ml</i>	110
COUMADIN TAB 4MG.....	103	<i>cyproheptadine hcl syrup 2 mg/5ml</i> ...	136
COUMADIN TAB 5MG.....	103	<i>cyproheptadine hcl tab 4 mg</i>	136
COUMADIN TAB 6MG.....	103	CYSTADANE POW	86
COUMADIN TAB 7.5MG.....	103	CYSTAGON CAP 150MG	86
CREATINE POW MONOHYDR.....	151	CYSTAGON CAP 50MG	86
CREON CAP 12000UNT	101	CYSTARAN SOL 0.44%	134
CREON CAP 24000UNT	101	<i>cytarabine inj 20 mg/ml</i>	24
CREON CAP 3000UNIT	101	D	
CREON CAP 36000UNT	101	D10W/NACL INJ 0.2%	114
CREON CAP 6000UNIT	101	<i>d3 cap 1000unit</i>	125
CRIXIVAN CAP 200MG.....	13	<i>d3 super str cap 2000unit</i>	125
CRIXIVAN CAP 400MG.....	13	<i>d 400 tab 400unit</i>	125
<i>cromolyn sodium nasal aerosol soln 5.2</i>		D5W/LYTES INJ #48	114
<i>mg/act (4%)</i>	139	D5W/NACL INJ 0.3%.....	114
<i>cromolyn sodium ophth soln 4%</i>	133	<i>dacarbazine for inj 100 mg</i>	23
<i>cromolyn sodium oral conc 100 mg/5ml</i>		<i>daily multi tab</i>	125

<i>daily-vite/ tab iron</i>	125	<i>0.15-0.02/0.01 mg(21/5)</i>	80
<i>daily-vite tab</i>	125	<i>desogest-ethin est tab</i>	
<i>daily vit tab</i>	125	<i>0.1-0.025/0.125-0.025/0.15-0.025mg-m</i>	
<i>dalfampridine tab er 12hr 10 mg</i>	71	<i>g</i>	80
DALIRESP TAB 250MCG	143	<i>desogestrel & ethinyl estradiol tab 0.15</i>	
DALIRESP TAB 500MCG	143	<i>mg-30 mcg</i>	80
<i>danazol cap 100 mg</i>	86	<i>desvenlafaxine succinate tab er 24hr 100</i>	
<i>danazol cap 200 mg</i>	86	<i>mg (base equiv)</i>	57
<i>danazol cap 50 mg</i>	86	<i>desvenlafaxine succinate tab er 24hr 25</i>	
<i>dantrolene sodium cap 100 mg</i>	72	<i>mg (base equiv)</i>	57
<i>dantrolene sodium cap 25 mg</i>	72	<i>desvenlafaxine succinate tab er 24hr 50</i>	
<i>dantrolene sodium cap 50 mg</i>	72	<i>mg (base equiv)</i>	57
<i>dapsone tab 100 mg</i>	10	DEXAMETHASON CON 1MG/ML.....	88
<i>dapsone tab 25 mg</i>	10	<i>dexamethasone elixir 0.5 mg/5ml</i>	88
DAPTACEL INJ	111	<i>dexamethasone sodium phosphate inj</i>	
<i>daptomycin for iv soln 350 mg</i>	10	<i>100 mg/10ml</i>	88
<i>daptomycin for iv soln 500 mg</i>	10	<i>dexamethasone sodium phosphate inj 10</i>	
DAPTOMYCIN SOL 350MG.....	10	<i>mg/ml</i>	88
<i>dasetta tab 1/35</i>	80	<i>dexamethasone sodium phosphate inj</i>	
<i>dasetta tab 7/7/7</i>	80	<i>120 mg/30ml</i>	88
DAURISMO TAB 100MG	25	<i>dexamethasone sodium phosphate inj 20</i>	
DAURISMO TAB 25MG	25	<i>mg/5ml</i>	88
<i>dayhist alrg tab 12 hour</i>	136	<i>dexamethasone sodium phosphate inj 4</i>	
<i>deblitane tab 0.35mg</i>	80	<i>mg/ml</i>	88
<i>decongestant tab 120mg er</i>	139	<i>dexamethasone sodium phosphate ophth</i>	
DELESTROGEN INJ 10MG/ML	87	<i>soln 0.1%</i>	132
DELSTRIGO TAB.....	15	<i>dexamethasone sod phosphate</i>	
DELSYM SUS 30MG/5ML	139	<i>preservative free inj 10 mg/ml</i>	88
<i>delyla tab 0.1-0.02</i>	80	<i>dexamethasone soln 0.5 mg/5ml</i>	88
DELZICOL CAP 400MG.....	97	<i>dexamethasone tab 0.5 mg</i>	88
DEMSEER CAP 250MG.....	46	<i>dexamethasone tab 0.75 mg</i>	88
DEPEN TITRA TAB 250MG	79	<i>dexamethasone tab 1.5 mg</i>	88
DEPO-PROVERA INJ 400/ML.....	27	<i>dexamethasone tab 1 mg</i>	88
DESCOVY TAB 200/25.....	15	<i>dexamethasone tab 2 mg</i>	88
<i>desipramine hcl tab 100 mg</i>	57	<i>dexamethasone tab 4 mg</i>	88
<i>desipramine hcl tab 10 mg</i>	57	<i>dexamethasone tab 6 mg</i>	88
<i>desipramine hcl tab 150 mg</i>	57	DEXILANT CAP 30MG DR	101
<i>desipramine hcl tab 25 mg</i>	57	DEXILANT CAP 60MG DR	101
<i>desipramine hcl tab 50 mg</i>	57	<i>dexmethylphenidate hcl tab 10 mg</i>	67
<i>desipramine hcl tab 75 mg</i>	57	<i>dexmethylphenidate hcl tab 2.5 mg</i>	67
<i>desmopressin acetate inj 4 mcg/ml</i>	93	<i>dexmethylphenidate hcl tab 5 mg</i>	67
<i>desmopressin acetate nasal spray soln</i>		<i>dextrazoxane hcl for inj 500 mg (base</i>	
<i>0.01%</i>	93	<i>equivalent)</i>	32
<i>desmopressin acetate nasal spray soln</i>		<i>dextromethorphan-guaifenesin syrup</i>	
<i>0.01% (refrigerated)</i>	93	<i>10-100 mg/5ml</i>	139
<i>desmopressin acetate tab 0.1 mg</i>	93	<i>dextromethorphan polistirex extended</i>	
<i>desmopressin acetate tab 0.2 mg</i>	93	<i>release susp 30 mg/5ml</i>	139
<i>desogest-eth estrad & eth estrad tab</i>		<i>dextrose 10% w/ sodium chloride 0.45%</i>	

.....	115
dextrose 2.5% w/ sodium chloride	0.45%.....
dextrose 5% in lactated ringers	.....
dextrose 5% w/ sodium chloride 0.2%	.....
dextrose 5% w/ sodium chloride 0.225%	.....
dextrose 5% w/ sodium chloride 0.33%	.....
dextrose 5% w/ sodium chloride 0.45%	.....
dextrose 5% w/ sodium chloride 0.9%	.....
DEXTROSE GRA ANHYDROU	.....
dextrose inj 10%	.....
dextrose inj 5%	.....
dextrose inj 50%	.....
dextrose inj 70%	.....
diabetic tus liq 100/5ml	.....
diabetic tus liq dm	.....
diabetic tus liq max st	.....
DIABETISWEET POW	.....
DIALYVIT 800 TAB ZINC 15	.....
dialyvite d cap 5000unit	.....
dialyvite tab 800	.....
dialyvite tab 800/d	.....
DIALYVITE TAB 800/ZINC	.....
diarrhea rel sus 262/15ml	.....
DIASCREEN 10 MIS	.....
DIASCREEN 3 MIS	.....
DIASCREEN 5 MIS	.....
DIASCREEN 6 MIS	.....
DIASCREEN 7 MIS	.....
DIASCREEN 8 MIS	.....
DIASCREEN 9 MIS	.....
DIASCREEN MIS 1G	.....
DIASCREEN MIS 2GK	.....
DIASCREEN MIS 4OBL	.....
DIASTAT ACDL GEL 12.5-20	.....
DIASTAT ACDL GEL 5-10MG	.....
DIASTAT PED GEL 2.5M GEL	.....
DIASTIX TES STRIPS	.....
diazepam con 5mg/ml	.....
diazepam inj 5 mg/ml	.....
diazepam oral soln 1 mg/ml	.....
diazepam rectal gel delivery system 10 mg	.....

diazepam rectal gel delivery system 2.5 mg	.....
diazepam rectal gel delivery system 20 mg	.....
diazepam tab 10 mg	.....
diazepam tab 2 mg	.....
diazepam tab 5 mg	.....
diclofenac potassium tab 50 mg	.....
diclofenac sodium gel 1%	.....
diclofenac sodium ophth soln 0.1%	.....
diclofenac sodium tab delayed release 25 mg	.....
diclofenac sodium tab delayed release 50 mg	.....
diclofenac sodium tab delayed release 75 mg	.....
diclofenac sodium tab er 24hr 100 mg	.....
dicloxacillin sodium cap 250 mg	.....
dicloxacillin sodium cap 500 mg	.....
dicyclomine hcl cap 10 mg	.....
dicyclomine hcl oral soln 10 mg/5ml	.....
dicyclomine hcl tab 20 mg	.....
didanosine delayed release capsule 200 mg	.....
didanosine delayed release capsule 250 mg	.....
didanosine delayed release capsule 400 mg	.....
diethylpropion hcl tab 25 mg	.....
diethylpropion hcl tab er 24hr 75 mg	.....
DIFICID TAB 200MG	.....
diflunisal tab 500 mg	.....
digitek tab 0.125mg	.....
digitek tab 0.25mg	.....
digoxin inj 0.25 mg/ml	.....
digoxin oral soln 0.05 mg/ml	.....
digoxin tab 125 mcg (0.125 mg)	.....
digoxin tab 250 mcg (0.25 mg)	.....
dihydroergotamine mesylate inj 1 mg/ml	.....
dihydroergotamine mesylate nasal spray 4 mg/ml	.....
DILANTIN-125 SUS 125/5ML	.....
DILANTIN CAP 100MG	.....
DILANTIN CAP 30MG	.....
DILANTIN CHW 50MG	.....
diltiazem hcl cap er 12hr 120 mg	.....
diltiazem hcl cap er 12hr 60 mg	.....

<i>diltiazem hcl cap er 12hr 90 mg</i>	43	<i>disopyramide phosphate cap 100 mg</i> ..	38
<i>diltiazem hcl cap er 24hr 120 mg</i>	43	<i>disopyramide phosphate cap 150 mg</i> ..	38
<i>diltiazem hcl cap er 24hr 180 mg</i>	43	DISTILLED LIQ WATER	120
<i>diltiazem hcl cap er 24hr 240 mg</i>	43	<i>disulfiram tab 250 mg</i>	73
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>disulfiram tab 500 mg</i>	73
<i>120 mg</i>	43	<i>divalproex sodium cap delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>sprinkle 125 mg</i>	51
<i>180 mg</i>	43	<i>divalproex sodium tab delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>125 mg</i>	51
<i>240 mg</i>	43	<i>divalproex sodium tab delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>250 mg</i>	51
<i>300 mg</i>	43	<i>divalproex sodium tab delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>500 mg</i>	51
<i>360 mg</i>	43	<i>divalproex sodium tab er 24 hr 250 mg</i>	
<i>diltiazem hcl extended release beads cap</i>		.....	51
<i>er 24hr 120 mg</i>	43	<i>divalproex sodium tab er 24 hr 500 mg</i>	
<i>diltiazem hcl extended release beads cap</i>		.....	51
<i>er 24hr 180 mg</i>	43	<i>docetaxel for inj conc 160 mg/8ml (20</i>	
<i>diltiazem hcl extended release beads cap</i>		<i>mg/ml)</i>	24
<i>er 24hr 240 mg</i>	43	<i>docetaxel for inj conc 20 mg/ml</i>	24
<i>diltiazem hcl extended release beads cap</i>		<i>docetaxel for inj conc 80 mg/4ml (20</i>	
<i>er 24hr 300 mg</i>	43	<i>mg/ml)</i>	24
<i>diltiazem hcl extended release beads cap</i>		DOCETAXEL INJ 160/16ML.....	25
<i>er 24hr 360 mg</i>	43	DOCETAXEL INJ 160/8ML	25
<i>diltiazem hcl extended release beads cap</i>		DOCETAXEL INJ 200/10.....	25
<i>er 24hr 420 mg</i>	43	DOCETAXEL INJ 20MG/2ML.....	24
<i>diltiazem hcl iv soln 125 mg/25ml (5</i>		DOCETAXEL INJ 80MG/4ML.....	24
<i>mg/ml)</i>	44	DOCETAXEL INJ 80MG/8ML.....	25
<i>diltiazem hcl iv soln 25 mg/5ml (5</i>		<i>docetaxel soln for iv infusion 160</i>	
<i>mg/ml)</i>	43	<i>mg/16ml</i>	25
<i>diltiazem hcl iv soln 50 mg/10ml (5</i>		<i>docetaxel soln for iv infusion 20 mg/2ml</i>	
<i>mg/ml)</i>	43	.....	25
<i>diltiazem hcl tab 120 mg</i>	44	<i>docetaxel soln for iv infusion 80 mg/8ml</i>	
<i>diltiazem hcl tab 30 mg</i>	44	.....	25
<i>diltiazem hcl tab 60 mg</i>	44	<i>docqlace cap 100mg</i>	98
<i>diltiazem hcl tab 90 mg</i>	44	<i>docu liq 50mg/5ml</i>	98
DIP/TET PED INJ 25-5LFU	111	<i>docusate cal cap 240mg</i>	98
<i>diphenhist cap 25mg</i>	136	<i>docusate sod cap 100mg</i>	98
<i>diphenhist liq 12.5/5ml</i>	136	<i>docusate sodium cap 100 mg</i>	98
<i>diphenhist tab 25mg</i>	136	<i>docusate sodium liquid 150 mg/15ml</i> ..	98
<i>diphenhydramine hcl cap 25 mg</i>	136	<i>docusate sod liq 50mg/5ml</i>	98
<i>diphenhydramine hcl cap 50 mg</i>	136	<i>docusil cap 100mg</i>	98
<i>diphenhydramine hcl inj 50 mg/ml</i>	136	<i>docu soft cap 100mg</i>	98
<i>diphenhydramine hcl tab 25 mg</i>	136	DOCUSOL MINI ENE.....	98
<i>diphenoxylate w/ atropine liq 2.5-0.025</i>		<i>dofetilide cap 125 mcg (0.125 mg)</i>	38
<i>mg/5ml</i>	100	<i>dofetilide cap 250 mcg (0.25 mg)</i>	38
<i>diphenoxylate w/ atropine tab 2.5-0.025</i>		<i>dofetilide cap 500 mcg (0.5 mg)</i>	38
<i>mg</i>	100	<i>dok plus tab 8.6-50mg</i>	98

<i>donepezil hydrochloride orally</i>		<i>tab 3-0.03-0.451 mg</i>	80
<i>disintegrating tab 10 mg</i>	55	DROXIA CAP 200MG	107
<i>donepezil hydrochloride orally</i>		DROXIA CAP 300MG	107
<i>disintegrating tab 5 mg</i>	55	DROXIA CAP 400MG	107
<i>donepezil hydrochloride tab 10 mg</i>	55	<i>ducodyl tab 5mg ec</i>	98
<i>donepezil hydrochloride tab 5 mg</i>	55	<i>duloxetine hcl enteric coated pellets cap</i>	
<i>dorzolamide hcl ophth soln 2%</i>	133	<i>20 mg (base eq)</i>	57
<i>dorzolamide hcl-timolol maleate ophth</i>		<i>duloxetine hcl enteric coated pellets cap</i>	
<i>soln 22.3-6.8 mg/ml</i>	133	<i>30 mg (base eq)</i>	57
<i>double antib oin</i>	146	<i>duloxetine hcl enteric coated pellets cap</i>	
DOVATO TAB 50-300MG	15	<i>60 mg (base eq)</i>	57
<i>doxazosin mesylate tab 1 mg</i>	35	DUOFER TAB 28MG	105
<i>doxazosin mesylate tab 2 mg</i>	35	DUREX EXTRA MIS SENSITIV	80
<i>doxazosin mesylate tab 4 mg</i>	35	DUREX MIS REALFEEL	80
<i>doxazosin mesylate tab 8 mg</i>	35	DUREZOL EMU 0.05%	132
<i>doxepin hcl cap 100 mg</i>	57	<i>dutasteride cap 0.5 mg</i>	102
<i>doxepin hcl cap 10 mg</i>	57	<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i>	
<i>doxepin hcl cap 150 mg</i>	57	<i>mg</i>	102
<i>doxepin hcl cap 25 mg</i>	57	D-VITAMIN E POW SUCCINAT	151
<i>doxepin hcl cap 50 mg</i>	57	D-XYLOSE POW	89
<i>doxepin hcl cap 75 mg</i>	57	E	
<i>doxepin hcl conc 10 mg/ml</i>	57	<i>e-400 cap 400unit</i>	125
<i>doxorubicin hcl for inj 50 mg</i>	23	EASIVENT MIS	139
<i>doxorubicin hcl inj 2 mg/ml</i>	23	EASIVENT MIS MASK LG	139
<i>doxorubicin hcl liposomal inj (for iv</i>		EASIVENT MIS MASK MED	139
<i>infusion) 2 mg/ml</i>	23	EASIVENT MIS MASK SM	139
<i>doxy 100 inj 100mg</i>	22	<i>ecee plus tab</i>	125
<i>doxycycline hyclate cap 100 mg</i>	22	<i>ecpirin tab 325mg ec</i>	1
<i>doxycycline hyclate cap 50 mg</i>	22	<i>ed-apap liq 80mg/2.5</i>	1
<i>doxycycline hyclate for inj 100 mg</i>	22	<i>ed chlorped syp jr</i>	136
<i>doxycycline hyclate tab 100 mg</i>	22	EDURANT TAB 25MG	13
<i>doxycycline hyclate tab 20 mg</i>	22	<i>efavirenz cap 200 mg</i>	13
<i>doxycycline monohydrate cap 100 mg</i>	22	<i>efavirenz cap 50 mg</i>	13
<i>doxycycline monohydrate cap 50 mg</i>	22	<i>efavirenz tab 600 mg</i>	13
<i>doxycycline monohydrate tab 100 mg</i>	22	ELDERTONIC LIQ	126
<i>doxycycline monohydrate tab 150 mg</i>	22	<i>eletriptan hydrobromide tab 20 mg (base</i>	
<i>doxycycline monohydrate tab 50 mg</i>	22	<i>equivalent)</i>	69
<i>doxycycline monohydrate tab 75 mg</i>	22	<i>eletriptan hydrobromide tab 40 mg (base</i>	
<i>dronabinol cap 10 mg</i>	95	<i>equivalent)</i>	69
<i>dronabinol cap 2.5 mg</i>	95	ELEXA MIS STIMULAT	80
<i>dronabinol cap 5 mg</i>	95	ELEXA NATURL MIS FEEL	80
<i>drospirenone-ethinyl estradiol tab 3-0.02</i>		ELEXA ULTRA MIS SENSITIV	81
<i>mg</i>	80	ELIQUIS ST P TAB 5MG	104
<i>drospirenone-ethinyl estradiol tab 3-0.03</i>		ELIQUIS TAB 2.5MG	104
<i>mg</i>	80	ELIQUIS TAB 5MG	104
<i>drospirenone-ethinyl estrad-levomefolate</i>		ELLA TAB 30MG	81
<i>tab 3-0.02-0.451 mg</i>	80	EMCYT CAP 140MG	23
<i>drospirenone-ethinyl estrad-levomefolate</i>		EMEND SUS 125MG	95

EMGALITY INJ 120MG/ML	69	<i>mg/ml)</i>	23
<i>emoquette tab</i>	81	<i>epirubicin hcl iv soln 50 mg/25ml (2</i>	
EMSAM DIS 12MG/24H.....	57	<i>mg/ml)</i>	23
EMSAM DIS 6MG/24HR	57	<i>epitol tab 200mg</i>	51
EMSAM DIS 9MG/24HR	57	EPIVIR HBV SOL 5MG/ML.....	16
EMTRIVA CAP 200MG	13	<i>eplerenone tab 25 mg</i>	35
EMTRIVA SOL 10MG/ML.....	13	<i>eplerenone tab 50 mg</i>	35
EMVERM CHW 100MG	10	<i>eprosartan mesylate tab 600 mg</i>	37
<i>enalapril maleate & hydrochlorothiazide</i>		<i>epsom salt gra</i>	98
<i>tab 10-25 mg</i>	33	EPSOM SALT POW	98
<i>enalapril maleate & hydrochlorothiazide</i>		<i>eq cough dm sus 30mg/5ml</i>	139
<i>tab 5-12.5 mg</i>	33	<i>eql coq10 cap 100mg</i>	120
<i>enalapril maleate tab 10 mg</i>	34	<i>eql menstrua tab complete</i>	1
<i>enalapril maleate tab 2.5 mg</i>	34	<i>eql menstrua tab relief</i>	1
<i>enalapril maleate tab 20 mg</i>	34	<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	
<i>enalapril maleate tab 5 mg</i>	34	.....	126
ENDARI POW 5GM	107	<i>ergocalciferol soln 200 mcg/ml (8000</i>	
ENEMEEZ MINI ENE	98	<i>unit/ml)</i>	126
ENEMEEZ PLUS ENE 20-283	98	<i>ergotamine w/ caffeine tab 1-100 mg</i> ..	69
ENGERIX-B INJ 10/0.5ML.....	111	ERIVEDGE CAP 150MG	25
ENGERIX-B INJ 20MCG/ML.....	111	ERLEADA TAB 60MG.....	27
<i>enoxaparin sodium inj 100 mg/ml</i>	104	<i>erlotinib hcl tab 100 mg (base</i>	
<i>enoxaparin sodium inj 120 mg/0.8ml</i> ..	104	<i>equivalent)</i>	29
<i>enoxaparin sodium inj 150 mg/ml</i>	104	<i>erlotinib hcl tab 150 mg (base</i>	
<i>enoxaparin sodium inj 300 mg/3ml</i> ...	104	<i>equivalent)</i>	29
<i>enoxaparin sodium inj 30 mg/0.3ml</i> ..	104	<i>erlotinib hcl tab 25 mg (base equivalent)</i>	
<i>enoxaparin sodium inj 40 mg/0.4ml</i> ..	104	.....	29
<i>enoxaparin sodium inj 60 mg/0.6ml</i> ..	104	<i>errin tab 0.35mg</i>	81
<i>enoxaparin sodium inj 80 mg/0.8ml</i> ..	104	<i>ertapenem sodium for inj 1 gm (base</i>	
<i>enpresse-28 tab</i>	81	<i>equivalent)</i>	10
<i>enskyce tab</i>	81	<i>ery-tab tab 250mg ec</i>	19
ENSTILAR AER.....	149	<i>ery-tab tab 333mg ec</i>	19
<i>entacapone tab 200 mg</i>	61	<i>ery-tab tab 500mg ec</i>	19
<i>entecavir tab 0.5 mg</i>	16	ERYTHROCIN INJ 500MG	19
<i>entecavir tab 1 mg</i>	16	<i>erythrocin tab 250mg</i>	19
ENTRESTO TAB 24-26MG.....	36	<i>erythromycin ethylsuccinate tab 400 mg</i>	
ENTRESTO TAB 49-51MG.....	36	.....	19
ENTRESTO TAB 97-103MG	36	<i>erythromycin gel 2%</i>	146
<i>enulose sol 10gm/15</i>	98	<i>erythromycin ophth oint 5 mg/gm</i>	132
EPCLUSA TAB 400-100	16	<i>erythromycin pads 2%</i>	146
EPIDIOLEX SOL 100MG/ML	51	<i>erythromycin soln 2%</i>	146
<i>epinephrine solution auto-injector 0.15</i>		<i>erythromycin tab 250 mg</i>	19
<i>mg/0.15ml (1:1000)</i>	143	<i>erythromycin tab 500 mg</i>	19
<i>epinephrine solution auto-injector 0.15</i>		<i>erythromycin tab delayed release 250</i>	
<i>mg/0.3ml (1:2000)</i>	143	<i>mg</i>	19
<i>epinephrine solution auto-injector 0.3</i>		<i>erythromycin tab delayed release 333</i>	
<i>mg/0.3ml (1:1000)</i>	143	<i>mg</i>	19
<i>epirubicin hcl iv soln 200 mg/100ml (2</i>		<i>erythromycin tab delayed release 500</i>	

