



Neighborhood **INTEGRITY** (Medicare-Medicaid Plan) **2020 Formulary: List of covered drugs**

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

If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896, 8AM to 8PM, Monday – Friday; 8AM to 12PM on Saturday. On Saturday afternoons, Sundays and holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free. TTY: 711. For more information, visit www.nhpri.org/INTEGRITY. HPMS Approved Formulary File Submission ID: H9576. We have made no changes to this formulary since 10/2020

Neighborhood INTEGRITY | 2020 *List of Covered Drugs* (Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs and over-the-counter drugs are covered by Neighborhood INTEGRITY. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Neighborhood INTEGRITY. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.



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A. Disclaimers

This is a list of drugs that Members can get in Neighborhood INTEGRITY

- ❖ Neighborhood Health Plan of Rhode Island is a health plan that contracts with both Medicare and Rhode Island Medicaid to provide benefits of both programs to enrollees.
- ❖ Benefits as well as the List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- ❖ Limitations and restrictions may apply. For more information, call Neighborhood INTEGRITY Member Services or read the Neighborhood INTEGRITY Member Handbook.
- ❖ You can always check Neighborhood INTEGRITY's up-to-date *List of Covered Drugs* online at www.nhpri.org/INTEGRITY.
- ❖ ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services at 1-844-812-6896 (TTY 711), 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays and holidays, you may be asked to leave a message. Your call will be returned within the next business day. The call is free.
- ❖ ATENCIÓN: Si usted habla Español, servicios de asistencia con el idioma, de forma gratuita, están disponibles para usted. Llame a Servicios a los Miembros al 1-844-812-6896 (TTY 711), de 8 am a 8 pm, de lunes a viernes, de 8 am a 12 pm los Sábados. En las tardes de los Sábados, domingos y feriados, se le pedirá que deje un mensaje. Su llamada será devuelta dentro del siguiente día hábil. La llamada es gratuita.
- ❖ ATENÇÃO: Se você fala Português, o idioma, os serviços de assistência gratuita, estão disponíveis para você. Os serviços de chamada em 1-844-812-6896 (TTY 711), 8 am a 8 pm, de segunda a sexta-feira; 8 am a 12 pm no sábado. Nas tardes de sábado, domingos e feriados, você pode ser convidado a deixar uma mensagem. A sua chamada será devolvido no próximo dia útil. A ligação é gratuita.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Please call Member Services at 1-844-812-6896 (TTY 711), 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. TTY users should call TTY 711. The call is free.
- ❖ You can ask to get this document and future materials in your preferred language and/or alternate format by calling Member Services. This is called a “standing request”.

If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.



Member Services will document your standing request in your member record so that you can receive materials now and in the future in your preferred language and/or format. You can change or delete your standing request at any time by calling Member Services.

B. Frequently Asked Questions (FAQ)

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

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

The drugs on the *List of Covered Drugs* that starts on page 1 are the drugs covered by Neighborhood INTEGRITY. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- Neighborhood INTEGRITY will cover all medically necessary drugs on the Drug List if:
 - your doctor or other prescriber says you need them to get better or stay healthy, **and**
 - you fill the prescription at a Neighborhood INTEGRITY network pharmacy.
- Neighborhood INTEGRITY may have additional steps to access certain drugs (see section B4 below).

You can also see an up-to-date list of drugs that we cover on our website at www.nhpri.org/INTEGRITY or call Member Services at 1-844-812-6896 (TTY 711).

B2. Does the Drug List ever change?

Yes, and Neighborhood INTEGRITY must follow Medicare and Medicaid rules when making changes. We may add or remove drugs on the Drug List during the year. We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval for a drug. (Prior approval is permission from Neighborhood INTEGRITY before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).

If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.



- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, see section B4.

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

- a new, cheaper drug comes on the market that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe, **or**
- a drug is removed from the market.

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

- You can always check Neighborhood INTEGRITY's up to date Drug List online at www.nhpri.org/INTEGRITY.
- You can also call Member Services to check the current Drug List at 1-844-812-6896 (TTY 711).

B3. What happens when there is a change to the Drug List?

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

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug, but your cost for the new drug will stay the same. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
 - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please see section B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know. We will send you a letter and the letter will provide you with advice on how to follow up with your provider and pharmacist.

If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.



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

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is new to the market **and**
- Replace a brand name drug currently on the Drug List **or**
- Change the coverage rules or limits for the brand name drug

When these changes happen, we will:

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

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

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

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

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

- **Prior approval (or prior authorization):** For some drugs, you or your doctor or other prescriber must get approval from Neighborhood INTEGRITY before you fill your prescription. Neighborhood INTEGRITY may not cover the drug if you do not get approval.
- **Quantity limits:** Sometimes Neighborhood INTEGRITY limits the amount of a drug you can get.
- **Step therapy:** Sometimes Neighborhood INTEGRITY requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables on pages 1-154. You can also get more information by visiting our web site at



If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.

www.nhpri.org/INTEGRITY. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please see sections B10-B12 for more information about exceptions.

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

The *List of Covered Drugs* on page 1 has a column labeled “Necessary actions, restrictions, or limits on use.”

B6. What happens if we change our rules about some drugs (for example, prior authorization (approval), quantity limits, and/or step therapy restrictions)?

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

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

There are two ways to find a drug:

- You can search alphabetically (if you know how to spell the drug), **or**
- You can search by medical condition.

To search **alphabetically**, go to the Index of Covered Drugs section. You can find it on page 155.

To search **by medical condition**, find the section labeled “List of drugs by medical condition” on page 1. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular- Drugs to Treat Heart and Circulation Conditions. That is where you will find drugs that treat heart conditions.



B8. What if the drug you want to take is not on the Drug List?