<i>mg</i>	20	<i>ethosuximide soln 250 mg/5ml</i>	51
<i>erythromycin w/ delayed release</i>		ETHOXY ETHNL LIQ REAGENT.....	151
<i>particles cap 250 mg</i>	20	ETHYL ALCOHO SOL 100%.....	120
ESBRIET CAP 267MG.....	143	ETHYL ALCOHO SOL 95%.....	151
ESBRIET TAB 267MG.....	143	ETHYL ALCOHO SOL 95% USP	151
ESBRIET TAB 801MG.....	143	ETHYL ALCOHO SOL SDA 95%.....	151
<i>escitalopram oxalate soln 5 mg/5ml</i>		ETHYL OLEATE LIQ.....	151
<i>(base equiv)</i>	58	<i>ethynodiol diacetate & ethinyl estradiol</i>	
<i>escitalopram oxalate tab 10 mg (base</i>		<i>tab 1 mg-35 mcg</i>	81
<i>equiv)</i>	58	<i>ethynodiol diacetate & ethinyl estradiol</i>	
<i>escitalopram oxalate tab 20 mg (base</i>		<i>tab 1 mg-50 mcg</i>	81
<i>equiv)</i>	58	<i>etodolac cap 200 mg</i>	3
<i>escitalopram oxalate tab 5 mg (base</i>		<i>etodolac cap 300 mg</i>	3
<i>equiv)</i>	58	<i>etodolac tab 400 mg</i>	3
<i>esomeprazole magnesium cap delayed</i>		<i>etodolac tab 500 mg</i>	3
<i>release 20 mg (base eq)</i>	101	<i>etodolac tab er 24hr 400 mg</i>	3
<i>esomeprazole magnesium cap delayed</i>		<i>etodolac tab er 24hr 500 mg</i>	3
<i>release 40 mg (base eq)</i>	101	<i>etodolac tab er 24hr 600 mg</i>	3
<i>esomeprazole sodium for intravenous</i>		<i>etoposide inj 100 mg/5ml (20 mg/ml)</i> .	32
<i>soln 20 mg (base equiv)</i>	101	<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	
<i>esomeprazole sodium for intravenous</i>		.....	32
<i>soln 40 mg (base equiv)</i>	101	EUGENOL SOL	151
<i>essentl one tab daily</i>	126	EVOTAZ TAB 300-150	15
<i>ester-c tab 500mg</i>	126	<i>exemestane tab 25 mg</i>	27
<i>estradiol tab 0.5 mg</i>	87	<i>extra action syp 100-10/5</i>	139
<i>estradiol tab 1 mg</i>	87	EXTRA SENSIT MIS SPERMICI	81
<i>estradiol tab 2 mg</i>	87	<i>eye allergy sol relief</i>	133
<i>estradiol td patch weekly 0.025 mg/24hr</i>		<i>ezetimibe-simvastatin tab 10-10 mg</i> ...	40
.....	87	<i>ezetimibe-simvastatin tab 10-20 mg</i> ...	40
<i>estradiol td patch weekly 0.0375</i>		<i>ezetimibe-simvastatin tab 10-40 mg</i> ...	40
<i>mg/24hr (37.5 mcg/24hr)</i>	87	<i>ezetimibe-simvastatin tab 10-80 mg</i> ...	40
<i>estradiol td patch weekly 0.05 mg/24hr</i>		<i>ezetimibe tab 10 mg</i>	40
.....	87	EZFE 200 CAP 200MG.....	105
<i>estradiol td patch weekly 0.06 mg/24hr</i>		EZFE FORTE CAP	126
.....	87	E-Z SPACER MIS.....	139
<i>estradiol td patch weekly 0.075 mg/24hr</i>		E-Z SPACER MIS BODY GRD.....	139
.....	87	F	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	87	FABRAZYME INJ 35MG.....	86
<i>estradiol vaginal cream 0.1 mg/gm</i>	87	FABRAZYME INJ 5MG	86
<i>estradiol vaginal tab 10 mcg</i>	87	<i>falmina tab</i>	81
<i>estradiol valerate im in oil 20 mg/ml</i> ...	87	<i>famciclovir tab 125 mg</i>	16
<i>estradiol valerate im in oil 40 mg/ml</i> ...	87	<i>famciclovir tab 250 mg</i>	16
<i>eszopiclone tab 1 mg</i>	68	<i>famciclovir tab 500 mg</i>	16
<i>eszopiclone tab 2 mg</i>	68	<i>famotidine for susp 40 mg/5ml</i>	97
<i>eszopiclone tab 3 mg</i>	68	<i>famotidine inj 200 mg/20ml</i>	97
<i>ethambutol hcl tab 100 mg</i>	16	<i>famotidine inj 20 mg/2ml</i>	97
<i>ethambutol hcl tab 400 mg</i>	16	<i>famotidine inj 40 mg/4ml</i>	97
<i>ethosuximide cap 250 mg</i>	51	<i>famotidine in nacl 0.9% iv soln 20</i>	

<i>mg/50ml</i>	97	<i>fenofibrate tab 160 mg</i>	40
<i>famotidine tab 20 mg</i>	97	<i>fenofibrate tab 48 mg</i>	40
<i>famotidine tab 40 mg</i>	97	<i>fenofibrate tab 54 mg</i>	40
FANAPT PAK	62	<i>fantanyl citrate buccal tab 200 mcg (base equiv)</i>	5
FANAPT TAB 10MG.....	63	<i>fantanyl citrate buccal tab 400 mcg (base equiv)</i>	5
FANAPT TAB 12MG.....	63	<i>fantanyl citrate buccal tab 600 mcg (base equiv)</i>	5
FANAPT TAB 1MG	62	<i>fantanyl citrate buccal tab 800 mcg (base equiv)</i>	5
FANAPT TAB 2MG	63	<i>fantanyl citrate lozenge on a handle 1200 mcg</i>	5
FANAPT TAB 4MG	63	<i>fantanyl citrate lozenge on a handle 1600 mcg</i>	5
FANAPT TAB 6MG	63	<i>fantanyl citrate lozenge on a handle 200 mcg</i>	5
FANAPT TAB 8MG	63	<i>fantanyl citrate lozenge on a handle 400 mcg</i>	5
FANTASY LUBR MIS	81	<i>fantanyl citrate lozenge on a handle 600 mcg</i>	5
FANTASY LUBR MIS COLORS	81	<i>fantanyl citrate lozenge on a handle 800 mcg</i>	5
FANTASY LUBR MIS SPERMICI.....	81	<i>fantanyl td patch 72hr 100 mcg/hr</i>	5
FANTASY MIS LUBRICAT.....	81	<i>fantanyl td patch 72hr 12 mcg/hr</i>	5
FARXIGA TAB 10MG	76	<i>fantanyl td patch 72hr 25 mcg/hr</i>	5
FARXIGA TAB 5MG.....	76	<i>fantanyl td patch 72hr 50 mcg/hr</i>	5
FARYDAK CAP 10MG	25	<i>fantanyl td patch 72hr 75 mcg/hr</i>	5
FARYDAK CAP 15MG	25	FENTORA TAB 100MCG	5
FARYDAK CAP 20MG	25	FENTORA TAB 200MCG	6
FASLODEX INJ 250/5ML	27	FENTORA TAB 400MCG	6
FATTYBLEND MIS.....	120	FENTORA TAB 600MCG	6
<i>fayosim tab</i>	81	FENTORA TAB 800MCG	6
FC2 FEMALE MIS CONDOM.....	81	FERAHEME INJ 510/17ML.....	105
FC FEMALE MIS CONDOM	81	<i>ferate tab 27mg</i>	105
FDC BLUE 1 POW	120	FERGON TAB 27MG	105
FDC BLUE 1 POW AL LAKE.....	120	<i>ferosul elx 220/5ml</i>	105
FDC BLUE 2 POW	120	<i>ferosul tab 325mg</i>	105
FDC GREEN #3 POW	120	FERRETTS IPS SOL.....	106
FDC RED #3 POW	120	FERRETTS TAB 325MG.....	106
FDC RED #40 POW AL LAKE.....	120	<i>ferrex 150 cap 150mg</i>	106
FDC RED 40 POW.....	120	FERRIC POW SUBSULFA.....	151
FDC YELLOW 5 POW.....	120	FERRIC SUBSU SOL	151
FDC YELLOW 5 POW AL LAKE	120	FERRIMIN 150 TAB	106
FDC YELLOW 6 POW.....	120	FERRLECIT INJ 12.5MG/M	106
<i>febuxostat tab 40 mg</i>	1	<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	106
<i>febuxostat tab 80 mg</i>	1	<i>ferrous gluconate tab 240 mg (27 mg</i>	
<i>felbamate susp 600 mg/5ml</i>	51		
<i>felbamate tab 400 mg</i>	51		
<i>felbamate tab 600 mg</i>	51		
<i>felodipine tab er 24hr 10 mg</i>	44		
<i>felodipine tab er 24hr 2.5 mg</i>	44		
<i>felodipine tab er 24hr 5 mg</i>	44		
<i>femynor tab 0.25-35</i>	81		
<i>fenofibrate micronized cap 134 mg</i>	40		
<i>fenofibrate micronized cap 200 mg</i>	40		
<i>fenofibrate micronized cap 67 mg</i>	40		
<i>fenofibrate tab 145 mg</i>	40		

<i>elemental fe)</i>	106	FLOVENT DISK AER 250MCG	145
<i>ferrous gluconate tab 324 mg (37.5 mg</i>		FLOVENT DISK AER 50MCG	144
<i>elemental iron)</i>	106	FLOVENT HFA AER 110MCG	145
FERROUS GLUC TAB 324MG	106	FLOVENT HFA AER 220MCG	145
<i>ferrous sulfate elixir 220 mg/5ml (44</i>		FLOVENT HFA AER 44MCG	145
<i>mg/5ml elemental fe)</i>	106	<i>fluconazole for susp 10 mg/ml</i>	12
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml</i>		<i>fluconazole for susp 40 mg/ml</i>	12
<i>elemental fe)</i>	106	<i>fluconazole in nacl 0.9% inj 200</i>	
<i>ferrous sulfate tab 325 mg (65 mg</i>		<i>mg/100ml</i>	12
<i>elemental fe)</i>	106	<i>fluconazole in nacl 0.9% inj 400</i>	
<i>ferrous sulfate tab ec 325 mg (65 mg fe</i>		<i>mg/200ml</i>	12
<i>equivalent)</i>	106	<i>fluconazole tab 100 mg</i>	12
FERROUS SULF SYP 300/5ML	106	<i>fluconazole tab 150 mg</i>	12
FERROUS SULF TAB 140MG	106	<i>fluconazole tab 200 mg</i>	12
FERROUS SULF TAB 324MG EC	106	<i>fluconazole tab 50 mg</i>	12
FERROUS SUL LIQ 220/5ML	106	<i>flucytosine cap 250 mg</i>	12
<i>ferrousul tab 325mg</i>	106	<i>flucytosine cap 500 mg</i>	12
FE SULFATE POW	105	<i>fludrocortisone acetate tab 0.1 mg</i>	88
FETZIMA CAP 120MG	58	<i>flunisolide nasal soln 25 mcg/act</i>	
FETZIMA CAP 20MG	58	<i>(0.025%)</i>	144
FETZIMA CAP 40MG	58	<i>fluocinolone acetonide (otic) oil 0.01%</i>	
FETZIMA CAP 80MG	58	.....	155
FETZIMA CAP TITRATIO	58	<i>fluocinolone acetonide cream 0.01%</i>	149
FEVERALL INF SUP 80MG	1	<i>fluocinolone acetonide cream 0.025%</i>	149
<i>feverall sup 120mg</i>	2	<i>fluocinolone acetonide oil 0.01% (body</i>	
<i>feverall sup 325mg</i>	2	<i>oil)</i>	149
<i>feverall sup 650mg</i>	2	<i>fluocinolone acetonide oil 0.01% (scalp</i>	
<i>fexofenadine hcl tab 180 mg</i>	136	<i>oil)</i>	149
<i>fexofenadine hcl tab 60 mg</i>	136	<i>fluocinolone acetonide oint 0.025%</i>	149
<i>fexofenadine tab 180mg</i>	136	<i>fluocinolone acetonide soln 0.01%</i>	149
<i>fexofenadine tab 60mg</i>	136	<i>fluocinonide cream 0.05%</i>	149
FIASP FLEX INJ TOUCH	75	<i>fluocinonide emulsified base cream</i>	
FIASP INJ 100/ML	75	<i>0.05%</i>	149
<i>finasteride tab 5 mg</i>	102	<i>fluocinonide gel 0.05%</i>	149
FIRAZYR INJ 30MG/3ML	107	<i>fluocinonide soln 0.05%</i>	149
<i>flac oil 0.01%</i>	155	<i>fluorometholone ophth susp 0.1%</i>	132
FLAVORX LIQ	120	<i>fluorouracil cream 5%</i>	152
FLEBOGAMMA INJ 10/100ML	109	<i>fluorouracil iv soln 1 gm/20ml (50</i>	
FLEBOGAMMA INJ 10/200ML	109	<i>mg/ml)</i>	24
FLEBOGAMMA INJ 20/200ML	109	<i>fluorouracil iv soln 2.5 gm/50ml (50</i>	
FLEBOGAMMA INJ 20/400ML	109	<i>mg/ml)</i>	24
FLEBOGAMMA INJ 5GM/50ML	109	<i>fluorouracil iv soln 500 mg/10ml (50</i>	
FLEBOGAMMA INJ DIF 5%	109	<i>mg/ml)</i>	24
<i>flecainide acetate tab 100 mg</i>	38	<i>fluorouracil iv soln 5 gm/100ml (50</i>	
<i>flecainide acetate tab 150 mg</i>	38	<i>mg/ml)</i>	24
<i>flecainide acetate tab 50 mg</i>	38	<i>fluorouracil soln 2%</i>	152
FLEXICHAMBER MIS	139	<i>fluorouracil soln 5%</i>	152
FLOVENT DISK AER 100MCG	144	<i>fluoxetine hcl cap 10 mg</i>	58

<i>fluoxetine hcl cap 20 mg</i>	58	<i>fosinopril sodium tab 20 mg</i>	34
<i>fluoxetine hcl cap 40 mg</i>	58	<i>fosinopril sodium tab 40 mg</i>	34
<i>fluoxetine hcl solution 20 mg/5ml</i>	58	FREAMINE HBC INJ 6.9%	114
<i>fluphenazine decanoate inj 25 mg/ml</i> ..	63	FREAMINE III INJ 10%	114
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	63	FREE & CLEAR SHA	152
<i>fluphenazine hcl inj 2.5 mg/ml</i>	63	FRUCTOSE GRA	120
<i>fluphenazine hcl oral conc 5 mg/ml</i>	63	FULLERS POW EARTH	152
<i>fluphenazine hcl tab 10 mg</i>	63	<i>fulvestrant inj 250 mg/5ml</i>	27
<i>fluphenazine hcl tab 1 mg</i>	63	<i>fungoid-d cre 1%</i>	147
<i>fluphenazine hcl tab 2.5 mg</i>	63	<i>furosemide inj 10 mg/ml</i>	45
<i>fluphenazine hcl tab 5 mg</i>	63	<i>furosemide oral soln 10 mg/ml</i>	46
<i>flurbiprofen sodium ophth soln 0.03%</i>	132	<i>furosemide oral soln 8 mg/ml</i>	46
<i>flurbiprofen tab 100 mg</i>	3	<i>furosemide tab 20 mg</i>	46
<i>flurbiprofen tab 50 mg</i>	3	<i>furosemide tab 40 mg</i>	46
<i>flutamide cap 125 mg</i>	27	<i>furosemide tab 80 mg</i>	46
<i>fluticasone propionate cream 0.05%</i> ..	149	FUSION CAP.....	106
<i>fluticasone propionate nasal susp 50</i> <i>mcg/act</i>	144	FUZEON INJ 90MG.....	13
<i>fluticasone propionate oint 0.005%</i> ...	149	<i>fyavolv tab 0.5-2.5</i>	87
<i>fluvoxamine maleate tab 100 mg</i>	49	FYCOMPA SUS 0.5MG/ML.....	51
<i>fluvoxamine maleate tab 25 mg</i>	49	FYCOMPA TAB 10MG	52
<i>fluvoxamine maleate tab 50 mg</i>	49	FYCOMPA TAB 12MG	52
FOLGARD TAB	126	FYCOMPA TAB 2MG	51
<i>folic acid inj 5 mg/ml</i>	126	FYCOMPA TAB 4MG	51
<i>folic acid tab 1 mg</i>	126	FYCOMPA TAB 6MG	52
<i>folic acid tab 400mcg</i>	126	FYCOMPA TAB 8MG	52
<i>folic acid tab 400 mcg</i>	126	G	
<i>folic acid tab 800 mcg</i>	126	<i>gabapentin cap 100 mg</i>	52
FOLITAB 500 TAB	106	<i>gabapentin cap 300 mg</i>	52
<i>fondaparinux sodium subcutaneous inj</i> <i>10 mg/0.8ml</i>	104	<i>gabapentin cap 400 mg</i>	52
<i>fondaparinux sodium subcutaneous inj</i> <i>2.5 mg/0.5ml</i>	104	<i>gabapentin oral soln 250 mg/5ml</i>	52
<i>fondaparinux sodium subcutaneous inj 5</i> <i>mg/0.4ml</i>	104	<i>gabapentin tab 600 mg</i>	52
<i>fondaparinux sodium subcutaneous inj</i> <i>7.5 mg/0.6ml</i>	104	<i>gabapentin tab 800 mg</i>	52
FORMALDEHYDE SOL 37%	152	<i>galantamine hydrobromide cap er 24hr</i> <i>16 mg</i>	55
FORTEO SOL 600/2.4	90	<i>galantamine hydrobromide cap er 24hr</i> <i>24 mg</i>	55
<i>fosamprenavir calcium tab 700 mg (base</i> <i>equiv)</i>	13	<i>galantamine hydrobromide cap er 24hr 8</i> <i>mg</i>	55
FOSFREE TAB.....	126	<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	55
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 10-12.5 mg</i>	33	<i>galantamine hydrobromide tab 12 mg</i> .	55
<i>fosinopril sodium & hydrochlorothiazide</i> <i>tab 20-12.5 mg</i>	34	<i>galantamine hydrobromide tab 4 mg</i> ...	55
<i>fosinopril sodium tab 10 mg</i>	34	<i>galantamine hydrobromide tab 8 mg</i> ...	55
		GAMASTAN S/D INJ.....	109
		GAMMAGARD INJ 10GM/100	109
		GAMMAGARD INJ 1GM/10ML	109
		GAMMAGARD INJ 2.5GM/25	109
		GAMMAGARD INJ 20GM/200	109

GAMMAGARD INJ 30GM/300	109	GENOTROPIN INJ 1.8MG.....	90
GAMMAGARD INJ 5GM/50ML	109	GENOTROPIN INJ 12MG.....	90
GAMMAGARD SD INJ 10GM HU	109	GENOTROPIN INJ 1MG	90
GAMMAGARD SD INJ 5GM HU.....	109	GENOTROPIN INJ 2MG	90
GAMMAKED INJ 10GM/100.....	109	GENOTROPIN INJ 5MG	90
GAMMAKED INJ 1GM/10ML	109	<i>gentak oin 0.3% op.....</i>	132
GAMMAKED INJ 2.5GM/25.....	109	<i>gentamicin in saline inj 0.8 mg/ml</i>	9
GAMMAKED INJ 20GM/200.....	109	<i>gentamicin in saline inj 1.2 mg/ml</i>	9
GAMMAKED INJ 5GM/50ML	109	<i>gentamicin in saline inj 1.6 mg/ml</i>	9
GAMMAPLEX INJ 10%.....	109	<i>gentamicin in saline inj 1 mg/ml.....</i>	9
GAMMAPLEX INJ 5%	109	<i>gentamicin in saline inj 2 mg/ml.....</i>	9
GAMUNEX-C INJ 10GM/100.....	109	<i>gentamicin sulfate cream 0.1%.....</i>	146
GAMUNEX-C INJ 1GM/10ML.....	109	<i>gentamicin sulfate inj 10 mg/ml</i>	9
GAMUNEX-C INJ 2.5GM/25.....	109	<i>gentamicin sulfate inj 40 mg/ml</i>	9
GAMUNEX-C INJ 20GM/200.....	109	<i>gentamicin sulfate oint 0.1%.....</i>	146
GAMUNEX-C INJ 40/400ML	110	<i>gentamicin sulfate ophth soln 0.3%...132</i>	
GAMUNEX-C INJ 5GM/50ML.....	109	<i>gentle laxat sup 10mg.....</i>	98
<i>ganciclovir sodium for inj 500 mg</i>	16	<i>gentle laxat tab 5mg ec.....</i>	98
GARDASIL 9 INJ	111	GENVOYA TAB.....	15
<i>gatifloxacin ophth soln 0.5%</i>	132	GEODON INJ 20MG	63
GATTEX KIT 5MG	100	<i>geriaton liq</i>	126
GAUZE PADS 2.....	75	GERIATRIC LIQ VITAMIN	126
<i>gavilyte-c sol</i>	98	GILENYA CAP 0.5MG	71
<i>gavilyte-g sol</i>	98	GILOTRIF TAB 20MG	29
<i>gavilyte-n sol flav pk.....</i>	98	GILOTRIF TAB 30MG	29
GELUSIL CHW	94	GILOTRIF TAB 40MG	29
<i>gemcitabine hcl for inj 1 gm.....</i>	24	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gemcitabine hcl for inj 200 mg</i>	24	<i>20 mg/ml</i>	71
<i>gemcitabine hcl for inj 2 gm.....</i>	24	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gemcitabine hcl inj 1 gm/26.3ml (38</i>		<i>40 mg/ml</i>	71
<i>mg/ml) (base equiv)</i>	24	<i>glatopa inj 20mg/ml</i>	71
<i>gemcitabine hcl inj 200 mg/5.26ml (38</i>		<i>glatopa inj 40mg/ml</i>	71
<i>mg/ml) (base equiv)</i>	24	GLEOSTINE CAP 100MG	23
<i>gemcitabine hcl inj 2 gm/52.6ml (38</i>		GLEOSTINE CAP 10MG	23
<i>mg/ml) (base equiv)</i>	24	GLEOSTINE CAP 40MG	23
<i>gemfibrozil tab 600 mg</i>	40	<i>glimepiride tab 1 mg</i>	76
<i>genaphed tab 30mg</i>	140	<i>glimepiride tab 2 mg</i>	76
<i>generlac sol 10gm/15</i>	98	<i>glimepiride tab 4 mg</i>	76
<i>gengraf cap 100mg</i>	111	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	
<i>gengraf cap 25mg.....</i>	111	<i>.....</i>	76
<i>gengraf sol 100mg/ml</i>	111	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	
GENOTROPIN INJ 0.2MG.....	90	<i>.....</i>	76
GENOTROPIN INJ 0.4MG.....	90	<i>glipizide-metformin hcl tab 5-500 mg ..</i>	76
GENOTROPIN INJ 0.6MG.....	90	<i>glipizide tab 10 mg</i>	76
GENOTROPIN INJ 0.8MG.....	90	<i>glipizide tab 5 mg</i>	76
GENOTROPIN INJ 1.2MG.....	90	<i>glipizide tab er 24hr 10 mg</i>	76
GENOTROPIN INJ 1.4MG.....	90	<i>glipizide tab er 24hr 2.5 mg</i>	76
GENOTROPIN INJ 1.6MG.....	90	<i>glipizide tab er 24hr 5 mg</i>	76

<i>glipizide xl tab 10mg</i>	76	<i>gnp cough dm sus 30mg/5ml</i>	140
<i>glipizide xl tab 2.5mg</i>	76	<i>gnp dayhist tab 1.34mg</i>	136
<i>glipizide xl tab 5mg</i>	76	<i>gnp glycerin sup 1.2gm</i>	98
GLUCAGEN INJ HYPOKIT.....	89	<i>gnp healthy tab eyes</i>	126
GLUCAGON KIT 1MG.....	89	<i>gnp iron tab 45mg</i>	106
GLUCOSAMINE POW HCL	152	<i>gnp iron tab 65mg</i>	106
GLUCOSAMINE POW SULFATE	152	<i>gnp k-pec sus 262/15ml</i>	95
<i>glyburide-metformin tab 1.25-250 mg</i> ..77		<i>gnp laxative sup 10mg</i>	98
<i>glyburide-metformin tab 2.5-500 mg</i> ..77		<i>gnp laxative tab 25mg</i>	98
<i>glyburide-metformin tab 5-500 mg</i> ....77		<i>gnp laxative tab 5mg ec</i>	98
<i>glyburide micronized tab 1.5 mg</i>	76	<i>gnp lice kit</i>	154
<i>glyburide micronized tab 3 mg</i>	76	<i>gnp little chw ones</i>	126
<i>glyburide micronized tab 6 mg</i>	76	<i>gnp magnesi u tab 250mg</i>	117
<i>glyburide tab 1.25 mg</i>	76	<i>gnp masanti sus max st</i>	94
<i>glyburide tab 2.5 mg</i>	77	<i>gnp masanti sus reg st</i>	94
<i>glyburide tab 5 mg</i>	77	<i>gnp niacin tab 250mg tr</i>	126
GLYCERIN LIQ	152	<i>gnp nicotine gum 2mg mint</i>	73
<i>glycerin suppos 1 gm</i>	98	<i>gnp nicotine gum 2mg orig</i>	73
GLYCINE POW	102	<i>gnp nicotine gum 4mg mint</i>	73
GLYCOLIC ACD CRY	152	<i>gnp nicotine loz 2mg mint</i>	73
GLYCOLIC ACD SOL 70%	152	<i>gnp nicotine loz 4mg mint</i>	73
<i>glycopyrrolate tab 1 mg</i>	97	<i>gnp nicotine loz mini 2mg</i>	73
<i>glycopyrrolate tab 2 mg</i>	97	<i>gnp one dail tab maximum</i>	126
<i>glydo gel 2%</i>	150	<i>gnp opti-vit tab</i>	126
<i>gnp all day tab allergy</i>	136	<i>gnp pediatri sol electrol</i>	112
<i>gnp allergy cap 25mg</i>	136	GNP PRENATAL TAB 28-0.8MG.....	126
<i>gnp allergy tab 180mg</i>	136	<i>gnp suphedrn liq 15mg/5ml</i>	140
<i>gnp allergy tab 25mg</i>	136	<i>gnp tussin liq dm</i>	140
<i>gnp allergy tab 4mg</i>	136	<i>gnp tussin liq dm cough</i>	140
<i>gnp antacid sus anti-gas</i>	94	<i>gnp tussin liq dm max</i>	140
<i>gnp antacid sus cherry</i>	94	<i>gnp tussin syp cf</i>	140
<i>gnp aspirin tab 325mg ec</i>	2	<i>gnp vit b-12 tab 1000 cr</i>	126
<i>gnp b-100 tab</i>	126	<i>gnp vit b-12 tab 500mcg</i>	126
<i>gnp b-50 tab balanced</i>	126	<i>gnp vit b1 tab 100mg</i>	126
<i>gnp bisa-lax tab 5mg ec</i>	98	<i>gnp vit b-6 tab 100mg</i>	126
<i>gnp ca/mg/zn tab</i>	117	<i>gnp vit c chw 500mg</i>	126
<i>gnp ca/vit d chw minerals</i>	117	<i>gnp vit c loz 60mg</i>	126
<i>gnp calcium tab 500/d</i>	117	<i>gnp vit c tab 1000mg</i>	126
<i>gnp calcium tab 600/d</i>	117	<i>gnp vit c tab 250mg</i>	126
<i>gnp calcium tab cit +d3</i>	117	<i>gnp vit d tab 1000unit</i>	126
<i>gnp century tab</i>	126	<i>gnp vit e cap 1000unit</i>	127
<i>gnp century tab cardio</i>	126	<i>gnp vit e cap 200unit</i>	126
GNP CENTURY TAB ENERGY	126	<i>gnp vit e cap 400unit</i>	127
<i>gnp century tab mature</i>	126	<i>gnp zinc tab 50mg</i>	117
<i>gnp century tab senior</i>	126	<i>gnp zoochews chw gummies</i>	127
<i>gnp century tab ultimate</i>	126	GOLYTELY SOL.....	98
<i>gnp co q10 cap 100mg</i>	120	GOWEY TIN TINCTURE	120
<i>gnp co q10 cap 60mg</i>	120	<i>granisetron hcl inj 1 mg/ml</i>	96