If you don't see your drug on the Drug List, call Member Services at 1-844-812-6896 (TTY 711) and ask about it. If you learn that Neighborhood INTEGRITY will not cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. He or she can prescribe a drug on the Drug List that is like the one you want to take. **Or**
 - You can ask the health plan to make an exception to cover your drug. Please see sections B10-B12 for more information about exceptions.
-

B9. What if you are a new Neighborhood INTEGRITY Member and can't find your drug on the Drug List or have a problem getting your drug?

We can help. We may cover a temporary 30-day supply of your Part D drug or 90-day supply of your Rhode Island Medicaid-covered drug during the first 90 days you are a Member of Neighborhood INTEGRITY. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of a Part D medication and 90 days of a Rhode Island Medicaid-covered medication.

We will cover a 30-day supply of your Part D drug or 90-day supply of your Rhode Island Medicaid-covered drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior approval by Neighborhood INTEGRITY, **or**
- you are taking a drug that is part of a step therapy restriction.

If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Neighborhood INTEGRITY member

If you have questions, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. The call is free. **For more information**, visit www.nhpri.org/INTEGRITY.



- This is in addition to the temporary supply during the first 90 days you are a Member of Neighborhood INTEGRITY.

If your level of care changes and you need a supply right away:

- We will cover one 31-day supply of the drug you need if you live in a long term care facility, or
- We will cover one 30-day supply of the drug you need if you **do not** live in a long term care facility

B10. Can you ask for an exception to cover your drug?

Yes. You can ask Neighborhood INTEGRITY to make an exception to cover a drug that is not on the Drug List.

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

- For example, Neighborhood INTEGRITY may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior approval requirements.

B11. How can you ask for an exception?

To ask for an exception, call Member Services. Member Services will work with you and your provider to help you ask for an exception. You can also read Chapter 9, of the *Member Handbook* to learn more about exceptions.

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

First, we must get a statement from your prescriber supporting your request for an exception. After we get the statement, we will give you a decision on your exception request within 72 hours.

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



B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

Neighborhood INTEGRITY covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

OTC stands for "over-the-counter." Neighborhood INTEGRITY covers some OTC drugs when they are written as prescriptions by your provider.

You can read the Neighborhood INTEGRITY Drug List to see what OTC drugs are covered.

B15. What is your copay?

As a Neighborhood INTEGRITY member, you have no copays for prescription and OTC drugs as long as you follow Neighborhood INTEGRITY's rules.

B16. What are drug tiers?

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are generic drugs.
- Tier 2 drugs are brand name drugs.
- Tier 3 drugs are OTC drugs.

All tiers have no copay.



C. Overview of the List of Covered Drugs

The *List of Covered Drugs* gives you information about the drugs covered by Neighborhood INTEGRITY. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on 155. The index alphabetically lists all drugs covered by Neighborhood INTEGRITY.

Note: The **DP** next to a drug means the drug is not a “Part D drug.” The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage).

- In addition, if you are getting Extra Help to pay for your prescriptions, you will not get any Extra Help to pay for these drugs. For more information on Extra Help, please see the call-out box below.

Extra Help is a Medicare program that helps people with limited incomes and resources reduce Medicare Part D prescription drug costs, such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy,” or “LIS.”

- These drugs also have different rules for appeals. An appeal is a formal way of asking us to review a coverage decision and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Rhode Island Medicaid.
- If you or your doctor disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call Member Services at 1-844-812-6896 (TTY 711). You can also read Chapter 9, of the *Member Handbook* to learn how to appeal a decision.



C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular- Drugs to Treat Heart and Circulation Conditions. That is where you will find drugs that treat heart conditions.

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

B/D = This prescription drug has a Part B versus Part D administrative prior authorization requirement. This drug may be covered under Medicare Part B or Part D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

DP = The drug is not a Part D drug.

QL = Quantity Limit. For certain drugs, Neighborhood INTEGRITY limits the amount of the drug that Neighborhood INTEGRITY will cover.

ST = Step Therapy. In some cases, Neighborhood INTEGRITY requires you to first try certain drugs to treat your medical condition before we will cover another drug for your condition. For example, if *Drug A* and *Drug B* both treat your medical condition, Neighborhood INTEGRITY may not cover *Drug B* unless you try *Drug A* first. If *Drug A* does not work for you, Neighborhood INTEGRITY will then cover *Drug B*.

PA = Prior authorization. Neighborhood INTEGRITY requires you or your physician to get prior authorization for certain drugs. This means you will need to get approval from Neighborhood INTEGRITY before you fill your prescriptions. If you don't get approval, Neighborhood INTEGRITY may not cover the drug.

NDS = Non-Extended Day Supply. This drug is not available for more than a 30-day supply.

LA = Limited Access. This drug is only available through certain specialty pharmacies.