<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	HARVONI TAB 90-400MG.....17
.....96	HAVRIX INJ 1440UNIT.....111
<i>granisetron hcl tab 1 mg</i> .....96	HAVRIX INJ 720UNIT.....111
GRANIX INJ 300/0.5 .....105	<i>healthy eyes cap supervis</i> .....127
GRANIX INJ 300/1ML .....105	<i>healthy eyes tab</i> .....127
GRANIX INJ 480/0.8 .....105	<i>heather tab 0.35mg</i> .....81
GRANIX INJ 480/1.6 .....105	HEMOCYTE TAB 324MG .....106
GRAPE LIQ FLAVOR.....120	HEPARIN/NACL INJ 25000UNT.....104
GRAPE SEED OIL .....152	<i>heparin sodium (porcine) 100 unit/ml in</i>
GRAPE SYP .....120	<i>d5w</i> .....104
GREEN TEA EX LIQ 90% .....152	<i>heparin sodium (porcine)-dextrose iv sol</i>
<i>griseofulvin microsize susp 125 mg/5ml</i>	<i>20000 unit/500ml-5%</i> .....104
.....12	<i>heparin sodium (porcine)-dextrose iv sol</i>
<i>griseofulvin microsize tab 500 mg</i> .....12	<i>25000 unit/500ml-5%</i> .....104
<i>griseofulvin ultramicrosize tab 125 mg</i> 12	<i>heparin sodium (porcine) inj 10000</i>
<i>griseofulvin ultramicrosize tab 250 mg</i> 12	<i>unit/ml</i> .....104
<i>guaifatuss ac syp 100-10/5</i> .....140	<i>heparin sodium (porcine) inj 1000</i>
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	<i>unit/ml</i> .....104
.....140	<i>heparin sodium (porcine) inj 20000</i>
<i>guaifenesin liquid 100 mg/5ml</i> .....140	<i>unit/ml</i> .....104
<i>guaifenesin syp 100-10/5</i> .....140	<i>heparin sodium (porcine) inj 5000</i>
<i>guanfacine hcl tab er 24hr 1 mg (base</i>	<i>unit/ml</i> .....104
<i>equiv)</i> .....67	<i>hepatamine sol 8%</i> .....114
<i>guanfacine hcl tab er 24hr 2 mg (base</i>	HEP SOD/NACL INJ 25000UNT.....104
<i>equiv)</i> .....67	HERCEP HYLEC SOL 60-10000.....25
<i>guanfacine hcl tab er 24hr 3 mg (base</i>	HERCEPTIN INJ 150MG.....25
<i>equiv)</i> .....68	HERCEPTIN INJ 440MG.....25
<i>guanfacine hcl tab er 24hr 4 mg (base</i>	HETLIOZ CAP 20MG .....68
<i>equiv)</i> .....68	HIBERIX SOL 10MCG.....112
H	HIGH SENSATI MIS SPERMICI .....81
<i>h2q cap 100mg</i> .....120	<i>hm allergy tab 25mg</i> .....136
HAEGARDA INJ 2000UNIT .....107	<i>hm allergy tab 4mg</i> .....136
HAEGARDA INJ 3000UNIT .....107	<i>hm antacid sus anti-gas</i> .....94
<i>hailey 24 tab fe</i> .....81	<i>hm aspirin tab 325mg</i> .....2
<i>halobetasol propionate cream 0.05%</i> .149	<i>hm coq10 cap 100mg</i> .....120
<i>halobetasol propionate oint 0.05%</i> ....149	<i>hm coq10 cap 50mg</i> .....120
<i>haloperidol decanoate im soln 100 mg/ml</i>	<i>hm cough dm sus 30mg/5ml</i> .....140
.....63	<i>hm epsom gra salt</i> .....98
<i>haloperidol decanoate im soln 50 mg/ml</i>	<i>hm iron tab 65mg</i> .....106
.....63	<i>hm laxative tab 5mg ec</i> .....98
<i>haloperidol lactate inj 5 mg/ml</i> .....63	<i>hm niacin tab 250mg</i> .....127
<i>haloperidol lactate oral conc 2 mg/ml</i> ..63	<i>hm nicotine dis 14mg/24h</i> .....73
<i>haloperidol tab 0.5 mg</i> .....63	<i>hm nicotine dis 21mg/24h</i> .....73
<i>haloperidol tab 10 mg</i> .....63	<i>hm nicotine gum 2mg mint</i> .....73
<i>haloperidol tab 1 mg</i> .....63	<i>hm nicotine gum 4mg mint</i> .....73
<i>haloperidol tab 20 mg</i> .....63	<i>hm nicotine loz 2mg mint</i> .....73
<i>haloperidol tab 2 mg</i> .....63	<i>hm nicotine loz 4mg mint</i> .....73
<i>haloperidol tab 5 mg</i> .....63	<i>hm triple oin antibiot</i> .....146

<i>hm tussin liq adlt dm</i>	140	<i>hydrocortisone butyrate oint 0.1%</i>	149
<i>hm vitamin e cap 1000unit</i>	127	<i>hydrocortisone cream 1%</i>	149
<i>hm vitamin e cap 200unit</i>	127	<i>hydrocortisone cream 2.5%</i>	149
<i>hm vit b1 tab 100mg</i>	127	<i>hydrocortisone enema 100 mg/60ml</i> ...	97
HOLD CHAMBER MIS ADLT LG	140	<i>hydrocortisone lotion 2.5%</i>	149
HOLD CHAMBER MIS MEDIUM	140	<i>hydrocortisone oint 2.5%</i>	149
HOLD CHAMBER MIS SMALL	140	<i>hydrocortisone rectal cream 2.5%</i>	152
HRT BASE CRE	120	<i>hydrocortisone tab 10 mg</i>	88
HUMIRA INJ 10/0.1ML	108	<i>hydrocortisone tab 20 mg</i>	88
HUMIRA INJ 10MG/0.2	108	<i>hydrocortisone tab 5 mg</i>	88
HUMIRA INJ 20/0.2ML	108	<i>hydrocortisone valerate cream 0.2%</i> .	149
HUMIRA INJ 40/0.4ML	108	<i>hydrocortisone valerate oint 0.2%</i>	149
HUMIRA KIT 20MG/0.4	108	<i>hydromet syp 5-1.5/5</i>	140
HUMIRA KIT 40MG/0.8	108	<i>hydromorphone hcl liqd 1 mg/ml</i>	6
HUMIRA PEDIA INJ CROHNS.....	108	<i>hydromorphone hcl preservative free (pf)</i>	
HUMIRA PEN INJ 40/0.4ML.....	108	<i>inj 10 mg/ml</i>	6
HUMIRA PEN INJ 40MG/0.8	108	<i>hydromorphone hcl tab 2 mg</i>	6
HUMIRA PEN INJ CD/UC/HS	108	<i>hydromorphone hcl tab 4 mg</i>	6
HUMIRA PEN INJ PS/UV	108	<i>hydromorphone hcl tab 8 mg</i>	6
HUMIRA PEN KIT CD/UC/HS	108	HYDROPHILIC OIN	120
HUMIRA PEN KIT PS/UV	108	HYDROUS CRE EMULSIFI	120
HUMULIN R INJ U-500.....	75	<i>hydroxocobalamin acetate inj 1000</i>	
<i>hydralazine hcl inj 20 mg/ml</i>	46	<i>mcg/ml (base equivalent)</i>	127
<i>hydralazine hcl tab 100 mg</i>	47	<i>hydroxychloroquine sulfate tab 200 mg</i>	
<i>hydralazine hcl tab 10 mg</i>	47	.....	108
<i>hydralazine hcl tab 25 mg</i>	47	<i>hydroxyurea cap 500 mg</i>	31
<i>hydralazine hcl tab 50 mg</i>	47	<i>hydroxyzine hcl im soln 25 mg/ml</i>	136
HYDROCHL ACID LIQ 37%	152	<i>hydroxyzine hcl im soln 50 mg/ml</i>	136
<i>hydrochlorothiazide cap 12.5 mg</i>	46	<i>hydroxyzine hcl syrup 10 mg/5ml</i>	136
<i>hydrochlorothiazide tab 12.5 mg</i>	46	<i>hydroxyzine hcl tab 10 mg</i>	136
<i>hydrochlorothiazide tab 25 mg</i>	46	<i>hydroxyzine hcl tab 25 mg</i>	136
<i>hydrochlorothiazide tab 50 mg</i>	46	<i>hydroxyzine hcl tab 50 mg</i>	136
<i>hydrocodone-acetaminophen soln</i>		<i>hydroxyzine pamoate cap 25 mg</i>	136
<i>7.5-325 mg/15ml</i>	6	<i>hydroxyzine pamoate cap 50 mg</i>	136
<i>hydrocodone-acetaminophen tab 10-325</i>		HYSINGLA ER TAB 100 MG	6
<i>mg</i>	6	HYSINGLA ER TAB 120 MG	6
<i>hydrocodone-acetaminophen tab 5-325</i>		HYSINGLA ER TAB 20 MG	6
<i>mg</i>	6	HYSINGLA ER TAB 30 MG	6
<i>hydrocodone-acetaminophen tab 7.5-325</i>		HYSINGLA ER TAB 40 MG	6
<i>mg</i>	6	HYSINGLA ER TAB 60 MG	6
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i> .6		HYSINGLA ER TAB 80 MG	6
<i>hydrocodone w/ homatropine syrup</i>		I	
<i>5-1.5 mg/5ml</i>	140	<i>ibandronate sodium tab 150 mg (base</i>	
<i>hydrocodone w/ homatropine tab 5-1.5</i>		<i>equivalent)</i>	78
<i>mg</i>	140	IBRANCE CAP 100MG	25
<i>hydrocod polst-chlorphen polst er susp</i>		IBRANCE CAP 125MG	25
<i>10-8 mg/5ml</i>	140	IBRANCE CAP 75MG.....	25
<i>hydrocortisone butyrate cream 0.1%</i> .149		<i>ibu-drops dro 50/1.25</i>	3

<i>ibuprofen dro 50/1.25</i>	3	<i>imiquimod cream 5%</i>	152
<i>ibuprofen ib chw 100mg</i>	3	IMOVAX RABIE INJ 2.5/ML	112
<i>ibuprofen jr chw 100mg</i>	3	<i>incassia tab 0.35mg</i>	81
<i>ibuprofen sus 100/5ml</i>	3	INCRELEX INJ 40MG/4ML.....	90
<i>ibuprofen susp 100 mg/5ml</i>	3	INCRUSE ELPT INH 62.5MCG.....	134
<i>ibuprofen tab 400 mg</i>	3	<i>indapamide tab 1.25 mg</i>	46
<i>ibuprofen tab 600 mg</i>	3	<i>indapamide tab 2.5 mg</i>	46
<i>ibuprofen tab 800 mg</i>	3	INDOLE-3- POW CARBINOL.....	152
ICAPS AREDS TAB FORMULA	127	INFANRIX INJ.....	112
<i>icaps cap</i>	127	INFED INJ 50MG/ML.....	106
<i>icaps lutein cap /omega-3</i>	127	INFUVITE INJ	127
ICAPS LUTEIN TAB ZEAXANTH.....	127	INFUVITE INJ ADULT	127
<i>icaps mv tab</i>	127	INFUVITE INJ PEDIATRI.....	127
ICAPS PLUS TAB	127	INLYTA TAB 1MG	29
ICAR-C TAB	106	INLYTA TAB 5MG	29
ICAR PEDS SUS GRAPE.....	106	INOSITOL POW HEXANICO.....	152
<i>icatibant acetate inj 30 mg/3ml (base</i> <i>equivalent)</i>	107	INREBIC CAP 100MG.....	29
ICHTHAMMOL POW	152	INSPIRACHAMB MIS LARGE.....	140
ICLUSIG TAB 15MG.....	29	INSPIRACHAMB MIS MEDIUM	140
ICLUSIG TAB 45MG.....	29	INSPIRACHAMB MIS MOUTHPC	140
IDHIFA TAB 100MG.....	25	INSPIRACHAMB MIS SMALL.....	140
IDHIFA TAB 50MG	25	INSPIREASE MIS DD SYST	140
<i>iferex 150 cap</i>	106	INSULIN PEN NEEDLE	75
IFEX INJ 3GM.....	23	INSULIN SAFETY NEEDLES.....	75
IFOSFAMIDE INJ 3GM	23	INSULIN SYRINGE	75
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	23	INTEGRA CAP.....	106
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	23	INTELENCE TAB 100MG.....	14
ILEVRO DRO 0.3% OP	132	INTELENCE TAB 200MG.....	14
<i>imatinib mesylate tab 100 mg (base</i> <i>equivalent)</i>	29	INTELENCE TAB 25MG.....	13
<i>imatinib mesylate tab 400 mg (base</i> <i>equivalent)</i>	29	INTENSE SENS MIS	81
IMBRUVICA CAP 140MG	29	INTRALIPID INJ 20%.....	114
IMBRUVICA CAP 70MG	29	INTRALIPID INJ 30%.....	114
IMBRUVICA TAB 140MG	29	INTRON A INJ 10MU.....	110
IMBRUVICA TAB 280MG	29	INTRON A INJ 18MU.....	110
IMBRUVICA TAB 420MG	29	INTRON A INJ 25MU.....	110
IMBRUVICA TAB 560MG	29	INTRON A INJ 50MU.....	110
<i>imipenem-cilastatin intravenous for soln</i> <i>250 mg</i>	10	<i>introvale tab</i>	81
<i>imipenem-cilastatin intravenous for soln</i> <i>500 mg</i>	10	INVEGA SUST INJ 117/0.75	63
<i>imipramine hcl tab 10 mg</i>	58	INVEGA SUST INJ 156MG/ML	63
<i>imipramine hcl tab 25 mg</i>	58	INVEGA SUST INJ 234/1.5	63
<i>imipramine hcl tab 50 mg</i>	58	INVEGA SUST INJ 39/0.25	63
		INVEGA SUST INJ 78/0.5ML.....	63
		INVEGA TRINZ INJ 273MG	63
		INVEGA TRINZ INJ 410MG	63
		INVEGA TRINZ INJ 546MG	63
		INVEGA TRINZ INJ 819MG	64
		INVIRASE TAB 500MG	14
		IODINE CRY RESUBLIM.....	152

IODOFORM POW.....	152	<i>isosorbide mononitrate tab er 24hr 30</i>	
IONOSOL-MB INJ D5W	115	<i>mg</i>	47
IPOL INJ INACTIVE	112	<i>isosorbide mononitrate tab er 24hr 60</i>	
<i>ipratropium-albuterol nebu soln</i>		<i>mg</i>	47
<i>0.5-2.5(3) mg/3ml.....</i>	134	<i>isotretinoin cap 10 mg</i>	146
<i>ipratropium bromide inhal soln 0.02%</i>		<i>isotretinoin cap 20 mg</i>	146
<i>.....</i>	134	<i>isotretinoin cap 30 mg</i>	146
<i>ipratropium bromide nasal soln 0.03%</i>		<i>isotretinoin cap 40 mg</i>	146
<i>(21 mcg/spray)</i>	134	<i>isradipine cap 2.5 mg.....</i>	44
<i>ipratropium bromide nasal soln 0.06%</i>		<i>isradipine cap 5 mg</i>	44
<i>(42 mcg/spray)</i>	134	<i>itraconazole cap 100 mg.....</i>	12
<i>irbesartan-hydrochlorothiazide tab</i>		<i>ivermectin tab 3 mg.....</i>	10
<i>150-12.5 mg.....</i>	36	<i>i-vite prote tab</i>	127
<i>irbesartan-hydrochlorothiazide tab</i>		<i>i-vite tab</i>	127
<i>300-12.5 mg.....</i>	36	IXIARO INJ	112
<i>irbesartan tab 150 mg.....</i>	37	J	
<i>irbesartan tab 300 mg.....</i>	38	JADENU SPRKL GRA 180MG	79
<i>irbesartan tab 75 mg</i>	37	JADENU SPRKL GRA 360MG	79
IRESSA TAB 250MG	30	JADENU SPRKL GRA 90MG	79
<i>irinotecan hcl inj 100 mg/5ml (20</i>		JADENU TAB 180MG	79
<i>mg/ml)</i>	32	JADENU TAB 360MG	79
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>		JADENU TAB 90MG	79
<i>.....</i>	32	JAKAFI TAB 10MG.....	30
<i>irinotecan hcl inj 500 mg/25ml (20</i>		JAKAFI TAB 15MG.....	30
<i>mg/ml)</i>	32	JAKAFI TAB 20MG.....	30
<i>iron 100/c tab 100-250.....</i>	106	JAKAFI TAB 25MG.....	30
<i>iron 100 tab plus</i>	106	JAKAFI TAB 5MG	30
ISENTRESS CHW 100MG	14	<i>jantoven tab 10mg.....</i>	104
ISENTRESS CHW 25MG	14	<i>jantoven tab 1mg</i>	104
ISENTRESS HD TAB 600MG	14	<i>jantoven tab 2.5mg.....</i>	104
ISENTRESS POW 100MG.....	14	<i>jantoven tab 2mg</i>	104
ISENTRESS TAB 400MG.....	14	<i>jantoven tab 3mg</i>	104
<i>isibloom tab.....</i>	81	<i>jantoven tab 4mg</i>	104
ISOLYTE-P INJ /D5W	115	<i>jantoven tab 5mg</i>	104
ISOLYTE-S INJ	115	<i>jantoven tab 6mg</i>	104
<i>isoniazid syrup 50 mg/5ml.....</i>	16	<i>jantoven tab 7.5mg.....</i>	104
<i>isoniazid tab 100 mg.....</i>	16	JANUMET TAB 50-1000.....	77
<i>isoniazid tab 300 mg.....</i>	16	JANUMET TAB 50-500MG.....	77
ISOPROPYL LIQ PALMITAT	152	JANUMET XR TAB 100-1000	77
<i>isosorbide dinitrate tab 10 mg.....</i>	47	JANUMET XR TAB 50-1000.....	77
<i>isosorbide dinitrate tab 20 mg.....</i>	47	JANUMET XR TAB 50-500MG	77
<i>isosorbide dinitrate tab 30 mg.....</i>	47	JANUVIA TAB 100MG	77
<i>isosorbide dinitrate tab 5 mg.....</i>	47	JANUVIA TAB 25MG	77
<i>isosorbide dinitrate tab er 40 mg</i>	47	JANUVIA TAB 50MG	77
<i>isosorbide mononitrate tab 10 mg.....</i>	47	JARDIANCE TAB 10MG	77
<i>isosorbide mononitrate tab 20 mg.....</i>	47	JARDIANCE TAB 25MG	77
<i>isosorbide mononitrate tab er 24hr 120</i>		<i>jasmiel tab 3-0.02mg.....</i>	81
<i>mg</i>	47	JELENE OIN	120

JENTADUETO TAB 2.5-1000	77	<i>nacl 0.9% inj</i>	115
JENTADUETO TAB 2.5-500	77	<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	115
JENTADUETO TAB 2.5-850	77	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	115
JENTADUETO TAB XR	77	<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	115
JESSNERS SOL	152	<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	115
<i>jinteli tab 1mg-5mcg</i>	87	<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	115
<i>jock itch aer 1%</i>	147	<i>kelnor 1/50 tab</i>	81
<i>jolivette tab 0.35mg</i>	81	<i>kelnor tab 1/35</i>	82
<i>juleber tab</i>	81	<i>ketoconazole cream 2%</i>	147
JULUCA TAB 50-25MG	15	<i>ketoconazole shampoo 2%</i>	148
<i>junel 1/20 tab</i>	81	<i>ketoconazole tab 200 mg</i>	12
<i>junel 1.5/30 tab</i>	81	KETO-DIASTIX TES	90
<i>junel fe 24 tab 1/20</i>	81	<i>ketorolac tromethamine ophth soln 0.4%</i>	132
<i>junel fe tab 1/20</i>	81	<i>ketorolac tromethamine ophth soln 0.5%</i>	132
<i>junel fe tab 1.5/30</i>	81	KEYTRUDA INJ 100MG/4M	26
JUXTAPID CAP 10MG	40	KEYTRUDA SOL 50MG	26
JUXTAPID CAP 20MG	40	KIMONO COLOR MIS	82
JUXTAPID CAP 30MG	40	KIMONO MICRO MIS THIN	82
JUXTAPID CAP 40MG	40	KIMONO MICRO MIS THIN +	82
JUXTAPID CAP 5MG	40	KIMONO MICRO MIS THIN PLS	82
JUXTAPID CAP 60MG	40	KIMONO MIS LUBRICAT	82
K		KIMONO MIS SENSATIO	82
KADCYLA INJ 100MG	25	KIMONO PLUS MIS LUBRICAT	82
KADCYLA INJ 160MG	25	KIMONO PLUS MIS SPERMICI	82
<i>kaitlib fe chw</i>	81	KIMONO PS MIS LUBRICAT	82
KALETRA TAB 100-25MG	15	KIMONO PS MIS PLUS	82
KALETRA TAB 200-50MG	15	KIMONO SENA MIS PLUS	82
KALYDECO PAK 25MG	143	KIMONO SPEC MIS	82
KALYDECO PAK 50MG	143	KINRIX INJ	112
KALYDECO PAK 75MG	143	KISQALI 200 PAK FEMARA	26
KALYDECO TAB 150MG	143	KISQALI 400 PAK FEMARA	26
KAMELEON LUB MIS COLORS	81	KISQALI 600 PAK FEMARA	26
KAMELEON MIS TRI-COLR	81	KISQALI TAB 200DOSE	26
KAOLIN POW COLLOID	95	KISQALI TAB 400DOSE	26
<i>kao-tin sus 262/15ml</i>	95	KISQALI TAB 600DOSE	26
KARAYA GUM	120	<i>klor-con 10 tab 10meq er</i>	112
<i>kariva tab 28 day</i>	81	<i>klor-con 8 tab 8meq er</i>	112
KCL/D5W/NACL INJ 0.15/0.2	115	KOJIC ACID POW	152
KCL/D5W/NACL INJ 0.3/0.9%	115	KORLYM TAB 300MG	90
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	115	<i>kurvelo tab 0.15/30</i>	82
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	115	KUVAN POW 100MG	87
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.33% inj</i>	115	KUVAN POW 500MG	87
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	115		
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	115		

KUVAN TAB 100MG	87	<i>larin tab 1.5/30</i>	82
KYNAMRO INJ 200MG/ML.....	40	LASTACRAFT SOL 0.25%	133
L		<i>latanoprost ophth soln 0.005%</i>	133
<i>labetalol hcl tab 100 mg</i>	42	LATUDA TAB 120MG	64
<i>labetalol hcl tab 200 mg</i>	42	LATUDA TAB 20MG	64
<i>labetalol hcl tab 300 mg</i>	42	LATUDA TAB 40MG	64
LAC-HYDRIN LOT 12%.....	152	LATUDA TAB 60MG	64
<i>lactated ringer's solution</i>	115	LATUDA TAB 80MG	64
<i>lactic acid (ammonium lactate) cream</i>		<i>lax/stl soft tab 8.6-50mg</i>	99
12%	152	<i>laxative sup 10mg</i>	99
<i>lactic acid (ammonium lactate) lotion</i>		<i>laxative tab 25mg</i>	99
12%	152	<i>layolis fe chw</i>	82
LACTIC ACID SOL	152	L-CITRULLINE POW	152
LACTOSE POW.....	121	L-CYSTINE POW	120
LACTOSE POW ANHYDROU.....	121	LECITHIN GRA.....	121
LACTOSE POW HYDROUS.....	121	<i>leflunomide tab 10 mg</i>	108
LACTOSE POW MONOHYDR	121	<i>leflunomide tab 20 mg</i>	108
<i>lactulose (encephalopathy) solution 10</i>		LEMON FLAVOR OIL	121
<i>gm/15ml</i>	98	LENVIMA CAP 10 MG.....	30
<i>lactulose solution 10 gm/15ml</i>	99	LENVIMA CAP 12MG.....	30
<i>lamivudine oral soln 10 mg/ml</i>	14	LENVIMA CAP 14 MG.....	30
<i>lamivudine tab 100 mg (hbv)</i>	17	LENVIMA CAP 18 MG.....	30
<i>lamivudine tab 150 mg</i>	14	LENVIMA CAP 20 MG.....	30
<i>lamivudine tab 300 mg</i>	14	LENVIMA CAP 24 MG.....	30
<i>lamivudine-zidovudine tab 150-300 mg</i>		LENVIMA CAP 4MG	30
.....	15	LENVIMA CAP 8 MG.....	30
<i>lamotrigine tab 100 mg</i>	52	<i>lessina tab</i>	82
<i>lamotrigine tab 150 mg</i>	52	<i>letrozole tab 2.5 mg</i>	27
<i>lamotrigine tab 200 mg</i>	52	<i>leucovorin calcium for inj 100 mg</i>	32
<i>lamotrigine tab 25 mg</i>	52	<i>leucovorin calcium for inj 200 mg</i>	32
<i>lamotrigine tab chewable dispersible 25</i>		<i>leucovorin calcium for inj 350 mg</i>	32
<i>mg</i>	52	<i>leucovorin calcium for inj 500 mg</i>	32
<i>lamotrigine tab chewable dispersible 5</i>		<i>leucovorin calcium for inj 50 mg</i>	32
<i>mg</i>	52	<i>leucovorin calcium inj 500 mg/50ml (10</i>	
<i>lamotrigine tab er 24hr 100 mg</i>	52	<i>mg/ml)</i>	32
<i>lamotrigine tab er 24hr 200 mg</i>	52	<i>leucovorin calcium tab 10 mg</i>	32
<i>lamotrigine tab er 24hr 250 mg</i>	52	<i>leucovorin calcium tab 15 mg</i>	32
<i>lamotrigine tab er 24hr 25 mg</i>	52	<i>leucovorin calcium tab 25 mg</i>	32
<i>lamotrigine tab er 24hr 300 mg</i>	52	<i>leucovorin calcium tab 5 mg</i>	32
<i>lamotrigine tab er 24hr 50 mg</i>	52	LEUKERAN TAB 2MG	23
<i>lansoprazole cap delayed release 15 mg</i>		<i>leuprolide acetate inj kit 5 mg/ml</i>	27
.....	101	<i>levalbuterol hcl soln nebu 0.31 mg/3ml</i>	
<i>lansoprazole cap delayed release 30 mg</i>		<i>(base equiv)</i>	138
.....	102	<i>levalbuterol hcl soln nebu 0.63 mg/3ml</i>	
L-ARGININE POW.....	120	<i>(base equiv)</i>	138
<i>larin fe tab 1/20</i>	82	<i>levalbuterol hcl soln nebu 1.25 mg/3ml</i>	
<i>larin fe tab 1.5/30</i>	82	<i>(base equiv)</i>	138
<i>larin tab 1/20</i>	82	<i>levalbuterol hcl soln nebu conc 1.25</i>	