RI_CY20_2T_MMP eff 11/01/2020**Drug Name**

Last Updated October/2020

Formulary ID: 00020341

Version: 16

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

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

MISCELLANEOUS

<i>acephen sup 120mg</i>	\$0 (Tier 3) DP
<i>acephen sup 325mg</i>	\$0 (Tier 3) DP
<i>acephen sup 650mg</i>	\$0 (Tier 3) DP
<i>acetaminophen suppos 120 mg</i>	\$0 (Tier 3) DP
<i>acetaminophen suppos 650 mg</i>	\$0 (Tier 3) DP
<i>acetaminophen susp 160 mg/5ml</i>	\$0 (Tier 3) DP
<i>acetaminophen tab 325 mg</i>	\$0 (Tier 3) DP
<i>acetaminophen tab er 650 mg</i>	\$0 (Tier 3) DP
<i>arthrts pain tab 650mg</i>	\$0 (Tier 3) DP
<i>aspirin low tab 81mg ec</i>	\$0 (Tier 3) DP
ASPIRIN SUP 600MG	\$0 (Tier 3) DP
<i>aspirin tab 325 mg</i>	\$0 (Tier 3) DP
<i>aspirin tab 325mg</i>	\$0 (Tier 3) DP
<i>aspirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>aspirin tab delayed release 325 mg</i>	\$0 (Tier 3) DP
<i>betatemp sus 160/5ml</i>	\$0 (Tier 3) DP
<i>chld silapap liq 160/5ml</i>	\$0 (Tier 3) DP
<i>ecpirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>ed-apap liq 80mg/2.5</i>	\$0 (Tier 3) DP
FEVERALL INF SUP 80MG	\$0 (Tier 3) DP
<i>feverall sup 120mg</i>	\$0 (Tier 3) DP
<i>feverall sup 325mg</i>	\$0 (Tier 3) DP
<i>feverall sup 650mg</i>	\$0 (Tier 3) DP
<i>gnp aspirin tab 325mg ec</i>	\$0 (Tier 3) DP
<i>hm aspirin tab 325mg</i>	\$0 (Tier 3) DP
<i>8 hour pain tab 650mg</i>	\$0 (Tier 3) DP
<i>mapap cap 500mg</i>	\$0 (Tier 3) DP
<i>mapap liq 160/5ml</i>	\$0 (Tier 3) DP
<i>mapap tab 325mg</i>	\$0 (Tier 3) DP

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

NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION

<i>celecoxib cap 50 mg</i>	\$0 (Tier 1) QL (240 caps / 30 days)
<i>celecoxib cap 100 mg</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>celecoxib cap 200 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>celecoxib cap 400 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>diclofenac potassium tab 50 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>diclofenac sodium tab delayed release 25 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab delayed release 50 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab delayed release 75 mg</i>	\$0 (Tier 1)
<i>diclofenac sodium tab er 24hr 100 mg</i>	\$0 (Tier 1)

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

OPIOID ANALGESICS - DRUGS TO TREAT PAIN

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	\$0 (Tier 1) QL (2700 mL / 30 days)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>acetaminophen w/ codeine tab 300-15 mg</i>	\$0 (Tier 1)	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	\$0 (Tier 1)	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days)
<i>buprenorphine td patch weekly 5 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 10 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 15 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>buprenorphine td patch weekly 20 mcg/hr</i>	\$0 (Tier 1)	QL (4 patches / 28 days), PA
<i>butorphanol tartrate inj 1 mg/ml</i>	\$0 (Tier 2)	
<i>butorphanol tartrate inj 2 mg/ml</i>	\$0 (Tier 2)	
<i>nalbuphine hcl inj 10 mg/ml</i>	\$0 (Tier 2)	
<i>nalbuphine hcl inj 20 mg/ml</i>	\$0 (Tier 2)	
<i>tramadol hcl tab 50 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	\$0 (Tier 1)	QL (240 tabs / 30 days)

OPIOID ANALGESICS, CII - DRUGS TO TREAT PAIN

<i>fentanyl citrate lozenge on a handle 200 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	\$0 (Tier 2)	NDS, QL (120 lozenges / 30 days), PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 25 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 50 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	\$0 (Tier 1)	QL (10 patches / 30 days), PA

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

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

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

ANESTHETICS - DRUGS FOR NUMBING

LOCAL ANESTHETICS

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

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

ANTI-BACTERIALS - MISCELLANEOUS

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	\$0 (Tier 1)
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 0.8 mg/ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>gentamicin in saline inj 1 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1.2 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 1.6 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin in saline inj 2 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin sulfate inj 10 mg/ml</i>	\$0 (Tier 1)
<i>gentamicin sulfate inj 40 mg/ml</i>	\$0 (Tier 1)
<i>neomycin sulfate tab 500 mg</i>	\$0 (Tier 1)
<i>paromomycin sulfate cap 250 mg</i>	\$0 (Tier 1)
<i>streptomycin sulfate for inj 1 gm</i>	\$0 (Tier 2) NDS
SULFADIAZINE TAB 500MG	\$0 (Tier 2)
<i>tobramycin nebu soln 300 mg/5ml</i>	\$0 (Tier 2) NDS, PA
<i>tobramycin sulfate for inj 1.2 gm</i>	\$0 (Tier 2) NDS
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	\$0 (Tier 1)
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	\$0 (Tier 1)

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	\$0 (Tier 2) NDS
ALINIA SUS 100/5ML	\$0 (Tier 2) NDS
ALINIA TAB 500MG	\$0 (Tier 2) NDS
<i>atovaquone susp 750 mg/5ml</i>	\$0 (Tier 2) NDS
<i>aztreonam for inj 1 gm</i>	\$0 (Tier 1)
<i>aztreonam for inj 2 gm</i>	\$0 (Tier 1)
CAYSTON INH 75MG	\$0 (Tier 2) NDS, LA, PA
<i>clindamycin hcl cap 75 mg</i>	\$0 (Tier 1)
<i>clindamycin hcl cap 150 mg</i>	\$0 (Tier 1)
<i>clindamycin hcl cap 300 mg</i>	\$0 (Tier 1)
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	\$0 (Tier 1)
<i>clindamycin phosphate inj 9 gm/60ml</i>	\$0 (Tier 1)