<i>mg/0.5ml (base equiv)</i>	<i>138</i>	<i>mg-20 mcg</i>	<i>82</i>
<i>levalbuterol tartrate inhal aerosol 45</i>		<i>levonorgestrel-eth estra tab</i>	
<i>mcg/act (base equiv)</i>	<i>138</i>	<i>0.05-30/0.075-40/0.125-30mg-mcg ...</i>	<i>82</i>
<i>LEVEMIR INJ</i>	<i>75</i>	<i>levonorg-eth est tab 0.1-0.02mg(84) &</i>	
<i>LEVEMIR INJ FLEXTouc</i>	<i>75</i>	<i>eth est tab 0.01mg(7)</i>	<i>82</i>
<i>levetiracetam inj 500 mg/5ml (100</i>		<i>levonorg-eth est tab 0.15-0.03mg(84) &</i>	
<i>mg/ml)</i>	<i>52</i>	<i>eth est tab 0.01mg(7)</i>	<i>82</i>
<i>levetiracetam in sodium chloride iv soln</i>		<i>levora-28 tab 0.15/30</i>	<i>82</i>
<i>1000 mg/100ml</i>	<i>52</i>	<i>levothyroxine sodium tab 100 mcg.....</i>	<i>92</i>
<i>levetiracetam in sodium chloride iv soln</i>		<i>levothyroxine sodium tab 112 mcg.....</i>	<i>92</i>
<i>1500 mg/100ml</i>	<i>52</i>	<i>levothyroxine sodium tab 125 mcg.....</i>	<i>92</i>
<i>levetiracetam in sodium chloride iv soln</i>		<i>levothyroxine sodium tab 137 mcg.....</i>	<i>92</i>
<i>500 mg/100ml</i>	<i>52</i>	<i>levothyroxine sodium tab 150 mcg.....</i>	<i>92</i>
<i>levetiracetam oral soln 100 mg/ml.....</i>	<i>52</i>	<i>levothyroxine sodium tab 175 mcg.....</i>	<i>92</i>
<i>levetiracetam tab 1000 mg</i>	<i>52</i>	<i>levothyroxine sodium tab 200 mcg.....</i>	<i>92</i>
<i>levetiracetam tab 250 mg</i>	<i>52</i>	<i>levothyroxine sodium tab 25 mcg</i>	<i>92</i>
<i>levetiracetam tab 500 mg</i>	<i>52</i>	<i>levothyroxine sodium tab 300 mcg.....</i>	<i>92</i>
<i>levetiracetam tab 750 mg</i>	<i>52</i>	<i>levothyroxine sodium tab 50 mcg</i>	<i>92</i>
<i>levetiracetam tab er 24hr 500 mg.....</i>	<i>52</i>	<i>levothyroxine sodium tab 75 mcg</i>	<i>92</i>
<i>levetiracetam tab er 24hr 750 mg.....</i>	<i>52</i>	<i>levothyroxine sodium tab 88 mcg</i>	<i>92</i>
<i>levobunolol hcl ophth soln 0.5%</i>	<i>133</i>	<i>levo-t tab 100mcg</i>	<i>92</i>
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>		<i>levo-t tab 112mcg</i>	<i>92</i>
<i>.....</i>	<i>87</i>	<i>levo-t tab 125mcg</i>	<i>92</i>
<i>levocarnitine tab 330 mg</i>	<i>87</i>	<i>levo-t tab 137mcg</i>	<i>92</i>
<i>levocetirizine dihydrochloride soln 2.5</i>		<i>levo-t tab 150mcg</i>	<i>92</i>
<i>mg/5ml (0.5 mg/ml)</i>	<i>137</i>	<i>levo-t tab 175mcg</i>	<i>92</i>
<i>levocetirizine dihydrochloride tab 5 mg</i>		<i>levo-t tab 200 mcg</i>	<i>92</i>
<i>.....</i>	<i>137</i>	<i>levo-t tab 25mcg</i>	<i>92</i>
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>		<i>levo-t tab 300 mcg</i>	<i>92</i>
<i>.....</i>	<i>20</i>	<i>levo-t tab 50mcg</i>	<i>92</i>
<i>levofloxacin in d5w iv soln 500</i>		<i>levo-t tab 75mcg</i>	<i>92</i>
<i>mg/100ml</i>	<i>20</i>	<i>levo-t tab 88mcg</i>	<i>92</i>
<i>levofloxacin in d5w iv soln 750</i>		<i>levoxyl tab 100mcg.....</i>	<i>92</i>
<i>mg/150ml</i>	<i>20</i>	<i>levoxyl tab 112mcg.....</i>	<i>92</i>
<i>levofloxacin iv soln 25 mg/ml</i>	<i>20</i>	<i>levoxyl tab 125mcg.....</i>	<i>92</i>
<i>levofloxacin oral soln 25 mg/ml</i>	<i>20</i>	<i>levoxyl tab 137mcg.....</i>	<i>92</i>
<i>levofloxacin tab 250 mg</i>	<i>20</i>	<i>levoxyl tab 150mcg.....</i>	<i>92</i>
<i>levofloxacin tab 500 mg</i>	<i>20</i>	<i>levoxyl tab 175mcg.....</i>	<i>92</i>
<i>levofloxacin tab 750 mg</i>	<i>20</i>	<i>levoxyl tab 200mcg.....</i>	<i>92</i>
<i>levonest tab.....</i>	<i>82</i>	<i>levoxyl tab 25mcg</i>	<i>92</i>
<i>levonor-eth est tab</i>		<i>levoxyl tab 50mcg</i>	<i>92</i>
<i>0.15-0.02/0.025/0.03 mg &eth est 0.01</i>		<i>levoxyl tab 75mcg</i>	<i>92</i>
<i>mg</i>	<i>82</i>	<i>levoxyl tab 88mcg</i>	<i>92</i>
<i>levonorgestrel & ethinyl estradiol</i>		<i>LEXIVA SUS 50MG/ML.....</i>	<i>14</i>
<i>(91-day) tab 0.15-0.03 mg</i>	<i>82</i>	<i>L-GLUTAMINE POW</i>	<i>120</i>
<i>levonorgestrel & ethinyl estradiol tab</i>		<i>L-GLUTATHION CRY</i>	<i>120</i>
<i>0.15 mg-30 mcg.....</i>	<i>82</i>	<i>lice killing sha</i>	<i>155</i>
<i>levonorgestrel & ethinyl estradiol tab 0.1</i>		<i>lice killing sha 0.33-4%</i>	<i>155</i>

<i>lice treatmt lot 1%</i>	155	LIPOVAN BASE CRE.....	121
<i>lice treatmt sha 0.33-4%</i>	155	<i>lisinopril & hydrochlorothiazide tab</i>	
<i>lice trtmnt liq</i>	155	<i>10-12.5 mg</i>	34
<i>lice trtmnt liq 1%</i>	155	<i>lisinopril & hydrochlorothiazide tab</i>	
<i>licide sha 0.33-4%</i>	155	<i>20-12.5 mg</i>	34
<i>lidocaine hcl local inj 0.5%</i>	8	<i>lisinopril & hydrochlorothiazide tab 20-25</i>	
<i>lidocaine hcl local inj 1%</i>	8	<i>mg</i>	34
<i>lidocaine hcl local inj 2%</i>	8	<i>lisinopril tab 10 mg</i>	34
<i>lidocaine hcl local preservative free (pf)</i>		<i>lisinopril tab 2.5 mg</i>	34
<i>inj 0.5%</i>	8	<i>lisinopril tab 20 mg</i>	34
<i>lidocaine hcl local preservative free (pf)</i>		<i>lisinopril tab 30 mg</i>	34
<i>inj 1.5%</i>	9	<i>lisinopril tab 40 mg</i>	34
<i>lidocaine hcl local preservative free (pf)</i>		<i>lisinopril tab 5 mg</i>	34
<i>inj 1%</i>	8	L-ISOLEUCINE POW	120
<i>lidocaine hcl soln 4%</i>	150	LITEAIRE MIS.....	140
<i>lidocaine hcl urethral/mucosal gel 2%</i>	150	<i>lithium carbonate cap 150 mg</i>	70
<i>lidocaine hcl viscous soln 2%</i>	155	<i>lithium carbonate cap 300 mg</i>	70
<i>lidocaine oint 5%</i>	150	<i>lithium carbonate cap 600 mg</i>	70
<i>lidocaine patch 5%</i>	150	<i>lithium carbonate tab 300 mg</i>	70
<i>lidocaine-prilocaine cream 2.5-2.5%</i> ..	150	<i>lithium carbonate tab er 300 mg</i>	70
LIFESTYLES MIS COLORS	82	<i>lithium carbonate tab er 450 mg</i>	70
LIFESTYLES MIS EXT STR	82	LITHIUM SOL 8MEQ/5ML	71
LIFESTYLES MIS FORM FIT.....	82	<i>little teeth gel 7.5%</i>	155
LIFESTYLES MIS LUBRICAT	82	L-METHIONINE POW	121
LIFESTYLES MIS RIBBED	82	LOHIST-DM SYP 5-2-10MG.....	140
LIFESTYLES MIS SKYN	83	LOKELMA PAK 10GM	79
LIFESTYLES MIS SPERM/LU.....	83	LOKELMA PAK 5GM	79
LIFESTYLES MIS STUDDER	83	LOLLIBASE POW	121
LIFESTYLES MIS ULT/SENS	83	<i>lomedica 24 tab fe</i>	83
LIFESTYLES MIS VIBRA-RI	83	LONSURF TAB 15-6.14	31
LIFESTYLES MIS XPLEASUR	83	LONSURF TAB 20-8.19	31
<i>linezolid for susp 100 mg/5ml</i>	10	<i>loperamide cap 2mg</i>	95
<i>linezolid in sodium chloride iv soln 600</i>		<i>loperamide hcl cap 2 mg</i>	101
<i>mg/300ml-0.9%</i>	10	<i>loperamide hcl liq 1 mg/5ml (0.2 mg/ml)</i>	
<i>linezolid iv soln 600 mg/300ml (2</i>		<i>.....</i>	95
<i>mg/ml)</i>	10	<i>lopinavir-ritonavir soln 400-100 mg/5ml</i>	
<i>linezolid tab 600 mg</i>	10	<i>(80-20 mg/ml)</i>	15
LINZESS CAP 145MCG.....	100	<i>loratadine-d tab 10-240mg</i>	140
LINZESS CAP 290MCG.....	100	<i>loratadine d tab 5-120mg</i>	140
LINZESS CAP 72MCG.....	100	<i>loratadine-d tab 5-120mg</i>	140
<i>liothyronine sodium tab 25 mcg</i>	92	<i>loratadine sol 5mg/5ml</i>	137
<i>liothyronine sodium tab 50 mcg</i>	92	<i>loratadine syp 5mg/5ml</i>	137
<i>liothyronine sodium tab 5 mcg</i>	92	<i>loratadine tab 10mg</i>	137
LIP BALM OIN BASE	121	<i>loratadine tab 10 mg</i>	137
LIP BALM OIN NATURAL.....	121	<i>lorata-dine tab d 24hr</i>	140
LIPOBASE CRE	121	<i>lorazepam conc 2 mg/ml</i>	49
LIPOIC ACID POW	152	<i>lorazepam inj 2 mg/ml</i>	49
LIPOIL OIL.....	121	<i>lorazepam inj 4 mg/ml</i>	49

<i>lorazepam tab 0.5 mg</i>	49	LYRICA CAP 50MG	53
<i>lorazepam tab 1 mg</i>	49	LYRICA CAP 75MG	53
<i>lorazepam tab 2 mg</i>	49	LYRICA CR TAB 165MG.....	71
LORBRENA TAB 100MG	30	LYRICA CR TAB 330MG.....	71
LORBRENA TAB 25MG	30	LYRICA CR TAB 82.5MG.....	71
LORTUSS EX LIQ	140	LYRICA SOL 20MG/ML.....	53
<i>loryna tab 3-0.02mg</i>	83	LYSODREN TAB 500MG	27
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-12.5 mg</i>	36	<i>lyza tab 0.35mg</i>	83
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-25 mg</i>	36	M	
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 50-12.5 mg</i>	36	M.V.I. ADULT INJ	127
<i>losartan potassium tab 100 mg</i>	38	M.V.I PEDIAT INJ.....	127
<i>losartan potassium tab 25 mg</i>	38	<i>mag-al plus liq</i>	94
<i>losartan potassium tab 50 mg</i>	38	<i>mag-al plus liq xs</i>	94
LOTEMAX GEL 0.5%	132	MAG CARBONAT POW HEAVY	117
LOTEMAX OIN 0.5%	133	MAG CITRATE POW TRIBASIC.....	152
LOTEMAX SUS 0.5%.....	133	MAGDELAY TAB 70MG	118
<i>loteprednol etabonate ophth susp 0.5%</i>	133	<i>mag-g tab 500mg</i>	117
<i>lovastatin tab 10 mg</i>	39	MAGN CHLORID POW	118
<i>lovastatin tab 20 mg</i>	39	MAGNEBIND TAB 200	118
<i>lovastatin tab 40 mg</i>	39	MAGNEBIND TAB 300	118
<i>loxapine succinate cap 10 mg</i>	64	<i>magnesium gluconate tab 500 mg (27</i> <i>mg elemental mg)</i>	118
<i>loxapine succinate cap 25 mg</i>	64	<i>magnesium lactate tab er 84 mg</i> <i>(elemental mg) (7 meq)</i>	118
<i>loxapine succinate cap 50 mg</i>	64	<i>magnesium oxide tab 400 mg</i>	94
<i>loxapine succinate cap 5 mg</i>	64	<i>magnesium oxide tab 400 mg (240 mg</i> <i>elemental mg)</i>	118
LOZIBASE MIS	121	<i>magnesium oxide tab 400 mg (241.3 mg</i> <i>elemental mg)</i>	118
L-TYROSINE POW	121	<i>magnesium oxide tab 420 mg</i>	94
LUMIGAN SOL 0.01%	133	<i>magnesium oxide tab 500 mg (mg</i> <i>supplement)</i>	118
LUMIZYME INJ 50MG.....	87	MAGNESIUM POW HYDROXID.....	152
LUPR DEP-PED INJ 11.25MG	90	MAGNESIUM SU INJ 20/500ML	112
LUPR DEP-PED INJ 15MG.....	90	MAGNESIUM SU INJ 2GM/50ML	112
LUPR DEP-PED INJ 3M 30MG.....	90	MAGNESIUM SU INJ 40G/1000	112
LUPR DEP-PED INJ 7.5MG	90	MAGNESIUM SU INJ 4G/100ML.....	112
LUPRON DEPOT INJ 11.25MG	27	MAGNESIUM SU INJ 80MG/ML	113
LUPRON DEPOT INJ 3.75MG.....	27	<i>magnesium sulfate in dextrose 5% iv</i> <i>soln 1 gm/100ml</i>	113
<i>lutra tab</i>	83	<i>magnesium sulfate inj 50%</i>	113
L-VALINE POW	121	<i>magnesium sulfate iv soln 20 gm/500ml</i> <i>(40 mg/ml)</i>	113
LYNPARZA TAB 100MG	26	<i>magnesium sulfate iv soln 2 gm/50ml</i> <i>(40 mg/ml)</i>	113
LYNPARZA TAB 150MG	26	<i>magnesium sulfate iv soln 40 gm/1000ml</i> <i>(40 mg/ml)</i>	113
LYRICA CAP 100MG	53	<i>magnesium sulfate iv soln 4 gm/100ml</i>	
LYRICA CAP 150MG	53		
LYRICA CAP 200MG	53		
LYRICA CAP 225MG	53		
LYRICA CAP 25MG	53		
LYRICA CAP 300MG	53		

(40 mg/ml).....	113	mg	91
magnesium sulfate iv soln 4 gm/50ml		medroxyprogesterone acetate tab 5 mg	
(80 mg/ml).....	113	.....	91
magnesium tab 250mg.....	118	mefloquine hcl tab 250 mg	13
magnesium tab 250 mg.....	118	mega multi tab men.....	127
MAGN OXIDE POW HEAVY	94	mega multi tab women.....	127
MAGN OXIDE POW LIGHT	94	MEGA MULTIVI TAB MEN.....	127
MAGONATE LIQ 1000/5ML	118	MEGA MULTIVI TAB WOMEN.....	127
magonate tab 500mg.....	118	megestrol acetate susp 40 mg/ml	27
MAG-TAB SR TAB 84MG.....	117	megestrol acetate susp 625 mg/5ml ...	27
malathion lotion 0.5%	155	megestrol acetate tab 20 mg	27
MALIC ACID POW.....	152	megestrol acetate tab 40 mg	27
manganese chloride inj 0.1 mg/ml	118	MEKINIST TAB 0.5MG	30
MANNITOL POW.....	152	MEKINIST TAB 2MG	30
mapap cap 500mg.....	2	MEKTOVI TAB 15MG	30
mapap chw 80mg.....	2	melodetta chw 24 fe	83
mapap liq 160/5ml	2	meloxicam tab 15 mg	4
mapap tab 325mg	2	meloxicam tab 7.5 mg	4
mapap tab 500mg	2	memantine hcl cap er 24hr 14 mg	55
mapap tab 500mg/rr	2	memantine hcl cap er 24hr 21 mg	55
maprotiline hcl tab 25 mg	58	memantine hcl cap er 24hr 28 mg	55
maprotiline hcl tab 50 mg	58	memantine hcl cap er 24hr 7 mg	55
maprotiline hcl tab 75 mg	58	memantine hcl oral solution 2 mg/ml ..	55
MAR-COF CG LIQ 225-7.5	140	memantine hcl tab 10 mg	56
marlissa tab 0.15/30.....	83	memantine hcl tab 5 mg.....	55
MARPLAN TAB 10MG	58	memantine hcl tab 5 mg (28) & 10 mg	
MATULANE CAP 50MG	31	(21) titration pak.....	56
MAVYRET TAB 100-40MG.....	17	MENACTRA INJ	112
maximum d3 cap 325mcg.....	127	menstrual tab complete.....	2
MAXX MIS LUBRICAT	83	menstrual tab max st.....	2
MAXX PLUS MIS SPERMICI.....	83	menstrual tab relief	2
m-clear wc liq 100-6.3.....	140	MENTHOL CRY	152
meclizine hcl tab 12.5 mg	96	MENTHOL-L CRY	152
meclizine hcl tab 25 mg.....	96	MENVEO INJ.....	112
medi-bismuth chw 262mg	95	MEPHYTON TAB 5MG.....	127
medi-natural tab 8.6-50mg.....	99	mercaptopurine tab 50 mg.....	24
medi-natural tab 8.6mg.....	99	meropenem iv for soln 1 gm	10
medi-phedryl cap 25mg	137	meropenem iv for soln 500 mg	10
medi-profen sus 40mg/ml	3	mesalamine cap dr 400 mg	97
medi-tabs tab 500mg	2	mesalamine enema 4 gm.....	97
medi-tussin syp dm.....	140	mesalamine rectal enema 4 gm &	
medroxyprogesterone acetate im susp		cleanser wipe kit	97
150 mg/ml	83	mesalamine suppos 1000 mg	97
medroxyprogesterone acetate im susp		mesalamine tab delayed release 800 mg	
prefilled syr 150 mg/ml	83	.....	97
medroxyprogesterone acetate tab 10 mg		MESNEX TAB 400MG	32
.....	91	metformin hcl tab 1000 mg	77
medroxyprogesterone acetate tab 2.5		metformin hcl tab 500 mg	77

<i>metformin hcl tab 850 mg</i>	77	<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	88
<i>metformin hcl tab er 24hr 500 mg</i>	77	<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	88
<i>metformin hcl tab er 24hr 750 mg</i>	77	<i>methylprednisolone tab 16 mg</i>	89
<i>methadone con 10mg/ml</i>	6	<i>methylprednisolone tab 32 mg</i>	89
<i>methadone hcl soln 10 mg/5ml</i>	6	<i>methylprednisolone tab 4 mg</i>	88
<i>methadone hcl soln 5 mg/5ml</i>	6	<i>methylprednisolone tab 8 mg</i>	89
<i>methadone hcl tab 10 mg</i>	7	<i>methylprednisolone tab therapy pack 4 mg (21)</i>	89
<i>methadone hcl tab 5 mg</i>	7	<i>METHYL SULF CRY</i>	152
<i>methazolamide tab 25 mg</i>	46	<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	96
<i>methazolamide tab 50 mg</i>	46	<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	96
<i>methenamine hippurate tab 1 gm</i>	10	<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	96
<i>methimazole tab 10 mg</i>	93	<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	96
<i>methimazole tab 5 mg</i>	92	<i>metolazone tab 10 mg</i>	46
<i>methocarbamol tab 500 mg</i>	72	<i>metolazone tab 2.5 mg</i>	46
<i>methocarbamol tab 750 mg</i>	72	<i>metolazone tab 5 mg</i>	46
<i>methotrexate sodium for inj 1 gm</i>	24	<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	41
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	24	<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	41
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	24	<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	41
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	24	<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	42
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	24	<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	42
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	24	<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	42
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	109	<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	42
<i>methyclothiazide tab 5 mg</i>	46	<i>metoprolol tartrate iv soln 5 mg/5ml</i> ...42	
<i>METHYLCELLUL GEL 1%</i>	121	<i>metoprolol tartrate iv soln cart inj 5 mg/5ml (1 mg/ml)</i>	42
<i>METHYLCELLUL GEL 2%</i>	121	<i>metoprolol tartrate tab 100 mg</i>	42
<i>METHYLCELLUL GEL 3%</i>	121	<i>metoprolol tartrate tab 25 mg</i>	42
<i>METHYLCELLUL POW 1500CPS</i>	121	<i>metoprolol tartrate tab 50 mg</i>	42
<i>METHYLCELLUL POW 4000CPS</i>	121	<i>metronidazole cream 0.75%</i>	152
<i>METHYLPARABE POW</i>	121	<i>metronidazole gel 0.75%</i>	153
<i>methylphenidate hcl soln 10 mg/5ml</i> ...68		<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	11
<i>methylphenidate hcl soln 5 mg/5ml</i>....68		<i>metronidazole lotion 0.75%</i>	153
<i>methylphenidate hcl tab 10 mg</i>	68	<i>metronidazole tab 250 mg</i>	11
<i>methylphenidate hcl tab 20 mg</i>	68		
<i>methylphenidate hcl tab 5 mg</i>	68		
<i>methylphenidate hcl tab er 10 mg</i>.....68			
<i>methylphenidate hcl tab er 20 mg</i>.....68			
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	88		
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	88		
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	88		

<i>metronidazole tab 500 mg</i>	11	<i>mirtazapine orally disintegrating tab 30 mg</i>	58
<i>metronidazole vaginal gel 0.75%</i>	103	<i>mirtazapine orally disintegrating tab 45 mg</i>	58
<i>mexiletine hcl cap 150 mg</i>	38	<i>mirtazapine tab 15 mg</i>	58
<i>mexiletine hcl cap 200 mg</i>	38	<i>mirtazapine tab 30 mg</i>	58
<i>mexiletine hcl cap 250 mg</i>	38	<i>mirtazapine tab 45 mg</i>	58
<i>MG SO4/D5W INJ 10MG/ML</i>	113	<i>mirtazapine tab 7.5 mg</i>	58
<i>mi-acid sus</i>	94	<i>misoprostol tab 100 mcg</i>	101
<i>mi-acid sus max st</i>	94	<i>misoprostol tab 200 mcg</i>	101
<i>mibelas 24 chw fe</i>	83	<i>MITIGARE CAP 0.6MG</i>	1
<i>miconazole 3 kit combinat</i>	103	<i>mitomycin for iv soln 20 mg</i>	23
<i>miconazole 3 kit combo pk</i>	103	<i>mitomycin for iv soln 40 mg</i>	23
<i>miconazole 7 cre 2%</i>	103	<i>mitomycin for iv soln 5 mg</i>	23
<i>miconazole 7 cre tube/kit</i>	103	<i>M-M-R II INJ</i>	112
<i>miconazole 7 sup 100mg</i>	103	<i>M-NATAL PLUS TAB</i>	127
<i>miconazole nitrate cream 2%</i>	147	<i>moexipril hcl tab 15 mg</i>	34
<i>miconazole nitrate vaginal cream 2%</i>	103	<i>moexipril hcl tab 7.5 mg</i>	34
<i>miconazole nitrate vaginal suppos 100 mg</i>	103	<i>molindone hcl tab 10 mg</i>	64
<i>MICROCHAMBER MIS</i>	140	<i>molindone hcl tab 25 mg</i>	64
<i>MICRODERM CRE BASE</i>	121	<i>molindone hcl tab 5 mg</i>	64
<i>MICROSOME CRE BASE</i>	121	<i>mometasone furoate cream 0.1%</i>	149
<i>MICROSPACER MIS</i>	140	<i>mometasone furoate oint 0.1%</i>	149
<i>midodrine hcl tab 10 mg</i>	47	<i>mometasone furoate solution 0.1% (lotion)</i>	149
<i>midodrine hcl tab 2.5 mg</i>	47	<i>montelukast sodium chew tab 4 mg (base equiv)</i>	143
<i>midodrine hcl tab 5 mg</i>	47	<i>montelukast sodium chew tab 5 mg (base equiv)</i>	143
<i>MIDOL MAX ST TAB MENSTRUA</i>	2	<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	143
<i>MIDOL TAB COMPLETE</i>	2	<i>montelukast sodium tab 10 mg (base equiv)</i>	143
<i>miglustat cap 100 mg</i>	87	<i>morphine sulfate inj 10 mg/ml</i>	7
<i>milantex sus ex st</i>	94	<i>morphine sulfate inj 8 mg/ml</i>	7
<i>milantex sus original</i>	94	<i>morphine sulfate iv soln 1 mg/ml</i>	7
<i>mili tab 0.25/35</i>	83	<i>morphine sulfate iv soln pf 10 mg/ml</i>	7
<i>MINERAL OIL</i>	99	<i>morphine sulfate iv soln pf 4 mg/ml</i>	7
<i>MINERAL OIL HEAVY</i>	99	<i>morphine sulfate iv soln pf 8 mg/ml</i>	7
<i>MINERAL OIL LIGHT</i>	99	<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	7
<i>minitran dis 0.1mg/hr</i>	47	<i>morphine sulfate oral soln 10 mg/5ml</i> ...	7
<i>minitran dis 0.2mg/hr</i>	47	<i>morphine sulfate oral soln 20 mg/5ml</i> ...	7
<i>minitran dis 0.4mg/hr</i>	47	<i>morphine sulfate tab 15 mg</i>	7
<i>minitran dis 0.6mg/hr</i>	47	<i>morphine sulfate tab 30 mg</i>	7
<i>minocycline hcl cap 100 mg</i>	22	<i>morphine sulfate tab er 100 mg</i>	7
<i>minocycline hcl cap 50 mg</i>	22	<i>morphine sulfate tab er 15 mg</i>	7
<i>minocycline hcl cap 75 mg</i>	22	<i>morphine sulfate tab er 200 mg</i>	7
<i>minoxidil tab 10 mg</i>	47		
<i>minoxidil tab 2.5 mg</i>	47		
<i>mintox plus chw</i>	94		
<i>mintox sus</i>	94		
<i>mintox sus max st</i>	94		
<i>mirtazapine orally disintegrating tab 15 mg</i>	58		

<i>morphine sulfate tab er 30 mg</i>	7	<i>myzilra tab</i>	83
<i>morphine sulfate tab er 60 mg</i>	7	N	
MORPHINE SUL INJ 10MG/ML	7	<i>nabumetone tab 500 mg</i>	4
MORPHINE SUL INJ 150/30ML.....	7	<i>nabumetone tab 750 mg</i>	4
MORPHINE SUL INJ 2MG/ML	7	<i>nadolol tab 20 mg</i>	42
MORPHINE SUL INJ 4MG/ML	7	<i>nadolol tab 40 mg</i>	42
MORPHINE SUL INJ 5MG/ML	7	<i>nadolol tab 80 mg</i>	42
MORPHINE SUL INJ 8MG/ML	7	NAFCILLIN INJ 10GM	21
MOVANTIK TAB 12.5MG.....	101	<i>nafcillin sodium for inj 1 gm</i>	21
MOVANTIK TAB 25MG	101	<i>nafcillin sodium for inj 2 gm</i>	21
MOVIPREP SOL.....	99	<i>nafcillin sodium for iv soln 10 gm</i>	21
MOXEZA SOL 0.5%	132	<i>nafcillin sodium for iv soln 1 gm</i>	21
<i>moxifloxacin hcl ophth soln 0.5% (base</i> <i>equiv)</i>	132	<i>nafcillin sodium for iv soln 2 gm</i>	21
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	20	NAGLAZYME INJ 1MG/ML.....	87
<i>mucinex allr tab 180mg</i>	137	<i>nail-ex tab 2.5mg</i>	128
<i>mucinex chld liq 100/5ml</i>	140	<i>nalbuphine hcl inj 10 mg/ml</i>	5
<i>mucus relief liq 100/5ml</i>	141	<i>nalbuphine hcl inj 20 mg/ml</i>	5
<i>mucus relief liq 400/20ml</i>	141	<i>naloxone hcl inj 0.4 mg/ml</i>	73
MULTAQ TAB 400MG.....	38	<i>naloxone hcl inj 4 mg/10ml</i>	73
<i>multi-delyn liq</i>	127	<i>naloxone hcl soln cartridge 0.4 mg/ml</i> ..73	
MULTI-DELYN LIQ /IRON	127	<i>naloxone hcl soln prefilled syringe 2</i> <i>mg/2ml</i>	73
<i>multilex-t&m tab</i>	127	<i>naltrexone hcl tab 50 mg</i>	73
<i>multilex tab</i>	127	NAMZARIC CAP	56
<i>multiple vitamins w/ minerals tab</i>	127	NAMZARIC CAP 14-10MG.....	56
<i>multi-vitamn tab</i>	127	NAMZARIC CAP 21-10MG.....	56
<i>mult vitamin tab essent</i>	127	NAMZARIC CAP 28-10MG.....	56
<i>mult vitamin tab mens</i>	127	NAMZARIC CAP 7-10MG	56
<i>mult vitamin tab womens</i>	127	NAPHCN-A SOL OP.....	133
<i>mupirocin oint 2%</i>	146	NA PHOS MONO POW ANHYDROU	153
MYCAMINE INJ 100MG	12	<i>naproxen dr tab 375mg</i>	4
MYCAMINE INJ 50MG	12	<i>naproxen dr tab 500mg</i>	4
<i>mycophenolate mofetil cap 250 mg</i> ...	111	<i>naproxen sodium tab 275 mg</i>	4
<i>mycophenolate mofetil for oral susp 200</i> <i>mg/ml</i>	111	<i>naproxen sodium tab 550 mg</i>	4
<i>mycophenolate mofetil tab 500 mg</i> ...	111	<i>naproxen tab 250 mg</i>	4
<i>mycophenolate sodium tab dr 180 mg</i> <i>(mycophenolic acid equiv)</i>	111	<i>naproxen tab 375 mg</i>	4
<i>mycophenolate sodium tab dr 360 mg</i> <i>(mycophenolic acid equiv)</i>	111	<i>naproxen tab 500 mg</i>	4
MYLOTARG INJ 4.5MG	26	<i>naratriptan hcl tab 1 mg (base equiv)</i> ..69	
<i>myorisan cap 10mg</i>	146	<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	69
<i>myorisan cap 20mg</i>	146	NARCAN SPR.....	73
<i>myorisan cap 30mg</i>	146	NASALCROM SPR 5.2/ACT.....	141
<i>myorisan cap 40mg</i>	146	<i>nasal decong tab 10mg</i>	141
MYRBETRIQ TAB 25MG	102	<i>nasal decong tab 120mg er</i>	141
MYRBETRIQ TAB 50MG	102	<i>nasal decong tab 30mg</i>	141
		NASCOBAL SPR 500MCG.....	128
		NATACYN SUS 5% OP.....	132
		<i>nateglinide tab 120 mg</i>	77

<i>nateglinide tab 60 mg</i>	77	<i>nevirapine tab er 24hr 400 mg</i>	14
<i>nat fiber pow therapy</i>	99	NEW SKIN AER	153
NATPARA INJ 100MCG	90	NEXAVAR TAB 200MG	30
NATPARA INJ 25MCG	90	NIACINAMIDE POW	128
NATPARA INJ 50MCG	90	<i>niacinamide tab 500 mg</i>	128
NATPARA INJ 75MCG	90	<i>niacin cap 500mg</i>	128
NATURAL COND MIS + LUBE	83	<i>niacin cap er 250 mg</i>	128
<i>naturl fiber pow 28.3%</i>	99	<i>niacin cap er 500 mg</i>	128
<i>nat veg lax tab 8.6mg</i>	99	NIACIN POW	128
NEBUPENT INH 300MG	11	<i>niacin tab 100 mg</i>	128
<i>necon tab 0.5/35</i>	83	<i>niacin tab 500 mg</i>	128
<i>necon tab 7/7/7</i>	83	<i>niacin tab er 1000 mg</i> (antihyperlipidemic)	41
<i>nefazodone hcl tab 100 mg</i>	58	<i>niacin tab er 500 mg</i>	128
<i>nefazodone hcl tab 150 mg</i>	58	<i>niacin tab er 500 mg (antihyperlipidemic)</i>	40
<i>nefazodone hcl tab 200 mg</i>	58	<i>niacin tab er 750 mg</i>	128
<i>nefazodone hcl tab 250 mg</i>	58	<i>niacin tab er 750 mg (antihyperlipidemic)</i>	40
<i>nefazodone hcl tab 50 mg</i>	58	NIACIN TR TAB 1000MG	128
<i>neomycin-bacitracin-polymyxin oint</i> ..	146	<i>niacor tab 500mg</i>	41
<i>neomycin-bacitrac zn-polymyx</i> <i>5(3.5)mg-400unt-10000unt op oin</i>	132	<i>nicardipine hcl cap 20 mg</i>	44
<i>neomycin-polymy-gramicid op sol</i> <i>1.75-10000-0.025mg-unt-mg/ml</i>	132	<i>nicardipine hcl cap 30 mg</i>	44
<i>neomycin-polymyxin-dexamethasone</i> <i>ophth oint 0.1%</i>	131	NICE DISTILL LIQ WATER	121
<i>neomycin-polymyxin-dexamethasone</i> <i>ophth susp 0.1%</i>	131	<i>nicorelief gum 2mg mint</i>	73
<i>neomycin-polymyxin-hc ophth susp</i> ...	131	<i>nicorelief gum 2mg orig</i>	73
<i>neomycin-polymyxin-hc otic soln 1%</i> ..	156	<i>nicorelief gum 4mg mint</i>	73
<i>neomycin-polymyxin-hc otic susp 3.5</i> <i>mg/ml-10000 unit/ml-1%</i>	156	<i>nicorelief gum 4mg orig</i>	73
<i>neomycin sulfate tab 500 mg</i>	9	<i>nicotine polacrilex gum 2 mg</i>	73
NEPHRAMINE INJ 5.4%	114	<i>nicotine polacrilex gum 4 mg</i>	73
NEPHRONEX LIQ 0.9/5ML	128	<i>nicotine polacrilex lozenge 2 mg</i>	73
NEPHRO-VITE TAB	128	<i>nicotine polacrilex lozenge 4 mg</i>	73
NERLYNX TAB 40MG	30	<i>nicotine pol loz 4mg mint</i>	73
NEUPOGEN INJ 300/0.5	105	<i>nicotine td dis 7mg/24hr</i>	73
NEUPOGEN INJ 300MCG	105	<i>nicotine td patch 24hr 14 mg/24hr</i>	74
NEUPOGEN INJ 480/0.8	105	<i>nicotine td patch 24hr 21 mg/24hr</i>	74
NEUPOGEN INJ 480MCG	105	<i>nicotine td patch 24hr 7 mg/24hr</i>	74
NEUPRO DIS 1MG/24HR	61	NICOTROL INH	74
NEUPRO DIS 2MG/24HR	61	NICOTROL NS SPR 10MG/ML	74
NEUPRO DIS 3MG/24HR	61	<i>nifedipine tab er 24hr 30 mg</i>	44
NEUPRO DIS 4MG/24HR	61	<i>nifedipine tab er 24hr 60 mg</i>	44
NEUPRO DIS 6MG/24HR	61	<i>nifedipine tab er 24hr 90 mg</i>	44
NEUPRO DIS 8MG/24HR	61	<i>nifedipine tab er 24hr osmotic release 30</i> <i>mg</i>	44
<i>nevirapine susp 50 mg/5ml</i>	14	<i>nifedipine tab er 24hr osmotic release 60</i> <i>mg</i>	44
<i>nevirapine tab 200 mg</i>	14	<i>nifedipine tab er 24hr osmotic release 90</i> <i>mg</i>	44
<i>nevirapine tab er 24hr 100 mg</i>	14		

<i>nikki tab 3-0.02mg</i>	83
<i>nilutamide tab 150 mg</i>	27
<i>nimodipine cap 30 mg</i>	44
<i>NINJACOF-XG LIQ 200-8/5</i>	141
<i>NINLARO CAP 2.3MG</i>	26
<i>NINLARO CAP 3MG</i>	26
<i>NINLARO CAP 4MG</i>	26
<i>NITRO-BID OIN 2%</i>	47
<i>NITRO-DUR DIS 0.3MG/HR</i>	47
<i>NITRO-DUR DIS 0.8MG/HR</i>	47
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	11
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	11
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	11
<i>nitroglycerin sl tab 0.3 mg</i>	47
<i>nitroglycerin sl tab 0.4 mg</i>	47
<i>nitroglycerin sl tab 0.6 mg</i>	47
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i> ..	47
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i> ..	47
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i> ..	47
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i> ..	47
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	48
<i>NITYR TAB 10MG</i>	87
<i>NITYR TAB 2MG</i>	87
<i>NITYR TAB 5MG</i>	87
<i>non-aspirin sus 160/5ml</i>	2
<i>non-aspirin tab 325mg</i>	2
<i>non-aspirin tab 500mg</i>	2
<i>non-aspirin tab 500mg/rr</i>	2
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	83
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	83
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	83
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	83
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	83
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	83
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	83
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	84

<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	84
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	87
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	88
<i>norethindrone acetate tab 5 mg</i>	91
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	83
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	84
<i>norethindrone tab 0.35 mg</i>	84
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	84
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	84
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	84
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	84
<i>norlyroc tab 0.35mg</i>	84
<i>NORMOSOL -M INJ /D5W</i>	115
<i>NORMOSOL -R INJ /D5W</i>	115
<i>NORMOSOL-R INJ PH 7.4</i>	115
<i>NORPACE CAP 100MG CR</i>	38
<i>NORPACE CAP 150MG CR</i>	38
<i>NORTHERA CAP 100MG</i>	47
<i>NORTHERA CAP 200MG</i>	47
<i>NORTHERA CAP 300MG</i>	47
<i>nortrel tab 0.5/35</i>	84
<i>nortrel tab 1/35</i>	84
<i>nortrel tab 7/7/7</i>	84
<i>nortriptyline hcl cap 10 mg</i>	58
<i>nortriptyline hcl cap 25 mg</i>	59
<i>nortriptyline hcl cap 50 mg</i>	59
<i>nortriptyline hcl cap 75 mg</i>	59
<i>nortriptyline hcl soln 10 mg/5ml</i>	59
<i>NORVIR POW 100MG</i>	14
<i>NORVIR SOL 80MG/ML</i>	14
<i>NOVAFERRUM CAP 50MG</i>	106
<i>NOVAFERRUM DRO 15MG/ML</i>	106
<i>NOVAFERRUM LIQ 125</i>	106
<i>NOVOLIN INJ 70/30</i>	75
<i>NOVOLIN INJ FLEXPEN</i>	75
<i>NOVOLIN N INJ U-100</i>	75
<i>NOVOLIN R INJ U-100</i>	75
<i>NOVOLOG INJ 100/ML</i>	75
<i>NOVOLOG INJ FLEXPEN</i>	75

NOVOLOG INJ PENFILL.....	75	<i>mg/ml)</i>	91
NOVOLOG MIX INJ 70/30.....	75	<i>octreotide acetate inj 50 mcg/ml (0.05</i>	
NOVOLOG MIX INJ FLEXPEN.....	75	<i>mg/ml)</i>	90
NOXAFIL SUS 40MG/ML.....	12	OCUVITE CAP ADULT.....	128
NOXAFIL TAB 100MG	12	<i>ocuvite tab lutein</i>	128
NUBEQA TAB 300MG.....	27	<i>ocuvite xtra tab</i>	128
NUCYNTA ER TAB 100MG	7	ODEFSEY TAB	15
NUCYNTA ER TAB 150MG	7	ODOMZO CAP 200MG.....	26
NUCYNTA ER TAB 200MG	7	OFEV CAP 100MG	143
NUCYNTA ER TAB 250MG	7	OFEV CAP 150MG	143
NUCYNTA ER TAB 50MG	7	<i>ofloxacin ophth soln 0.3%</i>	132
NUEDEXTA CAP 20-10MG	71	<i>ofloxacin otic soln 0.3%</i>	156
<i>nu-iron 150 cap 150mg</i>	107	OIL-ALMOND OIL SWEET	153
NULOJIX INJ 250MG.....	111	OIL-COCONUT OIL	153
NULYTELY SOL FLAV PKS.....	99	<i>olanzapine for im inj 10 mg</i>	64
NUPLAZID CAP 34MG	64	<i>olanzapine orally disintegrating tab 10</i>	
NUPLAZID TAB 10MG	64	<i>mg</i>	64
NUPLAZID TAB 17MG	64	<i>olanzapine orally disintegrating tab 15</i>	
<i>nutr-e-sol liq 400/15ml</i>	128	<i>mg</i>	64
NUTRILIPID EMU 20%	114	<i>olanzapine orally disintegrating tab 20</i>	
NUVARING MIS	84	<i>mg</i>	64
<i>nyamyc pow 100000</i>	147	<i>olanzapine orally disintegrating tab 5 mg</i>	
NYMALIZE SOL 30/10ML.....	44	.....	64
<i>nystatin cream 100000 unit/gm</i>	147	<i>olanzapine tab 10 mg</i>	64
<i>nystatin oint 100000 unit/gm</i>	147	<i>olanzapine tab 15 mg</i>	64
<i>nystatin susp 100000 unit/ml</i>	155	<i>olanzapine tab 2.5 mg</i>	64
<i>nystatin tab 500000 unit</i>	12	<i>olanzapine tab 20 mg</i>	64
<i>nystatin topical powder 100000 unit/gm</i>		<i>olanzapine tab 5 mg</i>	64
.....	147	<i>olanzapine tab 7.5 mg</i>	64
<i>nystop pow 100000</i>	148	<i>olmesartan-amlodipine-hydrochlorothiazide</i>	
O		<i>de tab 20-5-12.5 mg</i>	37
OCTAGAM INJ 10/100ML.....	110	<i>olmesartan-amlodipine-hydrochlorothiazide</i>	
OCTAGAM INJ 10GM.....	110	<i>de tab 40-10-12.5 mg</i>	37
OCTAGAM INJ 1GM	110	<i>olmesartan-amlodipine-hydrochlorothiazide</i>	
OCTAGAM INJ 2.5GM.....	110	<i>de tab 40-10-25 mg</i>	37
OCTAGAM INJ 20/200ML.....	110	<i>olmesartan-amlodipine-hydrochlorothiazide</i>	
OCTAGAM INJ 25GM.....	110	<i>de tab 40-5-12.5 mg</i>	37
OCTAGAM INJ 2GM/20ML.....	110	<i>olmesartan-amlodipine-hydrochlorothiazide</i>	
OCTAGAM INJ 30/300ML.....	110	<i>de tab 40-5-25 mg</i>	37
OCTAGAM INJ 5GM	110	<i>olmesartan</i>	
OCTAGAM INJ 5GM/50ML.....	110	<i>medoxomil-hydrochlorothiazide tab</i>	
<i>octreotide acetate inj 1000 mcg/ml (1</i>		<i>20-12.5 mg</i>	36
<i>mg/ml)</i>	91	<i>olmesartan</i>	
<i>octreotide acetate inj 100 mcg/ml (0.1</i>		<i>medoxomil-hydrochlorothiazide tab</i>	
<i>mg/ml)</i>	90	<i>40-12.5 mg</i>	36
<i>octreotide acetate inj 200 mcg/ml (0.2</i>		<i>olmesartan</i>	
<i>mg/ml)</i>	91	<i>medoxomil-hydrochlorothiazide tab</i>	
<i>octreotide acetate inj 500 mcg/ml (0.5</i>		<i>40-25 mg</i>	37

<i>olmesartan medoxomil tab 20 mg</i>	38	<i>oral electrolyte solution</i>	113
<i>olmesartan medoxomil tab 40 mg</i>	38	<i>oralyte sol</i>	113
<i>olmesartan medoxomil tab 5 mg</i>	38	<i>oralyte sol freeze</i>	113
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	133	ORANGE CONC LIQ	121
<i>omeprazole cap delayed release 10 mg</i>	102	ORA-PLUS LIQ	121
<i>omeprazole cap delayed release 20 mg</i>	102	ORASEP SPR	155
<i>omeprazole cap delayed release 40 mg</i>	102	ORA-SWEET SF SYP	121
<i>once daily tab</i>	128	ORA-SWEET SYP	121
<i>once daily tab iron</i>	128	ORFADIN CAP 10MG	87
ONCOVITE TAB	128	ORFADIN CAP 20MG	87
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	96	ORFADIN CAP 2MG	87
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	96	ORFADIN CAP 5MG	87
<i>ondansetron hcl oral soln 4 mg/5ml</i>	96	ORFADIN SUS 4MG/ML	87
<i>ondansetron hcl tab 24 mg</i>	96	ORKAMBI GRA 100-125	143
<i>ondansetron hcl tab 4 mg</i>	96	ORKAMBI GRA 150-188	144
<i>ondansetron hcl tab 8 mg</i>	96	ORKAMBI TAB 100-125	144
<i>ondansetron orally disintegrating tab 4 mg</i>	96	ORKAMBI TAB 200-125	144
<i>ondansetron orally disintegrating tab 8 mg</i>	96	ORNITHINE POW HCL	153
<i>one daily tab</i>	128	<i>orsythia tab</i>	84
<i>one daily tab maximum</i>	128	<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	17
<i>one daily tab men 50+</i>	128	<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	17
<i>one daily tab mens</i>	128	<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	17
<i>one daily tab mens 50+</i>	128	<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	17
<i>one daily tab pls iron</i>	128	<i>oxacillin sodium for inj 10 gm (base equivalent)</i>	22
<i>one daily tab wom 50+</i>	128	<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	21
<i>one daily tab womens</i>	128	<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	22
OPCON-A SOL OP	133	OXALIC ACID CRY	153
OPSUMIT TAB 10MG	48	<i>oxaliplatin for iv inj 100 mg</i>	32
OPTICHAMBER MIS ADV LRG	141	<i>oxaliplatin for iv inj 50 mg</i>	32
OPTICHAMBER MIS ADV MED	141	<i>oxaliplatin iv soln 100 mg/20ml</i>	32
OPTICHAMBER MIS ADV SM	141	<i>oxaliplatin iv soln 50 mg/10ml</i>	32
OPTICHAMBER MIS DIA LG	141	<i>oxandrolone tab 10 mg</i>	74
OPTICHAMBER MIS DIA MD	141	<i>oxandrolone tab 2.5 mg</i>	74
OPTICHAMBER MIS DIAMOND	141	<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	53
OPTICHAMBER MIS DIA SM	141	<i>oxcarbazepine tab 150 mg</i>	53
OPTICHAMBER MIS FACE MAS	141	<i>oxcarbazepine tab 300 mg</i>	53
OPTIHALER MIS	141	<i>oxcarbazepine tab 600 mg</i>	53
ORA-BLEND SF SUS	121	<i>oxybutynin chloride syrup 5 mg/5ml</i> ..	102
ORA-BLEND SUS	121	<i>oxybutynin chloride tab 5 mg</i>	102
ORA-HESIVE PST BASE	121	<i>oxybutynin chloride tab er 24hr 10 mg</i>	

.....	102
oxybutynin chloride tab er 24hr 15 mg	102
oxybutynin chloride tab er 24hr 5 mg	102
oxycodone hcl cap 5 mg	8
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	8
oxycodone hcl soln 5 mg/5ml	8
oxycodone hcl tab 10 mg	8
oxycodone hcl tab 15 mg	8
oxycodone hcl tab 20 mg	8
oxycodone hcl tab 30 mg	8
oxycodone hcl tab 5 mg	8
oxycodone w/ acetaminophen tab 10-325 mg	8
oxycodone w/ acetaminophen tab 2.5-325 mg	8
oxycodone w/ acetaminophen tab 5-325 mg	8
oxycodone w/ acetaminophen tab 7.5-325 mg	8
OXYCONTIN TAB 10MG CR	8
OXYCONTIN TAB 15MG CR	8
OXYCONTIN TAB 20MG CR	8
OXYCONTIN TAB 30MG CR	8
OXYCONTIN TAB 40MG CR	8
OXYCONTIN TAB 60MG CR	8
OXYCONTIN TAB 80MG CR	8
oysco 500+d chw	118
oysco 500+d tab	118
oysco 500 tab 500mg	118
oyst cal/d tab 500mg	118
oyst-cal d tab 250mg	118
oyster shell calcium tab 500 mg	118
oyster shell tab 500mg	118
oyst shell/d tab 500mg	118
OZEMPIC INJ 2/1.5ML	75
P	
pacerone tab 100mg	38
pacerone tab 200mg	38
pacerone tab 400mg	39
paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)	25
paclitaxel iv conc 150 mg/25ml (6 mg/ml)	25
paclitaxel iv conc 300 mg/50ml (6 mg/ml)	25
paclitaxel iv conc 30 mg/5ml (6 mg/ml)	

.....	25
pain & fever chw 80mg	2
pain & fever sol 160/5ml	2
pain & fever sus 160/5ml	2
pain & fever tab 325mg	2
pain & fever tab 500mg	2
pain relief sus 160/5ml	2
pain relief tab 500mg	2
pain relief tab 500mg/rr	2
pain relief tab 650mg	2
pain relieve sus 160/5ml	2
pain relieve tab 325mg	2
pain relieve tab 500mg	2
pain relieve tab 500mg/rr	2
paliperidone tab er 24hr 1.5 mg	64
paliperidone tab er 24hr 3 mg	64
paliperidone tab er 24hr 6 mg	64
paliperidone tab er 24hr 9 mg	64
pamidronate disodium for inj 30 mg	78
pamidronate disodium for inj 90 mg	78
pamidronate disodium iv soln 3 mg/ml	78
pamidronate disodium iv soln 9 mg/ml	78
PAMIDRONATE INJ 6MG/ML	78
PANRETIN GEL 0.1%	153
pantoprazole sodium ec tab 20 mg (base equiv)	102
pantoprazole sodium ec tab 40 mg (base equiv)	102
pantoprazole sodium for iv soln 40 mg (base equiv)	102
PANZYGA SOL 10/100ML	110
PANZYGA SOL 1GM/10ML	110
PANZYGA SOL 2.5/25ML	110
PANZYGA SOL 20/200ML	110
PANZYGA SOL 30/300ML	110
PANZYGA SOL 5GM/50ML	110
paricalcitol cap 1 mcg	128
paricalcitol cap 2 mcg	128
paricalcitol cap 4 mcg	128
paromomycin sulfate cap 250 mg	9
paroxetine hcl tab 10 mg	59
paroxetine hcl tab 20 mg	59
paroxetine hcl tab 30 mg	59
paroxetine hcl tab 40 mg	59
PASER GRA 4GM	16
PAXIL SUS 10MG/5ML	59
PAZEO DRO 0.7%	133
PCCA BASE CRE 7542	121