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

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

ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS

ABELCET INJ 5MG/ML	\$0 (Tier 2) NDS, B/D
AMBISOME INJ 50MG	\$0 (Tier 2) NDS, B/D
<i>amphotericin b for iv soln 50 mg</i>	\$0 (Tier 1) B/D
<i>caspofungin acetate for iv soln 50 mg</i>	\$0 (Tier 2) NDS
<i>caspofungin acetate for iv soln 70 mg</i>	\$0 (Tier 2) NDS
<i>fluconazole for susp 10 mg/ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>fluconazole for susp 40 mg/ml</i>	\$0 (Tier 1)
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	\$0 (Tier 1)
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	\$0 (Tier 1)
<i>fluconazole tab 50 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 100 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 150 mg</i>	\$0 (Tier 1)
<i>fluconazole tab 200 mg</i>	\$0 (Tier 1)
<i>flucytosine cap 250 mg</i>	\$0 (Tier 2) NDS
<i>flucytosine cap 500 mg</i>	\$0 (Tier 2) NDS
<i>griseofulvin microsize susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>griseofulvin microsize tab 500 mg</i>	\$0 (Tier 1)
<i>griseofulvin ultramicrosize tab 125 mg</i>	\$0 (Tier 1)
<i>griseofulvin ultramicrosize tab 250 mg</i>	\$0 (Tier 1)
<i>itraconazole cap 100 mg</i>	\$0 (Tier 1) PA
<i>ketoconazole tab 200 mg</i>	\$0 (Tier 1) PA
<i>miconazole sodium for iv soln 50 mg</i>	\$0 (Tier 2) NDS
<i>miconazole sodium for iv soln 100 mg</i>	\$0 (Tier 2) NDS
MYCAMINE INJ 50MG	\$0 (Tier 2) NDS
MYCAMINE INJ 100MG	\$0 (Tier 2) NDS
NOXAFIL SUS 40MG/ML	\$0 (Tier 2) NDS, QL (630 mL / 30 days)
<i>nystatin tab 500000 unit</i>	\$0 (Tier 1)
<i>posaconazole tab delayed release 100 mg</i>	\$0 (Tier 2) NDS, QL (93 tabs / 30 days)
<i>terbinafine hcl tab 250 mg</i>	\$0 (Tier 1) QL (90 tabs / year)
<i>voriconazole for inj 200 mg</i>	\$0 (Tier 2) NDS, PA
<i>voriconazole for susp 40 mg/ml</i>	\$0 (Tier 2) NDS, PA
<i>voriconazole tab 50 mg</i>	\$0 (Tier 1)
<i>voriconazole tab 200 mg</i>	\$0 (Tier 2) NDS

ANTIMALARIALS - DRUGS TO TREAT MALARIA

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	\$0 (Tier 1)
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	\$0 (Tier 1)
<i>chloroquine phosphate tab 250 mg</i>	\$0 (Tier 1)
<i>chloroquine phosphate tab 500 mg</i>	\$0 (Tier 1)
COARTEM TAB 20-120MG	\$0 (Tier 2)
<i>mefloquine hcl tab 250 mg</i>	\$0 (Tier 1)
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	\$0 (Tier 1)
PRIMAQUINE TAB 26.3MG	\$0 (Tier 2)
<i>quinine sulfate cap 324 mg</i>	\$0 (Tier 1) PA

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS
INFECTION**

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	\$0 (Tier 1)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	\$0 (Tier 1)
APTIVUS CAP 250MG	\$0 (Tier 2) NDS
APTIVUS SOL	\$0 (Tier 2) NDS
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	\$0 (Tier 1)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	\$0 (Tier 1)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	\$0 (Tier 1)
CRIXIVAN CAP 200MG	\$0 (Tier 2)
CRIXIVAN CAP 400MG	\$0 (Tier 2)
<i>didanosine delayed release capsule 200 mg</i>	\$0 (Tier 1)
<i>didanosine delayed release capsule 250 mg</i>	\$0 (Tier 1)
<i>didanosine delayed release capsule 400 mg</i>	\$0 (Tier 1)
EDURANT TAB 25MG	\$0 (Tier 2) NDS
<i>efavirenz cap 50 mg</i>	\$0 (Tier 1)
<i>efavirenz cap 200 mg</i>	\$0 (Tier 2) NDS
<i>efavirenz tab 600 mg</i>	\$0 (Tier 2) NDS
<i>emtricitabine caps 200 mg</i>	\$0 (Tier 1)
EMTRIVA CAP 200MG	\$0 (Tier 2)
EMTRIVA SOL 10MG/ML	\$0 (Tier 2)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	\$0 (Tier 2) NDS
FUZEON INJ 90MG	\$0 (Tier 2) NDS
INTELENCE TAB 25MG	\$0 (Tier 2)
INTELENCE TAB 100MG	\$0 (Tier 2) NDS
INTELENCE TAB 200MG	\$0 (Tier 2) NDS
INVIRASE TAB 500MG	\$0 (Tier 2) NDS
ISENTRESS CHW 25MG	\$0 (Tier 2)
ISENTRESS CHW 100MG	\$0 (Tier 2) NDS
ISENTRESS HD TAB 600MG	\$0 (Tier 2) NDS
ISENTRESS POW 100MG	\$0 (Tier 2)
ISENTRESS TAB 400MG	\$0 (Tier 2) NDS
<i>lamivudine oral soln 10 mg/ml</i>	\$0 (Tier 1)
<i>lamivudine tab 150 mg</i>	\$0 (Tier 1)
<i>lamivudine tab 300 mg</i>	\$0 (Tier 1)
LEXIVA SUS 50MG/ML	\$0 (Tier 2)
<i>nevirapine susp 50 mg/5ml</i>	\$0 (Tier 1)

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>zidovudine cap 100 mg</i>	\$0 (Tier 1)
<i>zidovudine syrup 10 mg/ml</i>	\$0 (Tier 1)
<i>zidovudine tab 300 mg</i>	\$0 (Tier 1)

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

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

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

ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS

<i>cycloserine cap 250 mg</i>	\$0 (Tier 2) NDS
<i>ethambutol hcl tab 100 mg</i>	\$0 (Tier 1)
<i>ethambutol hcl tab 400 mg</i>	\$0 (Tier 1)
<i>isoniazid syrup 50 mg/5ml</i>	\$0 (Tier 1)
<i>isoniazid tab 100 mg</i>	\$0 (Tier 1)
<i>isoniazid tab 300 mg</i>	\$0 (Tier 1)
PASER GRA 4GM	\$0 (Tier 2)
PRIFTIN TAB 150MG	\$0 (Tier 2)
<i>pyrazinamide tab 500 mg</i>	\$0 (Tier 1)
<i>rifabutin cap 150 mg</i>	\$0 (Tier 1)
<i>rifampin cap 150 mg</i>	\$0 (Tier 1)
<i>rifampin cap 300 mg</i>	\$0 (Tier 1)
<i>rifampin for inj 600 mg</i>	\$0 (Tier 1)
SIRTURO TAB 20MG	\$0 (Tier 2) NDS, LA, PA
SIRTURO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
TRECTOR TAB 250MG	\$0 (Tier 2)

ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS

<i>acyclovir cap 200 mg</i>	\$0 (Tier 1)
<i>acyclovir sodium iv soln 50 mg/ml</i>	\$0 (Tier 1) B/D
<i>acyclovir susp 200 mg/5ml</i>	\$0 (Tier 1)
<i>acyclovir tab 400 mg</i>	\$0 (Tier 1)
<i>acyclovir tab 800 mg</i>	\$0 (Tier 1)
<i>adefovir dipivoxil tab 10 mg</i>	\$0 (Tier 2) NDS
BARACLUDE SOL	\$0 (Tier 2) NDS
<i>entecavir tab 0.5 mg</i>	\$0 (Tier 1)
<i>entecavir tab 1 mg</i>	\$0 (Tier 1)
EPCLUSA TAB 400-100	\$0 (Tier 2) NDS, PA
EPIVIR HBV SOL 5MG/ML	\$0 (Tier 2)
<i>famciclovir tab 125 mg</i>	\$0 (Tier 1)
<i>famciclovir tab 250 mg</i>	\$0 (Tier 1)
<i>famciclovir tab 500 mg</i>	\$0 (Tier 1)
<i>ganciclovir sodium for inj 500 mg</i>	\$0 (Tier 1) B/D
HARVONI PAK	\$0 (Tier 2) NDS, PA
HARVONI PAK 45-200MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
HARVONI TAB 45-200MG	\$0 (Tier 2) NDS, PA
HARVONI TAB 90-400MG	\$0 (Tier 2) NDS, PA
<i>lamivudine tab 100 mg (hbv)</i>	\$0 (Tier 1)
MAVYRET TAB 100-40MG	\$0 (Tier 2) NDS, PA
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	\$0 (Tier 1) QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	\$0 (Tier 1) QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	\$0 (Tier 1) QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	\$0 (Tier 1) QL (1080 mL / year)
PEGASYS INJ	\$0 (Tier 2) NDS, PA
PEGASYS INJ 180MCG/M	\$0 (Tier 2) NDS, PA
PEGASYS INJ PROCLICK	\$0 (Tier 2) NDS, PA
RELENZA MIS DISKHALE	\$0 (Tier 2) QL (6 inhalers / year)
<i>ribavirin cap 200 mg</i>	\$0 (Tier 1)
<i>ribavirin tab 200 mg</i>	\$0 (Tier 1)
<i>rimantadine hydrochloride tab 100 mg</i>	\$0 (Tier 1)
<i>valacyclovir hcl tab 1 gm</i>	\$0 (Tier 1)
<i>valacyclovir hcl tab 500 mg</i>	\$0 (Tier 1)
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	\$0 (Tier 2) NDS
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	\$0 (Tier 2) NDS
VEMLIDY TAB 25MG	\$0 (Tier 2) NDS
VOSEVI TAB	\$0 (Tier 2) NDS, PA

CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS

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

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

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

ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS

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

FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS

CIPRO (10%) SUS 500MG/5	\$0 (Tier 2)
<i>ciprofloxacin 200 mg/100ml in d5w</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>ciprofloxacin 400 mg/200ml in d5w</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	\$0 (Tier 1)
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	\$0 (Tier 1)
<i>levofloxacin iv soln 25 mg/ml</i>	\$0 (Tier 1)
<i>levofloxacin oral soln 25 mg/ml</i>	\$0 (Tier 1)
<i>levofloxacin tab 250 mg</i>	\$0 (Tier 1)
<i>levofloxacin tab 500 mg</i>	\$0 (Tier 1)
<i>levofloxacin tab 750 mg</i>	\$0 (Tier 1)
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	\$0 (Tier 1)