PCCA MBK MIS FAT ACID	121	<i>peptic relf sus 262/15ml</i>	95
PECTIN POW	95	<i>perindopril erbumine tab 2 mg</i>	34
<i>ped elctrlyt sol freezer</i>	113	<i>perindopril erbumine tab 4 mg</i>	34
<i>ped elctrlyt sol fruit</i>	113	<i>perindopril erbumine tab 8 mg</i>	34
<i>ped elctrlyt sol grape</i>	113	<i>periogard sol 0.12%</i>	155
<i>ped elctrlyt sol unflavrd</i>	113	<i>periomed con 0.63%</i>	155
PEDIA-LAX LIQ 50MG	99	<i>permethrin cream 5%</i>	155
PEDIA-LAX SUP 1GM	99	<i>perphenazine tab 16 mg</i>	64
PEDIARIX INJ 0.5ML	112	<i>perphenazine tab 2 mg</i>	64
PEDVAX HIB INJ	112	<i>perphenazine tab 4 mg</i>	64
PEG 1000 LIQ	121	<i>perphenazine tab 8 mg</i>	64
PEG 300 LIQ	121	PERSERIS INJ 120MG	65
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>		PERSERIS INJ 90MG	64
<i>for soln 236 gm</i>	99	PERUVIAN LIQ BALSAM	153
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>		PFCB CRE	121
<i>for soln 240 gm</i>	99	<i>pharbechlor tab 4mg</i>	137
<i>peg 3350-kcl-sod bicarb-nacl for soln</i>		<i>pharbedryl cap 25mg</i>	137
<i>420 gm</i>	99	<i>pharbedryl cap 50mg</i>	137
PEG 3350 POW	121	<i>pharbetol tab 325mg</i>	2
PEGANONE TAB 250MG	53	<i>pharbetol tab 500mg</i>	2
PEGASYS INJ	17	PHARMABASE CRE ANTIOXID	122
PEGASYS INJ 180MCG/M	17	PHARMABASE CRE COSMETIC	122
PEGASYS INJ PROCLICK	17	PHARMABASE CRE LIGHT	122
PEG BLEND OIN	121	PHARMABASE CRE VAGINAL	122
PEN G PROC INJ 600000	22	<i>phendimetrazine tartrate cap er 24hr</i>	105
PENICILL GK/ INJ DEX 2MU	22	<i>mg</i>	74
PENICILL GK/ INJ DEX 3MU	22	<i>phendimetrazine tartrate tab 35 mg</i>	74
<i>penicillin g potassium for inj 20000000</i>		<i>phenelzine sulfate tab 15 mg</i>	59
<i>unit</i>	22	PHENOBARB INJ 65MG/ML	53
<i>penicillin g potassium for inj 5000000</i>		<i>phenobarbital elixir 20 mg/5ml</i>	53
<i>unit</i>	22	<i>phenobarbital sodium inj 130 mg/ml</i> ...	53
<i>penicillin g sodium for inj 5000000 unit</i>		<i>phenobarbital tab 100 mg</i>	53
.....	22	<i>phenobarbital tab 15 mg</i>	53
<i>penicillin v potassium for soln 125</i>		<i>phenobarbital tab 16.2 mg</i>	53
<i>mg/5ml</i>	22	<i>phenobarbital tab 30 mg</i>	53
<i>penicillin v potassium for soln 250</i>		<i>phenobarbital tab 32.4 mg</i>	53
<i>mg/5ml</i>	22	<i>phenobarbital tab 60 mg</i>	53
<i>penicillin v potassium tab 250 mg</i>	22	<i>phenobarbital tab 64.8 mg</i>	53
<i>penicillin v potassium tab 500 mg</i>	22	<i>phenobarbital tab 97.2 mg</i>	53
PENTACEL INJ	112	PHENOL LIQ	153
PENTAM 300 INJ 300MG	11	<i>phentermine hcl cap 15 mg</i>	74
<i>pentamidine isethionate for soln 300 mg</i>		<i>phentermine hcl cap 30 mg</i>	74
.....	11	<i>phentermine hcl cap 37.5 mg</i>	74
<i>pentoxifylline tab er 400 mg</i>	107	<i>phentermine hcl tab 37.5 mg</i>	74
PENTRAVAN CRE	153	PHENYTEK CAP 200MG	53
PENTRAVAN CRE PLUS	153	PHENYTEK CAP 300MG	53
PEPPERMINT OIL FLAVOR	121	<i>phenytoin chew tab 50 mg</i>	53
<i>peptic relf chw 262mg</i>	95	<i>phenytoin sodium extended cap 100 mg</i>	

.....53	PIQRAY 250MG TAB DOSE .....30
<i>phenytoin sodium extended cap 200 mg</i>	PIQRAY 300MG TAB DOSE .....30
.....54	<i>pirmella tab 1/35</i>.....84
<i>phenytoin sodium extended cap 300 mg</i>	<i>piroxicam cap 10 mg</i> .....4
.....54	<i>piroxicam cap 20 mg</i> .....4
<i>phenytoin sodium inj 50 mg/ml</i> .....54	PLASMA-LYTE INJ -148.....115
<i>phenytoin susp 125 mg/5ml</i>.....54	PLASMA-LYTE INJ -A .....115
<i>philith tab 0.4-35</i> .....84	PLO20 GEL FLOWABLE.....122
PHOS-NAK POW CONCENTR .....118	PLO LECITHIN GEL BASE.....122
PHOSPHATIDYL POW 20% .....153	PLO ULTRAMAX GEL .....122
PHOSPHOLINE SOL 0.125%OP .....133	PNA-HRT BASE CRE .....122
PHYTOBASE CRE.....122	PNV FOLIC AC TAB + IRON .....128
<i>phytonadione inj 10 mg/ml</i> .....128	POCKET CHAMB MIS .....141
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	POCKET SPACE MIS .....141
.....128	<i>podactin pow 1%</i>.....148
PICATO GEL 0.015% .....153	<i>podofilox soln 0.5%</i> .....153
PICATO GEL 0.05%.....153	POLOXAMER POW 407 .....122
PIFELTRO TAB 100MG .....14	POLOX GEL 20%.....122
<i>pilocarpine hcl ophth soln 1%</i>.....133	POLOX GEL 30%.....122
<i>pilocarpine hcl ophth soln 2%</i>.....133	POLYETHYLENE LIQ GLY 400 .....122
<i>pilocarpine hcl ophth soln 4%</i>.....133	POLY GLYCOL LIQ 1450 .....122
<i>pilocarpine hcl tab 5 mg</i>.....155	POLY GLYCOL POW 8000 .....122
<i>pilocarpine hcl tab 7.5 mg</i>.....155	<i>poly-iron cap 150mg</i> .....107
<i>pimozide tab 1 mg</i>.....65	<i>polymyxin b-trimethoprim ophth soln</i>
<i>pimozide tab 2 mg</i>.....65	<i>10000 unit/ml-0.1%</i> .....132
<i>pimtrea tab</i>.....84	POLYOXYL 40 POW STEARATE .....122
<i>pindolol tab 10 mg</i>.....42	POLYSORBATE SOL 20.....153
<i>pindolol tab 5 mg</i> .....42	POLY-TUSSIN LIQ 10-4-10 .....141
<i>pink bismuth chw 262mg</i>.....95	POLY-VI-SOL DRO /IRON .....128
<i>pink bismuth tab 262mg</i>.....95	<i>poly vitamin chw</i> .....128
PINWORM TAB MEDICINE .....11	<i>polyvitamin chw /iron</i>.....128
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	POMALYST CAP 1MG .....27
.....78	POMALYST CAP 2MG .....27
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	POMALYST CAP 3MG .....27
.....78	POMALYST CAP 4MG .....27
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	<i>portia-28 tab</i> .....84
.....78	<i>posaconazole tab delayed release 100</i>
<i>piperacillin sod-tazobactam na for inj</i>	<i>mg</i> .....12
<i>3.375 gm (3-0.375 gm)</i> .....22	<i>potassium chloride 20 meq/l (0.15%) in</i>
<i>piperacillin sod-tazobactam sod for inj</i>	<i>dextrose 5% inj</i>.....115
<i>13.5 gm (12-1.5 gm)</i> .....22	<i>potassium chloride 40 meq/l (0.3%) in</i>
<i>piperacillin sod-tazobactam sod for inj</i>	<i>dextrose 5% inj</i>.....115
<i>2.25 gm (2-0.25 gm)</i> .....22	<i>potassium chloride cap er 10 meq</i>.....113
<i>piperacillin sod-tazobactam sod for inj</i>	<i>potassium chloride cap er 8 meq</i>.....113
<i>4.5 gm (4-0.5 gm)</i> .....22	<i>potassium chloride inj 10 meq/100ml</i> 115
<i>piperacillin sod-tazobactam sod for inj</i>	<i>potassium chloride inj 10 meq/50ml</i> ..115
<i>40.5 gm (36-4.5 gm)</i> .....22	<i>potassium chloride inj 20 meq/100ml</i> 116
PIQRAY 200MG TAB DOSE .....30	<i>potassium chloride inj 20 meq/50ml</i> ..116

<i>potassium chloride inj 2 meq/ml</i>	115	<i>pramipexole dihydrochloride tab 1.5 mg</i>	61
<i>potassium chloride inj 40 meq/100ml</i>	116	<i>pramipexole dihydrochloride tab 1 mg</i>	61
<i>potassium chloride microencapsulated</i>		<i>prasterone (dhea) cap 25 mg</i>	122
<i>crys er tab 10 meq</i>	113	<i>prasugrel hcl tab 10 mg (base equiv)</i>	108
<i>potassium chloride microencapsulated</i>		<i>prasugrel hcl tab 5 mg (base equiv)</i> ..	108
<i>crys er tab 15 meq</i>	113	<i>pravastatin sodium tab 10 mg</i>	39
<i>potassium chloride microencapsulated</i>		<i>pravastatin sodium tab 20 mg</i>	39
<i>crys er tab 20 meq</i>	113	<i>pravastatin sodium tab 40 mg</i>	39
<i>potassium chloride oral soln 10% (20</i>		<i>pravastatin sodium tab 80 mg</i>	39
<i>meq/15ml)</i>	113	<i>praziquantel tab 600 mg</i>	11
<i>potassium chloride oral soln 20% (40</i>		<i>prazosin hcl cap 1 mg</i>	35
<i>meq/15ml)</i>	113	<i>prazosin hcl cap 2 mg</i>	35
<i>potassium chloride powder packet 20</i>		<i>prazosin hcl cap 5 mg</i>	35
<i>meq</i>	113	<i>prednisolone acetate ophth susp 1%</i> .	133
<i>potassium chloride tab er 10 meq</i>	113	<i>prednisolone sodium phosphate oral soln</i>	
<i>potassium chloride tab er 20 meq (1500</i>		<i>25 mg/5ml (base eq)</i>	89
<i>mg)</i>	113	<i>prednisolone sod phosphate oral soln 15</i>	
<i>potassium chloride tab er 8 meq (600</i>		<i>mg/5ml (base equiv)</i>	89
<i>mg)</i>	113	<i>prednisolone sod phosph oral soln 6.7</i>	
<i>potassium citrate tab er 10 meq (1080</i>		<i>mg/5ml (5 mg/5ml base)</i>	89
<i>mg)</i>	102	<i>prednisolone syrup 15 mg/5ml (usp</i>	
<i>potassium citrate tab er 15 meq (1620</i>		<i>solution equivalent)</i>	89
<i>mg)</i>	102	<i>PREDNISONE CON 5MG/ML</i>	89
<i>potassium citrate tab er 5 meq (540 mg)</i>		<i>prednisone oral soln 5 mg/5ml</i>	89
.....	102	<i>prednisone tab 10 mg</i>	89
POTASSIUM CRY BROMIDE	153	<i>prednisone tab 1 mg</i>	89
POTASSIUM CRY IODIDE	153	<i>prednisone tab 2.5 mg</i>	89
POTASSIUM MIS HYDROXID	153	<i>prednisone tab 20 mg</i>	89
POT CITRATE GRA.....	102	<i>prednisone tab 50 mg</i>	89
POT GLUCONAT POW ANHYDROU.....	153	<i>prednisone tab 5 mg</i>	89
POT HYDROXID SOL 10%	153	<i>prednisone tab therapy pack 10 mg (21)</i>	
POT HYDROXID SOL 20%	153	.....	89
POT NITRATE GRA	153	<i>prednisone tab therapy pack 10 mg (48)</i>	
POT NITRATE GRA PURIFIED	153	.....	89
POT SORBATE CRY.....	122	<i>prednisone tab therapy pack 5 mg (21)</i>	
PRADAXA CAP 110MG.....	105	.....	89
PRADAXA CAP 150MG.....	105	<i>prednisone tab therapy pack 5 mg (48)</i>	
PRADAXA CAP 75MG	104	.....	89
PRALUENT INJ 150MG/ML	41	<i>PRED SOD PHO SOL 1% OP</i>	133
PRALUENT INJ 75MG/ML.....	41	<i>pregabalin cap 100 mg</i>	54
<i>pramipexole dihydrochloride tab 0.125</i>		<i>pregabalin cap 150 mg</i>	54
<i>mg</i>	61	<i>pregabalin cap 200 mg</i>	54
<i>pramipexole dihydrochloride tab 0.25 mg</i>		<i>pregabalin cap 225 mg</i>	54
.....	61	<i>pregabalin cap 25 mg</i>	54
<i>pramipexole dihydrochloride tab 0.5 mg</i>		<i>pregabalin cap 300 mg</i>	54
.....	61	<i>pregabalin cap 50 mg</i>	54
<i>pramipexole dihydrochloride tab 0.75 mg</i>		<i>pregabalin cap 75 mg</i>	54
.....	61		

<i>pregabalin soln 20 mg/ml</i>	54	<i>procto-med cre hc 2.5%</i>	153
PREMASOL SOL 10%	114	<i>procto-pak cre 1%</i>	153
PRENATAL PLUS	128	<i>proctozone cre -hc 2.5%</i>	153
PRENATAL TAB	129	PROFE CAP 180MG	107
PRENATAL TAB 27-0.8MG	129	PROFE FORTE CAP 155-1MG	129
PRENATAL TAB 27-1MG	129	PROGLYCEM SUS 50MG/ML	89
PRENATAL TAB 28-0.8MG	129	PROGRAF GRA 0.2MG	111
PRENATAL TAB LOW IRON	129	PROGRAF GRA 1MG	111
PRENATAL TAB PLUS	129	PROLASTIN-C INJ 1000MG	144
PRENATAL VIT TAB LOW IRON	129	PROLENSA SOL 0.07%	133
PRESERVISION CAP AREDS	129	PROLIA SOL 60MG/ML	91
PRESERVISION CAP AREDS 2	129	PROMACTA POW 12.5MG	107
PRESERVISION CAP LUTEIN	129	PROMACTA TAB 12.5MG	107
PRESERVISION TAB AREDS	129	PROMACTA TAB 25MG	107
<i>prevalite pow 4gm</i>	41	PROMACTA TAB 50MG	107
<i>prevalite pow 4gm pk</i>	41	PROMACTA TAB 75MG	107
<i>previfem tab</i>	84	<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	141
PREZCOBIX TAB 800-150	15	<i>promethazine hcl inj 25 mg/ml</i>	96
PREZISTA SUS 100MG/ML	14	<i>promethazine hcl inj 50 mg/ml</i>	96
PREZISTA TAB 150MG	14	<i>promethazine hcl syrup 6.25 mg/5ml</i> ..	96
PREZISTA TAB 600MG	14	<i>promethazine hcl tab 12.5 mg</i>	96
PREZISTA TAB 75MG	14	<i>promethazine hcl tab 25 mg</i>	96
PREZISTA TAB 800MG	14	<i>promethazine hcl tab 50 mg</i>	96
PRIFTIN TAB 150MG	16	<i>promethazine w/ codeine syrup 6.25-10</i> <i>mg/5ml</i>	141
<i>primaquine phosphate tab 26.3 mg (15</i> <i>mg base)</i>	13	<i>prometh vc/ syp codeine</i>	141
PRIMAQUINE TAB 26.3MG	13	<i>propafenone hcl cap er 12hr 225 mg</i> ...	39
<i>primidone tab 250 mg</i>	54	<i>propafenone hcl cap er 12hr 325 mg</i> ...	39
<i>primidone tab 50 mg</i>	54	<i>propafenone hcl cap er 12hr 425 mg</i> ...	39
PRIVIGEN INJ 10GRAMS	110	<i>propafenone hcl tab 150 mg</i>	39
PRIVIGEN INJ 20GRAMS	110	<i>propafenone hcl tab 225 mg</i>	39
PRIVIGEN INJ 40GRAMS	110	<i>propafenone hcl tab 300 mg</i>	39
PRIVIGEN INJ 5 GRAMS	110	<i>proparacaine hcl ophth soln 0.5%</i>	134
<i>probenecid tab 500 mg</i>	1	<i>propranolol & hydrochlorothiazide tab</i> <i>40-25 mg</i>	41
PROCALAMINE INJ 3%	114	<i>propranolol & hydrochlorothiazide tab</i> <i>80-25 mg</i>	41
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	96	<i>propranolol hcl cap er 24hr 120 mg</i>	42
<i>prochlorperazine maleate tab 10 mg</i> <i>(base equivalent)</i>	96	<i>propranolol hcl cap er 24hr 160 mg</i>	42
<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i>	96	<i>propranolol hcl cap er 24hr 60 mg</i>	42
<i>prochlorperazine suppos 25 mg</i>	96	<i>propranolol hcl cap er 24hr 80 mg</i>	42
PROCRIT INJ 10000/ML	105	<i>propranolol hcl oral soln 20 mg/5ml</i> ...	42
PROCRIT INJ 2000/ML	105	<i>propranolol hcl oral soln 40 mg/5ml</i> ...	42
PROCRIT INJ 20000/ML	105	<i>propranolol hcl tab 10 mg</i>	42
PROCRIT INJ 3000/ML	105	<i>propranolol hcl tab 20 mg</i>	42
PROCRIT INJ 4000/ML	105	<i>propranolol hcl tab 40 mg</i>	42
PROCRIT INJ 40000/ML	105	<i>propranolol hcl tab 60 mg</i>	42

<i>propranolol hcl tab 80 mg</i>	42	<i>q-sorb cap 75mg</i>	122
PROPYLENE GL LIQ	122	<i>q-sorb co-q cap 100mg</i>	122
PROPYLENE LIQ GLYCOL	122	QSYMIA CAP 11.25-69	74
<i>propylthiouracil tab 50 mg</i>	93	QSYMIA CAP 15-92MG	74
PROPYPARABEN POW	122	QSYMIA CAP 3.75-23	74
PROQUAD INJ.....	112	QSYMIA CAP 7.5-46MG	74
PRO-RED AC SYP 5-1-9/5	141	QUADRACEL INJ	112
<i>prosght tab</i>	129	<i>quasense tab</i>	84
PROSOL INJ 20%	114	<i>quetiapine fumarate tab 100 mg</i>	65
<i>protriptyline hcl tab 10 mg</i>	59	<i>quetiapine fumarate tab 200 mg</i>	65
<i>protriptyline hcl tab 5 mg</i>	59	<i>quetiapine fumarate tab 25 mg</i>	65
<i>pseudoeph-chlorphen w/ hydrocodone</i>		<i>quetiapine fumarate tab 300 mg</i>	65
<i>soln 60-4-5 mg/5ml</i>	141	<i>quetiapine fumarate tab 400 mg</i>	65
<i>pseudoephed-bromphen-dm syrup</i>		<i>quetiapine fumarate tab 50 mg</i>	65
<i>30-2-10 mg/5ml</i>	141	<i>quetiapine fumarate tab er 24hr 150 mg</i>	
<i>pseudoephedrine hcl tab 30 mg</i>	141	.....	65
<i>pseudoephedrine hcl tab 60 mg</i>	141	<i>quetiapine fumarate tab er 24hr 200 mg</i>	
<i>pseudoephedrine hcl tab er 12hr 120 mg</i>		.....	65
.....	141	<i>quetiapine fumarate tab er 24hr 300 mg</i>	
<i>pseudoephedr tab 120mg er</i>	141	.....	65
PSYLLIUM POW HUSK 95%	153	<i>quetiapine fumarate tab er 24hr 400 mg</i>	
PULMICORT INH 180MCG.....	145	.....	65
PULMICORT INH 90MCG	145	<i>quetiapine fumarate tab er 24hr 50 mg</i>	
PULMOZYME SOL 1MG/ML.....	144	.....	65
PURIXAN SUS 20MG/ML	24	<i>quinapril hcl tab 10 mg</i>	35
PX CALAMINE LOT.....	153	<i>quinapril hcl tab 20 mg</i>	35
<i>pyrazinamide tab 500 mg</i>	16	<i>quinapril hcl tab 40 mg</i>	35
<i>pyridostigmine bromide tab 60 mg</i>	71	<i>quinapril hcl tab 5 mg</i>	34
<i>pyridoxine hcl inj 100 mg/ml</i>	129	<i>quinapril-hydrochlorothiazide tab 10-12.5</i>	
<i>pyridoxine hcl tab 100 mg</i>	129	<i>mg</i>	34
<i>pyridoxine hcl tab 25 mg</i>	129	<i>quinapril-hydrochlorothiazide tab 20-12.5</i>	
<i>pyridoxine hcl tab 50 mg</i>	129	<i>mg</i>	34
PYRUVIC ACID LIQ.....	153	<i>quinapril-hydrochlorothiazide tab 20-25</i>	
Q		<i>mg</i>	34
<i>qc allergy tab 10mg</i>	137	<i>quinidine gluconate tab er 324 mg</i>	39
<i>qc antacid sus</i>	94	<i>quinidine sulfate tab 200 mg</i>	39
<i>qc antacid sus anti-gas</i>	94	<i>quinidine sulfate tab 300 mg</i>	39
<i>qc aspirin tab 325mg</i>	2	<i>quinine sulfate cap 324 mg</i>	13
<i>qc aspirin tab 325mg ec</i>	2	R	
<i>qc epsom gra salt</i>	99	RABAVERT INJ.....	112
<i>qc laxative sup 10mg</i>	99	<i>rabeprazole sodium ec tab 20 mg</i>	102
<i>qc natural pow vegetabl</i>	99	RA CALAMINE LOT	153
<i>qc senna tab 8.6mg</i>	99	<i>ra cough dm sus 30mg/5ml</i>	141
<i>qc suphedrin tab 120mg sr</i>	141	<i>ra epsom gra salt</i>	99
<i>qc therin-m tab</i>	129	RA EPSOM GRA SALT/LVN.....	99
Q-DERM CRE.....	122	<i>ra glycerin sup 80.7%</i>	99
<i>q-sorb cap 150mg</i>	122	<i>ra lice liq max st</i>	155
<i>q-sorb cap 30mg</i>	122	<i>raloxifene hcl tab 60 mg</i>	91

<i>ra menstrual tab complete</i>	2	<i>repaglinide tab 0.5 mg</i>	78
<i>ra menstrual tab relief</i>	3	<i>repaglinide tab 1 mg</i>	78
<i>ramipril cap 1.25 mg</i>	35	<i>repaglinide tab 2 mg</i>	78
<i>ramipril cap 10 mg</i>	35	RESCRIPTOR TAB 200MG.....	14
<i>ramipril cap 2.5 mg</i>	35	RESORCINOL POW	153
<i>ramipril cap 5 mg</i>	35	RESTASIS EMU 0.05%.....	134
<i>ranitidine hcl inj 150 mg/6ml (25 mg/ml)</i>	97	RESTASIS MUL EMU 0.05%	134
<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>	97	REVLIMID CAP 10MG	27
<i>ranitidine hcl syrup 15 mg/ml (75</i> <i>mg/5ml)</i>	97	REVLIMID CAP 15MG	28
<i>ranitidine hcl tab 150 mg</i>	97	REVLIMID CAP 2.5MG	27
<i>ranitidine hcl tab 300 mg</i>	97	REVLIMID CAP 20MG	28
<i>ranolazine tab er 12hr 1000 mg</i>	47	REVLIMID CAP 25MG	28
<i>ranolazine tab er 12hr 500 mg</i>	47	REVLIMID CAP 5MG	27
RAPAMUNE SOL 1MG/ML.....	111	REXULTI TAB 0.25MG.....	65
<i>rasagiline mesylate tab 0.5 mg (base</i> <i>equiv)</i>	61	REXULTI TAB 0.5MG	65
<i>rasagiline mesylate tab 1 mg (base</i> <i>equiv)</i>	61	REXULTI TAB 1MG	65
RASPBERRY LIQ FLAVOR.....	122	REXULTI TAB 2MG	65
RAYALDEE CAP 30MCG	129	REXULTI TAB 3MG	65
RDT BASE POW	122	REXULTI TAB 4MG	65
REALITY MIS LUBRICAT	84	REYATAZ POW 50MG.....	14
REALITY ULTR MIS TEXTURED	84	RHOPRESSA SOL 0.02%	133
REALITY ULTR MIS THIN.....	84	<i>ribavirin cap 200 mg</i>	17
REBETOL SOL 40MG/ML	17	<i>ribavirin tab 200 mg</i>	17
<i>reclipsen tab</i>	84	<i>ribavirin tab 600 mg</i>	17
RECOMBIVA HB INJ 10MCG/ML.....	112	RID COMPLETE KIT LICE	155
RECOMBIVA-HB INJ 40MCG/ML	112	RID ESS LICE KIT 0.33-4%	155
RECOMBIVA HB INJ 5MCG/0.5.....	112	<i>rid licekill sha 0.33-4%</i>	155
RED YEAST POW RICE	153	<i>rid lice kil sha 0.33-4%</i>	155
<i>reeses med sus pinworm</i>	11	<i>rifabutin cap 150 mg</i>	16
REFENESEN TAB CHST CNG	141	<i>rifampin cap 150 mg</i>	16
REGRANEX GEL 0.01%	155	<i>rifampin cap 300 mg</i>	16
<i>reguloid pow 28.3%</i>	99	<i>rifampin for inj 600 mg</i>	16
<i>reguloid pow 48.57%</i>	99	RIFATER TAB	16
<i>reguloid pow 58.6%</i>	99	<i>riluzole tab 50 mg</i>	71
RELENZA MIS DISKHALE	17	<i>rimantadine hydrochloride tab 100 mg</i> 17	
RELISTOR INJ 12/0.6ML	101	RISACAL-D TAB	118
RELISTOR INJ 8/0.4ML	101	<i>risedronate sodium tab 150 mg</i>	78
REMICADE INJ 100MG	109	<i>risedronate sodium tab 35 mg</i>	78
REMODULIN INJ 10MG/ML	48	<i>risedronate sodium tab 5 mg</i>	78
REMODULIN INJ 1MG/ML	48	<i>risedronate sodium tab delayed release</i> <i>35 mg</i>	78
REMODULIN INJ 2.5MG/ML	48	RISPERDAL INJ 12.5MG.....	65
REMODULIN INJ 5MG/ML	48	RISPERDAL INJ 25MG.....	65
<i>rena-vite tab</i>	129	RISPERDAL INJ 37.5MG.....	65
		RISPERDAL INJ 50MG.....	65
		<i>risperidone orally disintegrating tab 0.25</i> <i>mg</i>	65
		<i>risperidone orally disintegrating tab 0.5</i> <i>mg</i>	65

<i>mg</i>	65	<i>ropinirole hydrochloride tab 1 mg</i>	61
<i>risperidone orally disintegrating tab 1 mg</i>	65	<i>ropinirole hydrochloride tab 2 mg</i>	61
<i>risperidone orally disintegrating tab 2 mg</i>	65	<i>ropinirole hydrochloride tab 3 mg</i>	61
<i>risperidone orally disintegrating tab 3 mg</i>	65	<i>ropinirole hydrochloride tab 4 mg</i>	61
<i>risperidone orally disintegrating tab 4 mg</i>	65	<i>ropinirole hydrochloride tab 5 mg</i>	61
<i>risperidone soln 1 mg/ml</i>	65	<i>rosadan cre 0.75%</i>	153
<i>risperidone tab 0.25 mg</i>	65	<i>rosuvastatin calcium tab 10 mg</i>	39
<i>risperidone tab 0.5 mg</i>	65	<i>rosuvastatin calcium tab 20 mg</i>	40
<i>risperidone tab 1 mg</i>	65	<i>rosuvastatin calcium tab 40 mg</i>	40
<i>risperidone tab 2 mg</i>	65	<i>rosuvastatin calcium tab 5 mg</i>	39
<i>risperidone tab 3 mg</i>	66	ROTARIX SUS.....	112
<i>risperidone tab 4 mg</i>	66	ROTATEQ SOL	112
RITEFLO MIS.....	141	<i>roweepra tab 1000mg</i>	54
<i>ritonavir tab 100 mg</i>	14	<i>roweepra tab 500mg</i>	54
RITUXAN INJ 100MG	26	<i>roweepra tab 750mg</i>	54
RITUXAN INJ 500MG	26	<i>roweepra xr tab 500mg xr</i>	54
RITUXAN INJ HYCELA.....	26	<i>roweepra xr tab 750mg xr</i>	54
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	56	RUBRACA TAB 200MG	26
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	56	RUBRACA TAB 250MG	26
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	56	RUBRACA TAB 300MG	26
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	56	<i>rulox sus</i>	94
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	56	RYDAPT CAP 25MG	30
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	56	RYDEX LIQ.....	141
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	56	<i>rynex pse liq</i>	142
<i>rivelsa tab</i>	84	S	
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	69	SACCHARIN POW	122
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	69	SACCHARIN POW SODIUM	122
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	70	SAFFLOWER OIL	153
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	70	SALICYLIC POW ACID.....	153
<i>robafen dm syp 100-10/5</i>	141	SALTSTABLE CRE.....	122
<i>robafen syp 100/5ml</i>	141	SANDIMMUNE SOL 100MG/ML	111
<i>ropinirole hydrochloride tab 0.25 mg</i>	61	<i>sani-suppl sup pediatri</i>	99
<i>ropinirole hydrochloride tab 0.5 mg</i>	61	SANTYL OIN 250/GM	155
		SAPHRIS SUB 10MG.....	66
		SAPHRIS SUB 2.5MG.....	66
		SAPHRIS SUB 5MG	66
		<i>sb allergy tab 10mg</i>	137
		<i>sb allergy tab 25mg med</i>	137
		<i>sb antacid sus anti-gas</i>	94
		<i>sb cgh contr liq dm</i>	142
		<i>sb docusate tab 8.6-50mg</i>	99
		<i>sb fib lax pow 33%</i>	99
		<i>sb laxative sup 10mg</i>	99
		<i>sb senna-lax tab 8.6mg</i>	99
		<i>sb triple oin antibiot</i>	146
		<i>scopolamine td patch 72hr 1 mg/3days</i>	96
		<i>selegiline hcl cap 5 mg</i>	61

<i>selegiline hcl tab 5 mg</i>	61	<i>siltussin-dm liq max st</i>	142
<i>selenium sulfide lotion 2.5%</i>	148	<i>siltussin-dm syp alc free</i>	142
SELZENTRY SOL 20MG/ML	14	<i>siltussin sa syp 100/5ml</i>	142
SELZENTRY TAB 150MG	14	<i>silver sulfadiazine cream 1%</i>	146
SELZENTRY TAB 25MG	14	SIMBRINZA SUS 1-0.2%.....	134
SELZENTRY TAB 300MG	14	SIMETHICONE LIQ	101
SELZENTRY TAB 75MG	14	SIMPLE SYP	122
<i>senexon-s tab 8.6-50mg</i>	99	<i>simvastatin tab 10 mg</i>	40
<i>senexon tab 8.6mg</i>	99	<i>simvastatin tab 20 mg</i>	40
<i>senna-lax tab 8.6mg</i>	100	<i>simvastatin tab 40 mg</i>	40
<i>senna plus tab 8.6-50mg</i>	99	<i>simvastatin tab 5 mg</i>	40
<i>senna-s tab 8.6-50mg</i>	100	<i>simvastatin tab 80 mg</i>	40
<i>senna-tabs tab 8.6mg</i>	100	<i>sirolimus oral soln 1 mg/ml</i>	111
<i>senna-time s tab 8.6-50mg</i>	100	<i>sirolimus tab 0.5 mg</i>	111
<i>senna-time tab 8.6mg</i>	100	<i>sirolimus tab 1 mg</i>	111
<i>sennosides-docusate sodium tab 8.6-50</i> <i>mg</i>	100	<i>sirolimus tab 2 mg</i>	111
<i>sennosides syrup 8.8 mg/5ml</i>	100	SIRTURO TAB 100MG	16
<i>senno tab 8.6mg</i>	100	SIVEXTRO INJ 200MG	11
SENSIPAR TAB 30MG	79	SIVEXTRO TAB 200MG	11
SENSIPAR TAB 60MG	79	<i>slo-niacin tab 250mg cr</i>	129
SENSIPAR TAB 90MG	79	SLO-NIACIN TAB 500MG CR	129
<i>senry tab</i>	129	SLO-NIACIN TAB 750MG CR	129
<i>senry tab senior</i>	129	<i>slow release tab 47.5mg</i>	107
SEREVENT DIS AER 50MCG	138	SLOW REL FE TAB 143MG CR	107
<i>sertraline hcl oral concentrate for</i> <i>solution 20 mg/ml</i>	59	<i>sm all day tab allergy</i>	137
<i>sertraline hcl tab 100 mg</i>	59	<i>sm allergy tab 25mg rlf</i>	137
<i>sertraline hcl tab 25 mg</i>	59	<i>sm allergy tab 4mg</i>	137
<i>sertraline hcl tab 50 mg</i>	59	<i>sm animal chw shapes</i>	129
<i>sevelamer carbonate packet 0.8 gm</i>	91	<i>sm antacid/ sus antigas</i>	94
<i>sevelamer carbonate packet 2.4 gm</i>	91	<i>sm antacid sus advanced</i>	94
<i>sevelamer carbonate tab 800 mg</i>	91	<i>sm antacid sus anti-gas</i>	94
<i>sharobel tab 0.35mg</i>	84	<i>sm antibioti oin 500/gm</i>	146
SHEA BUTTER MIS	122	<i>sm anti-diar tab 2mg</i>	95
SHINGRIX INJ 50MCG	112	<i>sm antifunql cre 1%</i>	148
SIGNIFOR INJ 0.3MG/ML	91	<i>sm antifunql cre 2%</i>	148
SIGNIFOR INJ 0.6MG/ML	91	<i>sm aspirin tab 325mg</i>	3
SIGNIFOR INJ 0.9MG/ML	91	<i>sm aspirin tab 325mg ec</i>	3
<i>silace liq 10mg/ml</i>	100	<i>sm balanced tab b-100</i>	129
<i>silace syp 60/15ml</i>	100	<i>sm balanced tab b-50</i>	129
<i>siladryl alr liq 12.5/5ml</i>	137	<i>sm ca/mg/zn tab</i>	118
<i>sildenafil citrate tab 20 mg</i>	48	SM CALAMINE LOT	153
SILENOR TAB 3MG.....	68	SM CALAMINE LOT PHENOLAT	153
SILENOR TAB 6MG.....	68	<i>sm calcium/d tab 600-400</i>	118
<i>siltuss das liq 100/5ml</i>	142	<i>sm calcium chw</i>	118
<i>siltussin dm liq das</i>	142	<i>sm complete tab</i>	129
<i>siltussin-dm liq diabetic</i>	142	<i>sm complete tab adv form</i>	129
		<i>sm complete tab senior</i>	129
		<i>sm coq-10 cap 50mg</i>	122

SM CORAL CAL TAB 1000MG	118
<i>sm fiber pow 28.3%</i>	100
<i>sm fiber pow 48.57%</i>	100
<i>sm fiber pow 58.6%</i>	100
<i>sm folic acd tab 400mcg</i>	129
<i>sm ibuprofen tab 100mg jr</i>	4
<i>sm iron slow tab 160mg cr</i>	107
<i>sm iron tab 325mg</i>	107
<i>sm laxative sup 10mg</i>	100
<i>sm laxative tab 5mg ec</i>	100
<i>sm lice soln kit</i>	155
<i>sm loratadin tab 10mg</i>	137
<i>sm micon 7 sup 100mg</i>	103
<i>sm multiple tab vit/iron</i>	129
<i>sm multiple tab vitamins</i>	129
<i>sm nasal dec tab 30mg</i>	142
<i>sm nicotine gum 2mg</i>	74
<i>sm nicotine gum 2mg mint</i>	74
<i>sm nicotine gum 4mg</i>	74
<i>sm nicotine gum 4mg mint</i>	74
<i>sm nicotine loz 2mg mint</i>	74
<i>sm nicotine loz 4mg mint</i>	74
<i>sm opti-vita tab</i>	129
SM PRENATAL TAB VITAMINS	129
<i>sm senna lax tab 8.6mg</i>	100
<i>sm senna lax tab max str</i>	100
<i>sm stomach sus 262/15ml</i>	95
<i>sm triple oin antibiot</i>	147
<i>sm tussin cf liq</i>	142
<i>sm tussin dm syp 100-10/5</i>	142
<i>sm tussin syp dm</i>	142
<i>sm vitamin c chw 500mg</i>	130
<i>sm vitamin c tab 1000mg</i>	130
<i>sm vitamin c tab 250mg</i>	130
<i>sm vitamin e cap 1000unit</i>	130
<i>sm vitamin e cap 200unit</i>	130
<i>sm vitamin e cap 400unit</i>	130
<i>sm vit b-12 tab 1000 tr</i>	129
<i>sm vit b-12 tab 100mcg</i>	129
<i>sm vit b-12 tab 500mcg</i>	129
<i>sm vit b-6 tab 100mg</i>	129
<i>sm vit c/rh tab 1000mg</i>	130
<i>sm zinc tab 50mg</i>	118
SOD ACETATE POW ANHYDR	118
SOD BENZOATE POW	122
SOD BROMIDE GRA	154
SOD CHLORIDE GRA	118
SOD FLUORIDE POW	154

SODIUM BORAT POW	154
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	113
<i>sodium chloride irrigation soln 0.9%</i> ..	155
<i>sodium chloride iv soln 0.45%</i>	116
<i>sodium chloride iv soln 0.9%</i>	116
<i>sodium chloride iv soln 3%</i>	116
<i>sodium chloride iv soln 5%</i>	116
<i>sodium chloride tab 1 gm</i>	118
SODIUM CITRA GRA DIHYDRAT	154
<i>sodium fluoride chew; tab; 1.1 (0.5 f)</i> <i>mg/ml soln</i>	113
SODIUM MIS HYDROXID	154
<i>sodium phenylbutyrate oral powder 3</i> <i>gm/teaspoonful</i>	87
<i>sodium phenylbutyrate tab 500 mg</i>	87
<i>sodium polystyrene sulfonate oral susp</i> <i>15 gm/60ml</i>	79
<i>sodium polystyrene sulfonate powder</i> ..	79
SODIUM POW BICARBON	95, 154
SOD LAURYL POW SULFATE	122
SOD METABISU GRA ANHYDR	154
SOD PERBORAT CRY	154
SOD PHOSPHAT GRA DIBASIC	154
SOD PROPION POW	154
SOD SACCHARI GRA	122
SOD SULFITE POW ANHYDROU	154
<i>solifenacin succinate tab 10 mg</i>	103
<i>solifenacin succinate tab 5 mg</i>	102
SOLQUA INJ 100/33	76
SOLTAMOX SOL 10MG/5ML	27
SOLU-CORTEF INJ 1000MG	89
SOLU-CORTEF INJ 100MG	89
SOLU-CORTEF INJ 250MG	89
SOLU-CORTEF INJ 500MG	89
SOMATULINE INJ 120/.5ML	91
SOMATULINE INJ 60/0.2ML	91
SOMATULINE INJ 90/0.3ML	91
SOMAVERT INJ 10MG	91
SOMAVERT INJ 15MG	91
SOMAVERT INJ 20MG	91
SOMAVERT INJ 25MG	91
SOMAVERT INJ 30MG	91
<i>soothe&cool cre inzo 2%</i>	148
SORBIC ACID POW	122
SORBITOL SOL 70%	122
<i>sorine tab 120mg</i>	39
<i>sorine tab 160mg</i>	39

<i>sorine tab 240mg</i>	39	<i>stress formu tab</i>	130
<i>sorine tab 80mg</i>	39	<i>stress formu tab w/iron</i>	130
<i>sotalol hcl (afib/afl) tab 120 mg</i>	39	STRIBILD TAB	15
<i>sotalol hcl (afib/afl) tab 160 mg</i>	39	STUART ONE CAP	130
<i>sotalol hcl (afib/afl) tab 80 mg</i>	39	<i>sucralfate tab 1 gm</i>	101
<i>sotalol hcl tab 120 mg</i>	39	<i>sudogest pe tab 10mg</i>	142
<i>sotalol hcl tab 160 mg</i>	39	<i>sudogest tab 120mg er</i>	142
<i>sotalol hcl tab 240 mg</i>	39	<i>sudogest tab 30mg</i>	142
<i>sotalol hcl tab 80 mg</i>	39	<i>sudogest tab 60mg</i>	142
SOYBEAN OIL.....	154	<i>sulfacetamide sodium lotion 10% (acne)</i>	146
SPERMACETI MIS.....	154	<i>sulfacetamide sodium ophth oint 10%</i>	132
<i>spironolactone & hydrochlorothiazide tab</i> <i>25-25 mg</i>	46	<i>sulfacetamide sodium ophth soln 10%</i>	132
<i>spironolactone tab 100 mg</i>	35	<i>sulfacetamide sodium-prednisolone</i> <i>ophth soln 10-0.23(0.25)%</i>	131
<i>spironolactone tab 25 mg</i>	35	SULFADIAZINE TAB 500MG	9
<i>spironolactone tab 50 mg</i>	35	<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i>	11
<i>sprintec 28 tab 28 day</i>	84	<i>sulfamethoxazole-trimethoprim susp</i> <i>200-40 mg/5ml</i>	11
SPRITAM TAB 1000MG	54	<i>sulfamethoxazole-trimethoprim tab</i> <i>400-80 mg</i>	11
SPRITAM TAB 250MG	54	<i>sulfamethoxazole-trimethoprim tab</i> <i>800-160 mg</i>	11
SPRITAM TAB 500MG	54	SULFAMYLON CRE 85MG/GM	147
SPRITAM TAB 750MG	54	<i>sulfasalazine tab 500 mg</i>	97
SPRYCEL TAB 100MG	30	<i>sulfasalazine tab delayed release 500 mg</i>	97
SPRYCEL TAB 140MG	30	SULFUR POW	154
SPRYCEL TAB 20MG	30	SULFUR POW PRECIPIT.....	154
SPRYCEL TAB 50MG	30	<i>sulindac tab 150 mg</i>	4
SPRYCEL TAB 70MG	30	<i>sulindac tab 200 mg</i>	4
SPRYCEL TAB 80MG	30	<i>sumatriptan nasal spray 20 mg/act</i>	70
SQUARIC ACID LIQ BUTANOL.....	154	<i>sumatriptan nasal spray 5 mg/act</i>	70
SQUARIC ACID POW DI-N-BUT	154	<i>sumatriptan succinate inj 6 mg/0.5ml</i> .70	
<i>ssd cre 1%</i>	147	<i>sumatriptan succinate solution</i> <i>auto-injector 4 mg/0.5ml</i>	70
<i>stavudine cap 15 mg</i>	14	<i>sumatriptan succinate solution</i> <i>auto-injector 6 mg/0.5ml</i>	70
<i>stavudine cap 20 mg</i>	14	<i>sumatriptan succinate solution cartridge</i> <i>4 mg/0.5ml</i>	70
<i>stavudine cap 30 mg</i>	14	<i>sumatriptan succinate solution cartridge</i> <i>6 mg/0.5ml</i>	70
<i>stavudine cap 40 mg</i>	14	<i>sumatriptan succinate solution prefilled</i> <i>syringe 6 mg/0.5ml</i>	70
STEVIA POW EXTRACT	154	<i>sumatriptan succinate tab 100 mg</i>	70
STIMATE SOL 1.5MG/ML.....	93		
<i>stim laxat tab 5mg ec</i>	100		
STIVARGA TAB 40MG	30		
<i>stomach relf chw 262mg</i>	95		
<i>stomach relf sus 262/15ml</i>	95		
<i>stomach relf tab 262mg</i>	95		
<i>stool softnr cap 100mg</i>	100		
<i>stool softnr cap 250mg</i>	100		
<i>stool softnr syp 60/15ml</i>	100		
<i>stool softnr tab 8.6-50mg</i>	100		
STRAWBERRY LIQ FLAVOR.....	122		
<i>streptomycin sulfate for inj 1 gm</i>	9		
<i>stress form/ tab zinc</i>	130		

<i>sumatriptan succinate tab 25 mg</i>	70	SYNTHROID TAB 137MCG.....	93
<i>sumatriptan succinate tab 50 mg</i>	70	SYNTHROID TAB 150MCG.....	93
<i>super b comp tab vit c</i>	130	SYNTHROID TAB 175MCG.....	93
<i>super liq nu-thera</i>	130	SYNTHROID TAB 200MCG.....	93
<i>superplex-t tab</i>	130	SYNTHROID TAB 25MCG.....	93
SUPER POW NU-THERA.....	130	SYNTHROID TAB 300MCG.....	93
<i>super tab nu-thera</i>	130	SYNTHROID TAB 50MCG.....	93
<i>super vikaps tab</i>	130	SYNTHROID TAB 75MCG.....	93
SUPPOSIBLEND MIS.....	123	SYNTHROID TAB 88MCG.....	93
SUPRAX CHW 100MG.....	19	SYRSPEND SF SUS ALKA.....	123
SUPRAX CHW 200MG.....	19	T	
SUPRAX SUS 500/5ML.....	19	<i>tab-a-vite tab</i>	130
SUPREP BOWEL SOL PREP KIT.....	100	<i>tab-a-vite tab /iron</i>	130
SUSPENDIT GEL.....	123	<i>tab-a-vite tab beta car</i>	130
SUTENT CAP 12.5MG.....	30	<i>tab-a-vite tab maximum</i>	130
SUTENT CAP 25MG.....	30	TABLOID TAB 40MG.....	24
SUTENT CAP 37.5MG.....	30	<i>tacrolimus cap 0.5 mg</i>	111
SUTENT CAP 50MG.....	30	<i>tacrolimus cap 1 mg</i>	111
SYLATRON KIT 200MCG.....	31	<i>tacrolimus cap 5 mg</i>	111
SYLATRON KIT 300MCG.....	31	<i>tacrolimus oint 0.03%</i>	154
SYLATRON KIT 600MCG.....	31	<i>tacrolimus oint 0.1%</i>	154
SYMBICORT AER 160-4.5.....	145	<i>tactinal chw children</i>	3
SYMBICORT AER 80-4.5.....	145	<i>tactinal tab 325mg</i>	3
SYMDEKO TAB 100-150.....	144	<i>tactinal tab 500mg</i>	3
SYMDEKO TAB 50-75MG.....	144	TAFINLAR CAP 50MG.....	31
SYMFI LO TAB.....	15	TAFINLAR CAP 75MG.....	31
SYMFI TAB.....	16	TAGRISSO TAB 40MG.....	31
SYMJEPI INJ 0.15MG.....	144	TAGRISSO TAB 80MG.....	31
SYMJEPI INJ 0.3MG.....	144	TALC POW.....	154
SYMPAZAN MIS 10MG.....	54	TALZENNA CAP 0.25MG.....	26
SYMPAZAN MIS 20MG.....	54	TALZENNA CAP 1MG.....	26
SYMPAZAN MIS 5MG.....	54	<i>tamoxifen citrate tab 10 mg (base</i> <i>equivalent)</i>	27
SYMPROIC TAB 0.2MG.....	101	<i>tamoxifen citrate tab 20 mg (base</i> <i>equivalent)</i>	27
SYMTUZA TAB.....	16	<i>tamsulosin hcl cap 0.4 mg</i>	102
SYNAREL SOL 2MG/ML.....	86	TANDEM CAP.....	107
SYNERCID INJ 500MG.....	11	TANGERINE POW FLAVOR.....	123
SYNJARDY TAB.....	78	TANNIC ACID POW.....	154
SYNJARDY TAB 12.5-500.....	78	TARCEVA TAB 100MG.....	31
SYNJARDY TAB 5-1000MG.....	78	TARCEVA TAB 150MG.....	31
SYNJARDY TAB 5-500MG.....	78	TARCEVA TAB 25MG.....	31
SYNJARDY XR TAB.....	78	TARGRETIN GEL 1%.....	154
SYNJARDY XR TAB 10-1000.....	78	<i>tarina 24 fe tab</i>	84
SYNJARDY XR TAB 25-1000.....	78	<i>tarina fe tab 1/20</i>	84
SYNJARDY XR TAB 5-1000MG.....	78	TARTARIC ACD GRA.....	154
SYNRIBO INJ 3.5MG.....	31	TASIGNA CAP 150MG.....	31
SYNTHROID TAB 100MCG.....	93	TASIGNA CAP 200MG.....	31
SYNTHROID TAB 112MCG.....	93		
SYNTHROID TAB 125MCG.....	93		

TASIGNA CAP 50MG.....	31	.....	35
TAXOTERE INJ 80MG/4ML.....	25	terbinafine cre 1%	148
tazarotene cream 0.1%	148	terbinafine hcl cream 1%	148
tazicef inj 1gm	19	terbinafine hcl tab 250 mg	12
tazicef inj 2gm	19	terbutaline sulfate tab 2.5 mg	138
tazicef inj 6gm	19	terbutaline sulfate tab 5 mg	138
TAZORAC CRE 0.05%.....	148	terconazole vaginal cream 0.4%	103
taztia xt cap 120mg/24	44	terconazole vaginal cream 0.8%	103
taztia xt cap 180mg/24	44	terconazole vaginal suppos 80 mg.....	103
taztia xt cap 240mg/24	44	TESSALON PER CAP 100MG.....	142
taztia xt cap 300mg er	44	testosterone cypionate im inj in oil 100	
taztia xt cap 360mg/24	44	mg/ml.....	74
TDVAX INJ 2-2 LF	112	testosterone cypionate im inj in oil 200	
TECENTRIQ INJ 1200/20	26	mg/ml.....	74
TECENTRIQ INJ 840/14	26	testosterone enanthate im inj in oil 200	
TEFLARO INJ 400MG	19	mg/ml.....	74
TEFLARO INJ 600MG	19	testosterone td gel 12.5 mg/act (1%) ..	75
TEKTURN HCT TAB 150-12.5	45	testosterone td gel 25 mg/2.5gm (1%)	75
TEKTURN HCT TAB 150-25MG	45	testosterone td gel 50 mg/5gm (1%) ..	75
TEKTURN HCT TAB 300-12.5	45	tetrabenazine tab 12.5 mg.....	71
TEKTURN HCT TAB 300-25MG	45	tetrabenazine tab 25 mg	71
TEKTURN TAB 150MG.....	45	tetracycline hcl cap 250 mg	22
TEKTURN TAB 300MG.....	45	tetracycline hcl cap 500 mg	23
telmisartan-amlodipine tab 40-10 mg ..	37	TEXACORT SOL 2.5%	149
telmisartan-amlodipine tab 40-5 mg ...	37	tgt lice kit complete	155
telmisartan-amlodipine tab 80-10 mg ..	37	THALOMID CAP 100MG.....	28
telmisartan-amlodipine tab 80-5 mg ...	37	THALOMID CAP 150MG.....	28
telmisartan-hydrochlorothiazide tab		THALOMID CAP 200MG.....	28
40-12.5 mg	37	THALOMID CAP 50MG	28
telmisartan-hydrochlorothiazide tab		THEO-24 CAP 100MG CR.....	144
80-12.5 mg	37	THEO-24 CAP 200MG CR.....	144
telmisartan-hydrochlorothiazide tab		THEO-24 CAP 300MG CR.....	144
80-25 mg	37	THEO-24 CAP 400MG ER.....	144
telmisartan tab 20 mg.....	38	theophylline soln 80 mg/15ml	144
telmisartan tab 40 mg.....	38	theophylline tab er 12hr 300 mg	144
telmisartan tab 80 mg.....	38	theophylline tab er 12hr 450 mg	144
temazepam cap 15 mg	68	theophylline tab er 24hr 400 mg	144
temazepam cap 7.5 mg	68	theophylline tab er 24hr 600 mg	144
TENIVAC INJ 5-2LF	112	THERA M PLUS TAB.....	130
tenofovir disoproxil fumarate tab 300 mg		thera-m tab	130
.....	14	THERA-M TAB.....	130
terazosin hcl cap 10 mg (base		THERAPEUTIC SOL.....	130
equivalent)	35	therapeutic- tab m	130
terazosin hcl cap 1 mg (base equivalent)		thera tab	130
.....	35	THERA TAB	130
terazosin hcl cap 2 mg (base equivalent)		THEREMS-H TAB.....	130
.....	35	THEREMS-M TAB.....	130
terazosin hcl cap 5 mg (base equivalent)		therems tab	130