PENICILLINS - DRUGS TO TREAT INFECTIONS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) tab 500 mg</i>	\$0 (Tier 1)
<i>amoxicillin (trihydrate) tab 875 mg</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	\$0 (Tier 1)
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0 (Tier 1)
<i>ampicillin cap 500 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 125 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 250 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for inj 500 mg</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>ampicillin sodium for iv soln 10 gm</i>	\$0 (Tier 1)
BICILLIN L-A INJ 600000	\$0 (Tier 2)
BICILLIN L-A INJ 1200000	\$0 (Tier 2)
BICILLIN L-A INJ 2400000	\$0 (Tier 2)
<i>dicloxacillin sodium cap 250 mg</i>	\$0 (Tier 1)
<i>dicloxacillin sodium cap 500 mg</i>	\$0 (Tier 1)
NAFCILLIN INJ 10GM	\$0 (Tier 2)
<i>nafcillin sodium for inj 1 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for inj 2 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 1 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 2 gm</i>	\$0 (Tier 1)
<i>nafcillin sodium for iv soln 10 gm</i>	\$0 (Tier 2) NDS
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	\$0 (Tier 1)
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	\$0 (Tier 1)
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	\$0 (Tier 2) NDS
PEN G PROC INJ 600000	\$0 (Tier 2)
PEN GK/DEXTR INJ 40000/ML	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
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PEN GK/DEXTR INJ 60000/ML	\$0 (Tier 2)	
<i>penicillin g potassium for inj 5000000 unit</i>	\$0 (Tier 1)	
<i>penicillin g potassium for inj 20000000 unit</i>	\$0 (Tier 1)	
<i>penicillin g sodium for inj 5000000 unit</i>	\$0 (Tier 1)	
<i>penicillin v potassium for soln 125 mg/5ml</i>	\$0 (Tier 1)	
<i>penicillin v potassium for soln 250 mg/5ml</i>	\$0 (Tier 1)	
<i>penicillin v potassium tab 250 mg</i>	\$0 (Tier 1)	
<i>penicillin v potassium tab 500 mg</i>	\$0 (Tier 1)	
<i>pipracillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0 (Tier 1)	
<i>pipracillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0 (Tier 1)	
<i>pipracillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0 (Tier 1)	
<i>pipracillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	\$0 (Tier 1)	
<i>pipracillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0 (Tier 1)	

TETRACYCLINES - DRUGS TO TREAT INFECTIONS

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

ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER

ALKYLATING AGENTS

BENDEKA INJ 100/4ML	\$0 (Tier 2) NDS, B/D	
CYCLOPHOSPH INJ 1GM	\$0 (Tier 2) NDS, B/D	
CYCLOPHOSPHA INJ 500MG	\$0 (Tier 2) NDS, B/D	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>cyclophosphamide cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclophosphamide cap 50 mg</i>	\$0 (Tier 1) B/D
<i>cyclophosphamide for inj 1 gm</i>	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide for inj 2 gm</i>	\$0 (Tier 2) NDS, B/D
<i>cyclophosphamide for inj 500 mg</i>	\$0 (Tier 2) NDS, B/D
EMCYT CAP 140MG	\$0 (Tier 2)
GLEOSTINE CAP 10MG	\$0 (Tier 2)
GLEOSTINE CAP 40MG	\$0 (Tier 2) NDS
GLEOSTINE CAP 100MG	\$0 (Tier 2) NDS
LEUKERAN TAB 2MG	\$0 (Tier 2) NDS

ANTHRACYCLINES

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

ANTIMETABOLITES

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>methotrexate sodium for inj 1 gm</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	\$0 (Tier 1) B/D
PURIXAN SUS 20MG/ML	\$0 (Tier 2) NDS
TABLOID TAB 40MG	\$0 (Tier 2) NDS
ANTIMITOTIC, TAXOIDS	
ABRAXANE INJ 100MG	\$0 (Tier 2) NDS, B/D
<i>docetaxel for inj conc 20 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 20MG/2ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 80MG/4ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 80MG/8ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 160/8ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 160/16ML	\$0 (Tier 2) NDS, B/D
DOCETAXEL INJ 200/10	\$0 (Tier 2) NDS, B/D
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	\$0 (Tier 2) NDS, B/D
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	\$0 (Tier 2) NDS, B/D
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	\$0 (Tier 1) B/D
TAXOTERE INJ 80MG/4ML	\$0 (Tier 2) NDS, B/D
ANTIMITOTIC, VINCA ALKALOIDS	
<i>vincristine sulfate iv soln 1 mg/ml</i>	\$0 (Tier 1) B/D
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	\$0 (Tier 1) B/D
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BIOLOGIC RESPONSE MODIFIERS