<i>thiamine hcl inj 100 mg/ml</i>	130	<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	9
THIAMINE HCL POW	130	<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	9
<i>thiamine hcl tab 100 mg</i>	130	<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	9
<i>thiamine hcl tab 50 mg</i>	130	<i>tolnaftate cre 1%</i>	148
<i>thioridazine hcl tab 100 mg</i>	66	<i>tolnaftate cream 1%</i>	148
<i>thioridazine hcl tab 10 mg</i>	66	<i>tolnaftate powder 1%</i>	148
<i>thioridazine hcl tab 25 mg</i>	66	<i>tolterodine tartrate cap er 24hr 2 mg</i> 103	
<i>thioridazine hcl tab 50 mg</i>	66	<i>tolterodine tartrate cap er 24hr 4 mg</i> 103	
<i>thiothixene cap 10 mg</i>	66	<i>tolterodine tartrate tab 1 mg</i>	103
<i>thiothixene cap 1 mg</i>	66	<i>tolterodine tartrate tab 2 mg</i>	103
<i>thiothixene cap 2 mg</i>	66	<i>topiramate sprinkle cap 15 mg</i>	54
<i>thiothixene cap 5 mg</i>	66	<i>topiramate sprinkle cap 25 mg</i>	54
THREONINE POW	123	<i>topiramate tab 100 mg</i>	54
<i>thrive gum 2mg mint</i>	74	<i>topiramate tab 200 mg</i>	54
THYMOL CRY	154	<i>topiramate tab 25 mg</i>	54
<i>tiagabine hcl tab 12 mg</i>	54	<i>topiramate tab 50 mg</i>	54
<i>tiagabine hcl tab 16 mg</i>	54	<i>toposar inj 100/5ml</i>	32
<i>tiagabine hcl tab 2 mg</i>	54	<i>toposar inj 1gm/50ml</i>	32
<i>tiagabine hcl tab 4 mg</i>	54	<i>topotecan hcl for inj 4 mg (base equiv)</i> 32	
TIBSOVO TAB 250MG	26	<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	33
<i>tigecycline for iv soln 50 mg</i>	11	TOPOTECAN INJ 4MG/4ML	33
<i>timolol maleate ophth gel forming soln 0.25%</i>	134	<i>toremifene citrate tab 60 mg (base equivalent)</i>	27
<i>timolol maleate ophth gel forming soln 0.5%</i>	134	<i>torsemide tab 100 mg</i>	46
<i>timolol maleate ophth soln 0.25%</i>	134	<i>torsemide tab 10 mg</i>	46
<i>timolol maleate ophth soln 0.5%</i>	134	<i>torsemide tab 20 mg</i>	46
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	134	<i>torsemide tab 5 mg</i>	46
<i>timolol maleate tab 10 mg</i>	43	<i>total b/c tab</i>	130
<i>timolol maleate tab 20 mg</i>	43	TOVIAZ TAB 4MG	103
<i>timolol maleate tab 5 mg</i>	42	TOVIAZ TAB 8MG	103
TIVICAY TAB 10MG	14	<i>tqn electrol inj</i>	114
TIVICAY TAB 25MG	14	TRACLEER TAB 125MG	48
TIVICAY TAB 50MG	14	TRACLEER TAB 62.5MG	48
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	72	TRADJENTA TAB 5MG	78
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	72	<i>tramadol-acetaminophen tab 37.5-325 mg</i>	5
TOBRADEX OIN 0.3-0.1%	131	<i>tramadol hcl tab 50 mg</i>	5
TOBRADEX ST SUS 0.3-0.05	131	<i>trandolapril tab 1 mg</i>	35
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	131	<i>trandolapril tab 2 mg</i>	35
<i>tobramycin nebu soln 300 mg/5ml</i>	9	<i>trandolapril tab 4 mg</i>	35
<i>tobramycin ophth soln 0.3%</i>	132	<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	108
<i>tobramycin sulfate for inj 1.2 gm</i>	9	<i>tranexamic acid tab 650 mg</i>	108
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	9	TRANSDERM-SC DIS 1.5MG	97

<i>tranylcypromine sulfate tab 10 mg</i>	59	<i>trientine hcl cap 250 mg</i>	79
TRAVASOL INJ 10%	114	<i>tri-estaryl tab</i>	84
TRAVATAN Z DRO 0.004%	134	<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	66
<i>trazodone hcl tab 100 mg</i>	59	<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	66
<i>trazodone hcl tab 150 mg</i>	59	<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	66
<i>trazodone hcl tab 50 mg</i>	59	<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	66
TRECTOR TAB 250MG.....	16	<i>trifluridine ophth soln 1%</i>	132
TRELEGY AER ELLIPTA.....	134	<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	61
TRELSTAR MIX INJ 11.25MG	27	<i>trihexyphenidyl hcl tab 2 mg</i>	61
TRELSTAR MIX INJ 3.75MG	27	<i>trihexyphenidyl hcl tab 5 mg</i>	61
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	48	<i>tri-legest tab fe</i>	84
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	48	<i>tri-lo- tab sprintec</i>	84
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	48	<i>trilyte sol</i>	100
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	48	<i>trimethoprim tab 100 mg</i>	11
TRESIBA FLEX INJ 100UNIT	76	<i>tri-mili tab</i>	84
TRESIBA FLEX INJ 200UNIT	76	<i>trimipramine maleate cap 100 mg</i>	59
TRESIBA INJ 100UNIT	76	<i>trimipramine maleate cap 25 mg</i>	59
<i>tretinoin cap 10 mg</i>	32	<i>trimipramine maleate cap 50 mg</i>	59
<i>tretinoin cream 0.025%</i>	146	<i>trinessa lo tab</i>	85
<i>tretinoin cream 0.05%</i>	146	<i>trinessa tab</i>	85
<i>tretinoin cream 0.1%</i>	146	TRINTELLIX TAB 10MG	59
<i>tretinoin gel 0.01%</i>	146	TRINTELLIX TAB 20MG	59
<i>tretinoin gel 0.025%</i>	146	TRINTELLIX TAB 5MG.....	59
<i>triamcinolone acetone cream 0.025%</i>	149	<i>triple antib oin</i>	147
<i>triamcinolone acetone cream 0.1%</i>	149	<i>triple antib oin max st</i>	147
<i>triamcinolone acetone cream 0.5%</i>	149	<i>triple antib oin plus</i>	147
<i>triamcinolone acetone dental paste 0.1%</i>	155	<i>tri-previfem tab</i>	84
<i>triamcinolone acetone lotion 0.025%</i>	149	<i>tri-sprintec tab</i>	85
<i>triamcinolone acetone lotion 0.1%</i>	149	TRIUMEQ TAB	16
<i>triamcinolone acetone oint 0.025%</i>	150	<i>trivora-28 tab</i>	85
<i>triamcinolone acetone oint 0.1%</i>	149	<i>tri-vylibra tab</i>	85
<i>triamcinolone acetone oint 0.5%</i>	150	<i>tri-vylibra tab lo</i>	85
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	46	TROCHIBASE MIS	123
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	46	TROCHIBASE MIS CLASSIC	123
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	46	TROCHIBASE S MIS	123
<i>tri-biozene oin</i>	147	TROGARZO INJ 150MG/ML.....	15
<i>tri-buff asa tab 325mg</i>	3	TROJAN/SPERM MIS VERY SEN.....	85
TRICARE TAB PRENATAL.....	130	TROJAN/SPERM MIS VERY THN.....	85
		TROJAN-ASSRT MIS PACK.....	85
		TROJAN-ENZ MIS LARGE	85
		TROJAN-ENZ MIS LUBRICAT	85
		TROJAN-ENZ MIS W/SPERMI.....	85
		TROJAN EXTEN MIS LUBRICAT	85
		TROJAN MAGN MIS	85

TROJAN MAGN MIS WARM SEN.....	85	TRUVADA TAB 167-250	16
TROJAN MAGN MIS XL/LUBE	85	TRUVADA TAB 200-300	16
TROJAN MIS	85	<i>trymine cg liq</i> 225-7.5	142
TROJAN MIS ENZ-LUB	85	<i>tulana tab</i> 0.35mg	86
TROJAN MIS NAT LAMB	85	TURALIO CAP 200MG	31
TROJAN MIS NATULAMB	85	TURPENTINE LIQ SPIRITS	154
TROJAN MIS REGULAR	85	TUSNEL C SYP	142
TROJAN MIS RIBBED.....	85	<i>tusnel diabt liq</i> 10-100/5	142
TROJAN MIS VERY SEN.....	85	TUSSICAPS CAP 10-8MG.....	142
TROJAN MIS VERY THN	85	TUSSICAPS CAP 5-4MG	142
TROJAN PLEAS MIS SPERMICI	85	<i>tussigon tab</i> 5-1.5mg	142
TROJAN PLUS MIS	85	<i>tussin adult liq</i> 100/5ml	142
TROJAN RIB MIS	85	<i>tussin adult liq</i> cgh/cong	142
TROJAN SHARE MIS LUBRICAT	85	<i>tussin adult liq</i> cold	142
TROJAN SUPRA MIS SPERMICI	85	<i>tussin cf liq</i>	142
TROJAN TWIST MIS PLEASURE	85	<i>tussin cf liq</i> cgh/cold	142
TROJAN ULTRA MIS LUBRICAT	85	<i>tussin chest syp</i> 100/5ml	142
TROLAMINE LIQ.....	123	<i>tussin dm liq</i>	142
TROPHAMINE INJ 10%	114	<i>tussin dm liq</i> 100-10/5	142
<i>trospium chloride tab</i> 20 mg.....	103	<i>tussin dm liq</i> 10-200/5	142
TRULICITY INJ 0.75/0.5	76	<i>tussin dm liq</i> max	142
TRULICITY INJ 1.5/0.5	76	<i>tussin dm syp</i> 100-10/5.....	142
TRUMENBA INJ	112	TUTTI FRUTTI CON.....	123
TRUSTEX/RIA MIS LUBRICAT	86	TWINRIX INJ.....	112
TRUSTEX/RIA MIS NON-LUB	86	TYBOST TAB 150MG.....	15
TRUSTEX/RIA MIS SPERMICI.....	86	<i>tydemy tab</i>	86
TRUSTEX LUBR MIS ASSORTED	85	TYKERB TAB 250MG.....	31
TRUSTEX LUBR MIS BANANA.....	85	TYMLOS INJ	91
TRUSTEX LUBR MIS CHOC	85	TYPHIM VI INJ.....	112
TRUSTEX LUBR MIS COLA.....	85	U	
TRUSTEX LUBR MIS COLORS.....	85	U-BASE CRE.....	123
TRUSTEX LUBR MIS EX LARGE	85	ULORIC TAB 40MG	1
TRUSTEX LUBR MIS EX STR	85	ULORIC TAB 80MG	1
TRUSTEX LUBR MIS GRAPE	85	ULTIMATE FEE MIS	86
TRUSTEX LUBR MIS MINT	85	UNDECYLENIC LIQ ACID	154
TRUSTEX LUBR MIS RIB/STUD	86	UNIBASE CRE.....	123
TRUSTEX LUBR MIS SPERMICI	86	UNICOMPLEX-M TAB	130
TRUSTEX LUBR MIS STRWBRY.....	86	<i>unithroid tab</i> 100mcg	93
TRUSTEX LUBR MIS VANILLA	86	<i>unithroid tab</i> 112mcg	93
TRUSTEX MIS BANANA	86	<i>unithroid tab</i> 125mcg	93
TRUSTEX MIS CHOCOLAT	86	<i>unithroid tab</i> 137mcg	93
TRUSTEX MIS FLAVORS.....	86	<i>unithroid tab</i> 150mcg	93
TRUSTEX MIS MINT	86	<i>unithroid tab</i> 175mcg	93
TRUSTEX MIS STRWBRY	86	<i>unithroid tab</i> 200mcg	93
TRUSTEX MIS VANILLA.....	86	<i>unithroid tab</i> 25mcg.....	93
TRUSTX NON-9 MIS RIB/STUD	86	<i>unithroid tab</i> 300mcg	93
TRUVADA TAB 100-150	16	<i>unithroid tab</i> 50mcg.....	93
TRUVADA TAB 133-200	16	<i>unithroid tab</i> 75mcg.....	93

<i>unithroid tab 88mcg</i>	93
UREA BEA.....	154
UREA POW PEROXIDE.....	154
URO-MAG CAP 140MG.....	95
<i>ursodiol cap 300 mg</i>	101
<i>ursodiol tab 250 mg</i>	101
<i>ursodiol tab 500 mg</i>	101
V	
<i>valacyclovir hcl tab 1 gm</i>	17
<i>valacyclovir hcl tab 500 mg</i>	17
VALCHLOR GEL 0.016%.....	154
<i>valganciclovir hcl for soln 50 mg/ml</i> (base equiv).....	17
<i>valganciclovir hcl tab 450 mg (base</i> <i>equivalent)</i>	17
<i>valproate sodium inj 100 mg/ml</i>	54
<i>valproate sodium oral soln 250 mg/5ml</i> (base equiv).....	54
<i>valproic acid cap 250 mg</i>	55
<i>valsartan-hydrochlorothiazide tab</i> <i>160-12.5 mg</i>	37
<i>valsartan-hydrochlorothiazide tab 160-25</i> <i>mg</i>	37
<i>valsartan-hydrochlorothiazide tab</i> <i>320-12.5 mg</i>	37
<i>valsartan-hydrochlorothiazide tab 320-25</i> <i>mg</i>	37
<i>valsartan-hydrochlorothiazide tab</i> <i>80-12.5 mg</i>	37
<i>valsartan tab 160 mg</i>	38
<i>valsartan tab 320 mg</i>	38
<i>valsartan tab 40 mg</i>	38
<i>valsartan tab 80 mg</i>	38
VALVD HOLDNG MIS CHAMBER.....	142
<i>vancomycin hcl cap 125 mg (base</i> <i>equivalent)</i>	11
<i>vancomycin hcl cap 250 mg (base</i> <i>equivalent)</i>	11
<i>vancomycin hcl for iv soln 10 gm (base</i> <i>equivalent)</i>	12
<i>vancomycin hcl for iv soln 1 gm (base</i> <i>equivalent)</i>	11
<i>vancomycin hcl for iv soln 500 mg (base</i> <i>equivalent)</i>	12
<i>vancomycin hcl for iv soln 5 gm (base</i> <i>equivalent)</i>	12
<i>vancomycin hcl for iv soln 750 mg (base</i> <i>equivalent)</i>	12

VANCOMYCIN INJ 1 GM.....	12
VANCOMYCIN INJ 500MG.....	12
VANCOMYCIN INJ 750MG.....	12
<i>vandazole gel 0.75%</i>	103
VANIBASE CRE.....	123
VAQTA INJ 25/0.5ML.....	112
VAQTA INJ 50UNT/ML.....	112
VARIVAX INJ.....	112
VASCEPA CAP 0.5GM.....	41
VASCEPA CAP 1GM.....	41
VEEGUM MIS LUMP.....	154
VELCADE INJ 3.5MG.....	26
<i>velivet pak</i>	86
VEMLIDY TAB 25MG.....	17
VENCLEXTA TAB 100MG.....	26
VENCLEXTA TAB 10MG.....	26
VENCLEXTA TAB 50MG.....	26
VENCLEXTA TAB START PK.....	26
<i>venlafaxine hcl cap er 24hr 150 mg</i> (base equivalent).....	59
<i>venlafaxine hcl cap er 24hr 37.5 mg</i> (base equivalent).....	59
<i>venlafaxine hcl cap er 24hr 75 mg (base</i> <i>equivalent)</i>	59
<i>venlafaxine hcl tab 100 mg (base</i> <i>equivalent)</i>	60
<i>venlafaxine hcl tab 25 mg (base</i> <i>equivalent)</i>	59
<i>venlafaxine hcl tab 37.5 mg (base</i> <i>equivalent)</i>	59
<i>venlafaxine hcl tab 50 mg (base</i> <i>equivalent)</i>	59
<i>venlafaxine hcl tab 75 mg (base</i> <i>equivalent)</i>	59
VENOFER INJ 20MG/ML.....	107
VENTAVIS SOL 10MCG/ML.....	48
VENTAVIS SOL 20MCG/ML.....	49
VENTOLIN HFA AER.....	138
<i>verapamil hcl cap er 24hr 100 mg</i>	44
<i>verapamil hcl cap er 24hr 120 mg</i>	44
<i>verapamil hcl cap er 24hr 180 mg</i>	44
<i>verapamil hcl cap er 24hr 200 mg</i>	44
<i>verapamil hcl cap er 24hr 240 mg</i>	44
<i>verapamil hcl cap er 24hr 300 mg</i>	44
<i>verapamil hcl cap er 24hr 360 mg</i>	44
<i>verapamil hcl iv soln 2.5 mg/ml</i>	44
<i>verapamil hcl tab 120 mg</i>	44
<i>verapamil hcl tab 40 mg</i>	44

<i>verapamil hcl tab 80 mg</i>	44	<i>vitamin c tab 500mg</i>	131
<i>verapamil hcl tab er 120 mg</i>	44	<i>vitamin c tab 500mg tr</i>	131
<i>verapamil hcl tab er 180 mg</i>	45	<i>vitamin d3 dro 400unit</i>	131
<i>verapamil hcl tab er 240 mg</i>	45	<i>vitamin d3 tab 1000unit</i>	131
VERSACLOZ SUS 50MG/ML	66	<i>vitamin d3 tab 50000unt</i>	131
VERSATILE CRE BASE.....	123	<i>vitamin d-3 tab 5000unit</i>	131
VERSIGEL CRE	123	<i>vitamin d tab 1000unit</i>	131
VERZENIO TAB 100MG	26	VITAMIN D TAB 400UNIT	118
VERZENIO TAB 150MG	26	<i>vitamin e cap 1000 unit</i>	131
VERZENIO TAB 200MG	26	<i>vitamin e cap 100 unit</i>	131
VERZENIO TAB 50MG.....	26	<i>vitamin e cap 200 unit</i>	131
VICTOZA INJ 18MG/3ML.....	76	<i>vitamin e cap 400 unit</i>	131
VIDEX EC CAP 125MG	15	VITAMIN K-1 POW	154
VIDEX SOL 2GM	15	<i>vit c & e cap combo</i>	130
VIDEX SOL 4GM	15	<i>vite/iron chw children</i>	131
<i>vienva tab 0.1-20</i>	86	VITRAKVI CAP 100MG	31
<i>vigabatrin powd pack 500 mg</i>	55	VITRAKVI CAP 25MG.....	31
<i>vigabatrin tab 500 mg</i>	55	VITRAKVI SOL 20MG/ML.....	31
<i>vigadrone pow 500mg</i>	55	VIVITROL INJ 380MG	74
VIIBRYD KIT STARTER	60	VIZIMPRO TAB 15MG	31
VIIBRYD TAB 10MG	60	VIZIMPRO TAB 30MG	31
VIIBRYD TAB 20MG	60	VIZIMPRO TAB 45MG	31
VIIBRYD TAB 40MG	60	V-MAX CRE	123
VIMPAT INJ 200MG/20	55	<i>voriconazole for inj 200 mg</i>	13
VIMPAT SOL 10MG/ML.....	55	<i>voriconazole for susp 40 mg/ml</i>	13
VIMPAT TAB 100MG	55	<i>voriconazole tab 200 mg</i>	13
VIMPAT TAB 150MG.....	55	<i>voriconazole tab 50 mg</i>	13
VIMPAT TAB 200MG	55	VORTEX VALVE MIS CHAMBER.....	142
VIMPAT TAB 50MG.....	55	VOSEVI TAB.....	17
<i>vinblastine sulfate inj 1 mg/ml</i>	25	VOTRIENT TAB 200MG	31
<i>vincristine sulfate iv soln 1 mg/ml</i>	25	VRAYLAR CAP 1.5-3MG.....	66
<i>vinorelbine tartrate inj 10 mg/ml (base</i> <i>equiv)</i>	25	VRAYLAR CAP 1.5MG.....	66
<i>vinorelbine tartrate inj 50 mg/5ml (10</i> <i>mg/ml) (base equiv)</i>	25	VRAYLAR CAP 3MG	66
<i>violele tab</i>	86	VRAYLAR CAP 4.5MG.....	66
VIRACEPT TAB 250MG.....	15	VRAYLAR CAP 6MG	66
VIRACEPT TAB 625MG.....	15	V-R FATIGUE TAB COMPLEX	123
VIRAMUNE SUS 50MG/5ML	15	<i>vyfemla tab 0.4-35</i>	86
VIREAD POW 40MG/GM.....	15	<i>vylibra tab 0.25-35</i>	86
VIREAD TAB 150MG.....	15	W	
VIREAD TAB 200MG.....	15	<i>warfarin sodium tab 10 mg</i>	105
VIREAD TAB 250MG.....	15	<i>warfarin sodium tab 1 mg</i>	105
<i>visine-a sol op</i>	133	<i>warfarin sodium tab 2.5 mg</i>	105
<i>vita-bee/c tab</i>	130	<i>warfarin sodium tab 2 mg</i>	105
<i>vitamin a cap 10000 unit</i>	131	<i>warfarin sodium tab 3 mg</i>	105
<i>vitamin a cap 8000unit</i>	131	<i>warfarin sodium tab 4 mg</i>	105
<i>vitamin b12 tab 1000mcg</i>	131	<i>warfarin sodium tab 5 mg</i>	105
		<i>warfarin sodium tab 6 mg</i>	105
		<i>warfarin sodium tab 7.5 mg</i>	105

WATCHHALER MIS	142
<i>water for irrigation, sterile irrigation soln</i>	155
WATERMELON LIQ FLAVOR	123
<i>wee care sus 15/1.25</i>	107
<i>white petrolatum gel</i>	123
WITEPSOL H15 MIS	123
<i>womans laxat tab 5mg ec</i>	100
<i>womens one tab daily</i>	131
<i>wymzya fe chw 0.4mg-35</i>	86
X	
XALKORI CAP 200MG	31
XALKORI CAP 250MG	31
XANTHAN GUM POW	123
XARELTO STAR TAB 15/20MG.....	105
XARELTO TAB 10MG.....	105
XARELTO TAB 15MG.....	105
XARELTO TAB 2.5MG.....	105
XARELTO TAB 20MG.....	105
XATMEP SOL 2.5MG/ML	109
XELJANZ TAB 10MG	109
XELJANZ TAB 5MG	109
XELJANZ XR TAB 11MG.....	109
XENICAL CAP 120MG	91
XGEVA INJ.....	91
XIFAXAN TAB 550MG	101
XIGDUO XR TAB 10-1000	78
XIGDUO XR TAB 10-500MG.....	78
XIGDUO XR TAB 2.5-1000	78
XIGDUO XR TAB 5-1000MG.....	78
XIGDUO XR TAB 5-500MG	78
XOLAIR INJ 150MG/ML	144
XOLAIR INJ 75/0.5.....	144
XOLAIR SOL 150MG	144
XOSPATA TAB 40MG	31
XPOVIO PAK 100MG.....	32
XPOVIO PAK 60MG	32
XPOVIO PAK 80MG	32
XTANDI CAP 40MG.....	27
XULTOPHY INJ 100/3.6.....	76
XYLITOL POW.....	154
XYREM SOL 500MG/ML.....	72
Y	
YF-VAX INJ	112
Z	
<i>zafirlukast tab 10 mg</i>	143
<i>zafirlukast tab 20 mg</i>	143
<i>zaleplon cap 10 mg</i>	69

<i>zaleplon cap 5 mg</i>	69
<i>zarah tab 3-0.03mg</i>	86
ZEJULA CAP 100MG	26
ZELBORAF TAB 240MG	31
ZEMAIRA INJ 1000MG	144
<i>zenatane cap 10mg</i>	146
<i>zenatane cap 20mg</i>	146
<i>zenatane cap 30mg</i>	146
<i>zenatane cap 40mg</i>	146
ZENPEP CAP 10000UNT	101
ZENPEP CAP 15000UNT	101
ZENPEP CAP 20000UNT	101
ZENPEP CAP 25000	101
ZENPEP CAP 3000UNIT.....	101
ZENPEP CAP 40000	101
ZENPEP CAP 5000UNIT.....	101
ZEPATIER TAB 50-100MG	17
<i>zidovudine cap 100 mg</i>	15
<i>zidovudine syrup 10 mg/ml</i>	15
<i>zidovudine tab 300 mg</i>	15
<i>zinc chloride inj 1 mg/ml</i>	114
ZINC CHLORID GRA	154
<i>zinc gluconate tab 50 mg (elemental zn)</i>	118
ZINC OXIDE POW	154
<i>zinc sulfate cap 50mg</i>	118
ZINC SULFATE POW GRANULAR.....	118
ZINC SULFATE POW MONOHYD.....	119
<i>zinc sulfate tab 220 mg (50 mg zinc</i> <i>equivalent)</i>	119
<i>zinc tab 50 mg</i>	119
<i>ziprasidone hcl cap 20 mg</i>	66
<i>ziprasidone hcl cap 40 mg</i>	66
<i>ziprasidone hcl cap 60 mg</i>	66
<i>ziprasidone hcl cap 80 mg</i>	66
ZIRGAN GEL 0.15%	132
<i>zoledronic acid inj conc for iv infusion 4</i> <i>mg/5ml</i>	79
<i>zoledronic acid iv soln 5 mg/100ml</i>	79
ZOLINZA CAP 100MG	26
<i>zolmitriptan orally disintegrating tab 2.5</i> <i>mg</i>	70
<i>zolmitriptan orally disintegrating tab 5</i> <i>mg</i>	70
<i>zolmitriptan tab 2.5 mg</i>	70
<i>zolmitriptan tab 5 mg</i>	70
<i>zolpidem tartrate tab 10 mg</i>	69
<i>zolpidem tartrate tab 5 mg</i>	69

<i>zonisamide cap 100 mg</i>	55
<i>zonisamide cap 25 mg</i>	55
<i>zonisamide cap 50 mg</i>	55
ZONTIVITY TAB 2.08MG	108
<i>zoo friends chw</i>	131
ZOO FRIENDS CHW COMPLETE	131
<i>zoo friends chw extra c</i>	131
<i>zoo friends chw gummies</i>	131
ZORTRESS TAB 0.25MG	111
ZORTRESS TAB 0.5MG	111
ZORTRESS TAB 0.75MG	111
ZORTRESS TAB 1MG	111
ZOSTAVAX INJ	112
<i>zostrix hp cre 0.1%</i>	154
ZOSTRIX NAT CRE 0.033%	154
<i>zovia 1/35e tab</i>	86
ZUTRIPRO LIQ 60-4-5MG	142
ZYDELIG TAB 100MG	31
ZYDELIG TAB 150MG	31
ZYKADIA CAP 150MG	31
ZYKADIA TAB 150MG	31
ZYLET SUS 0.5-0.3%	131
ZYPREXA RELP INJ 210MG	66
ZYPREXA RELP INJ 300MG	66
ZYPREXA RELP INJ 405MG	66
ZYTIGA TAB 500MG	27