AVASTIN INJ	\$0 (Tier 2) NDS, LA, PA
AVASTIN INJ 400/16ML	\$0 (Tier 2) NDS, LA, PA
BORTEZOMIB INJ 3.5MG	\$0 (Tier 2) NDS, PA
DAURISMO TAB 25MG	\$0 (Tier 2) NDS, LA, PA
DAURISMO TAB 100MG	\$0 (Tier 2) NDS, LA, PA
ERIVEDGE CAP 150MG	\$0 (Tier 2) NDS, LA, PA
FARYDAK CAP 10MG	\$0 (Tier 2) NDS, LA, PA
FARYDAK CAP 20MG	\$0 (Tier 2) NDS, LA, PA
HERCEP HYLEC SOL 60-10000	\$0 (Tier 2) NDS, PA
HERCEPTIN INJ 150MG	\$0 (Tier 2) NDS, PA
HERCEPTIN INJ 440MG	\$0 (Tier 2) NDS, PA
HERZUMA INJ 150MG	\$0 (Tier 2) NDS, PA
HERZUMA INJ 420MG	\$0 (Tier 2) NDS, PA
IBRANCE CAP 75MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
IBRANCE CAP 100MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
IBRANCE CAP 125MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
IBRANCE TAB 75MG	\$0 (Tier 2) NDS, QL (21 tabs / 28 days), LA, PA
IBRANCE TAB 100MG	\$0 (Tier 2) NDS, QL (21 tabs / 28 days), LA, PA
IBRANCE TAB 125MG	\$0 (Tier 2) NDS, QL (21 tabs / 28 days), LA, PA
IDHIFA TAB 50MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
IDHIFA TAB 100MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
KADCYLA INJ 100MG	\$0 (Tier 2) NDS, B/D
KADCYLA INJ 160MG	\$0 (Tier 2) NDS, B/D
KANJINTI INJ 420MG	\$0 (Tier 2) NDS, PA
KANJINTI SOL 150MG	\$0 (Tier 2) NDS, PA
KEYTRUDA INJ 100MG/4M	\$0 (Tier 2) NDS, PA
KISQALI 200 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI 400 PAK FEMARA	\$0 (Tier 2) NDS, PA
KISQALI 600 PAK FEMARA	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
KISQALI TAB 200DOSE	\$0 (Tier 2) NDS, PA
KISQALI TAB 400DOSE	\$0 (Tier 2) NDS, PA
KISQALI TAB 600DOSE	\$0 (Tier 2) NDS, PA
LYNPARZA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
LYNPARZA TAB 150MG	\$0 (Tier 2) NDS, LA, PA
MVASI INJ 100MG	\$0 (Tier 2) NDS, LA, PA
MVASI INJ 400MG	\$0 (Tier 2) NDS, LA, PA
NINLARO CAP 2.3MG	\$0 (Tier 2) NDS, PA
NINLARO CAP 3MG	\$0 (Tier 2) NDS, PA
NINLARO CAP 4MG	\$0 (Tier 2) NDS, PA
ODOMZO CAP 200MG	\$0 (Tier 2) NDS, LA, PA
OGIVRI INJ 150MG	\$0 (Tier 2) NDS, PA
OGIVRI INJ 420MG	\$0 (Tier 2) NDS, PA
ONTRUZANT INJ 150MG	\$0 (Tier 2) NDS, PA
ONTRUZANT INJ 420MG	\$0 (Tier 2) NDS, PA
PHESGO SOL	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ 100MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ 500MG	\$0 (Tier 2) NDS, LA, PA
RITUXAN INJ HYCELA	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 200MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 250MG	\$0 (Tier 2) NDS, LA, PA
RUBRACA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
RUXIENCE INJ 100/10ML	\$0 (Tier 2) NDS, PA
RUXIENCE INJ 500/50ML	\$0 (Tier 2) NDS, PA
TALZENNA CAP 0.25MG	\$0 (Tier 2) NDS, LA, PA
TALZENNA CAP 1MG	\$0 (Tier 2) NDS, LA, PA
TECENTRIQ INJ 840/14	\$0 (Tier 2) NDS, LA, PA
TECENTRIQ INJ 1200/20	\$0 (Tier 2) NDS, LA, PA
TIBSOVO TAB 250MG	\$0 (Tier 2) NDS, LA, PA
TRAZIMERA INJ 420MG	\$0 (Tier 2) NDS, PA
TRUXIMA INJ 100/10ML	\$0 (Tier 2) NDS, PA
TRUXIMA INJ 500/50ML	\$0 (Tier 2) NDS, PA
VELCADE INJ 3.5MG	\$0 (Tier 2) NDS, PA
VENCLEXTA TAB 10MG	\$0 (Tier 2) LA, PA
VENCLEXTA TAB 50MG	\$0 (Tier 2) NDS, LA, PA
VENCLEXTA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
VENCLEXTA TAB START PK	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 50MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 100MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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VERZENIO TAB 150MG	\$0 (Tier 2) NDS, LA, PA
VERZENIO TAB 200MG	\$0 (Tier 2) NDS, LA, PA
ZEJULA CAP 100MG	\$0 (Tier 2) NDS, LA, PA
ZIRABEV INJ 100/4ML	\$0 (Tier 2) NDS, PA
ZIRABEV INJ 400/16ML	\$0 (Tier 2) NDS, PA
ZOLINZA CAP 100MG	\$0 (Tier 2) NDS, PA

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	\$0 (Tier 2) NDS, PA
<i>anastrozole tab 1 mg</i>	\$0 (Tier 1)
<i>bicalutamide tab 50 mg</i>	\$0 (Tier 1)
DEPO-PROVERA INJ 400/ML	\$0 (Tier 2) B/D
ERLEADA TAB 60MG	\$0 (Tier 2) NDS, LA, PA
<i>exemestane tab 25 mg</i>	\$0 (Tier 1)
<i>flutamide cap 125 mg</i>	\$0 (Tier 1)
<i>fulvestrant inj 250 mg/5ml</i>	\$0 (Tier 2) NDS, B/D
<i>letrozole tab 2.5 mg</i>	\$0 (Tier 1)
<i>leuprolide acetate inj kit 5 mg/ml</i>	\$0 (Tier 1) PA
LUPRON DEPOT INJ 3.75MG	\$0 (Tier 2) NDS, PA
LUPRON DEPOT INJ 11.25MG	\$0 (Tier 2) NDS, PA
LYSODREN TAB 500MG	\$0 (Tier 2)
<i>megestrol acetate susp 40 mg/ml</i>	\$0 (Tier 2)
<i>megestrol acetate susp 625 mg/5ml</i>	\$0 (Tier 2) PA
<i>megestrol acetate tab 20 mg</i>	\$0 (Tier 2)
<i>megestrol acetate tab 40 mg</i>	\$0 (Tier 2)
<i>nilutamide tab 150 mg</i>	\$0 (Tier 2) NDS
NUBEQA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
SOLTAMOX SOL 10MG/5ML	\$0 (Tier 2) NDS
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	\$0 (Tier 1)
<i>toremifene citrate tab 60 mg (base equivalent)</i>	\$0 (Tier 2) NDS
TRELSTAR MIX INJ 3.75MG	\$0 (Tier 2) NDS, PA
TRELSTAR MIX INJ 11.25MG	\$0 (Tier 2) NDS, PA
XTANDI CAP 40MG	\$0 (Tier 2) NDS, LA, PA
ZYTIGA TAB 500MG	\$0 (Tier 2) NDS, LA, PA

IMMUNOMODULATORS

POMALYST CAP 1MG	\$0 (Tier 2) NDS, QL (21 caps / 21 days), LA, PA
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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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POMALYST CAP 2MG	\$0 (Tier 2) NDS, QL (21 caps / 21 days), LA, PA
POMALYST CAP 3MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
POMALYST CAP 4MG	\$0 (Tier 2) NDS, QL (21 caps / 28 days), LA, PA
REVLIMID CAP 2.5MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 5MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 10MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 15MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 20MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
REVLIMID CAP 25MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), LA, PA
THALOMID CAP 50MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
THALOMID CAP 100MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
THALOMID CAP 150MG	\$0 (Tier 2) NDS, QL (56 caps / 28 days), PA
THALOMID CAP 200MG	\$0 (Tier 2) NDS, QL (56 caps / 28 days), PA

KINASE INHIBITORS

AFINITOR DIS TAB 2MG	\$0 (Tier 2) NDS, QL (150 tabs / 30 days), PA
AFINITOR DIS TAB 3MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
AFINITOR DIS TAB 5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
AFINITOR TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
ALECENSA CAP 150MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG PAK	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 30MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 90MG	\$0 (Tier 2) NDS, LA, PA
ALUNBRIG TAB 180MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
AYVAKIT TAB 100MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
AYVAKIT TAB 200MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
AYVAKIT TAB 300MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
BALVERSA TAB 3MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 4MG	\$0 (Tier 2) NDS, LA, PA
BALVERSA TAB 5MG	\$0 (Tier 2) NDS, LA, PA
BOSULIF TAB 100MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 400MG	\$0 (Tier 2) NDS, PA
BOSULIF TAB 500MG	\$0 (Tier 2) NDS, PA
BRAFTOVI CAP 75MG	\$0 (Tier 2) NDS, LA, PA
BRUKINSA CAP 80MG	\$0 (Tier 2) NDS, LA, PA
CABOMETYX TAB 20MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 40MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 60MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
CALQUENCE CAP 100MG	\$0 (Tier 2) NDS, LA, PA
CAPRELSA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
CAPRELSA TAB 300MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 60MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 100MG	\$0 (Tier 2) NDS, LA, PA
COMETRIQ KIT 140MG	\$0 (Tier 2) NDS, LA, PA
COPIKTRA CAP 15MG	\$0 (Tier 2) NDS, LA, PA
COPIKTRA CAP 25MG	\$0 (Tier 2) NDS, LA, PA
COTELLIC TAB 20MG	\$0 (Tier 2) NDS, LA, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (90 tabs / 30 days), PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 2.5 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 5 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>everolimus tab 7.5 mg</i>	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LORBRENA TAB 100MG	\$0 (Tier 2) NDS, LA, PA
MEKINIST TAB 0.5MG	\$0 (Tier 2) NDS, LA, PA
MEKINIST TAB 2MG	\$0 (Tier 2) NDS, LA, PA
MEKTOVI TAB 15MG	\$0 (Tier 2) NDS, LA, PA
NERLYNX TAB 40MG	\$0 (Tier 2) NDS, LA, PA
NEXAVAR TAB 200MG	\$0 (Tier 2) NDS, LA, PA
PEMAZYRE TAB 4.5MG	\$0 (Tier 2) NDS, LA, PA
PEMAZYRE TAB 9MG	\$0 (Tier 2) NDS, LA, PA
PEMAZYRE TAB 13.5MG	\$0 (Tier 2) NDS, LA, PA
PIQRAY 200MG TAB DOSE	\$0 (Tier 2) NDS, PA
PIQRAY 250MG TAB DOSE	\$0 (Tier 2) NDS, PA
PIQRAY 300MG TAB DOSE	\$0 (Tier 2) NDS, PA
QINLOCK TAB 50MG	\$0 (Tier 2) NDS, LA, PA
RETEVMO CAP 40MG	\$0 (Tier 2) NDS, LA, PA
RETEVMO CAP 80MG	\$0 (Tier 2) NDS, LA, PA
ROZLYTREK CAP 100MG	\$0 (Tier 2) NDS, LA, PA
ROZLYTREK CAP 200MG	\$0 (Tier 2) NDS, LA, PA
RYDAPT CAP 25MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 20MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 50MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 70MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 80MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 100MG	\$0 (Tier 2) NDS, PA
SPRYCEL TAB 140MG	\$0 (Tier 2) NDS, PA
STIVARGA TAB 40MG	\$0 (Tier 2) NDS, LA, PA
SUTENT CAP 12.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 25MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 37.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
SUTENT CAP 50MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
TABRECTA TAB 150MG	\$0 (Tier 2) NDS, PA
TABRECTA TAB 200MG	\$0 (Tier 2) NDS, PA
TAFINLAR CAP 50MG	\$0 (Tier 2) NDS, LA, PA
TAFINLAR CAP 75MG	\$0 (Tier 2) NDS, LA, PA
TAGRISSE TAB 40MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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TAGRISSO TAB 80MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
TASIGNA CAP 50MG	\$0 (Tier 2) NDS, PA
TASIGNA CAP 150MG	\$0 (Tier 2) NDS, PA
TASIGNA CAP 200MG	\$0 (Tier 2) NDS, PA
TUKYSA TAB 50MG	\$0 (Tier 2) NDS, LA, PA
TUKYSA TAB 150MG	\$0 (Tier 2) NDS, LA, PA
TURALIO CAP 200MG	\$0 (Tier 2) NDS, LA, PA
TYKERB TAB 250MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI CAP 25MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI CAP 100MG	\$0 (Tier 2) NDS, LA, PA
VITRAKVI SOL 20MG/ML	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 15MG	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 30MG	\$0 (Tier 2) NDS, LA, PA
VIZIMPRO TAB 45MG	\$0 (Tier 2) NDS, LA, PA
VOTRIENT TAB 200MG	\$0 (Tier 2) NDS, LA, PA
XALKORI CAP 200MG	\$0 (Tier 2) NDS, LA, PA
XALKORI CAP 250MG	\$0 (Tier 2) NDS, LA, PA
XOSPATA TAB 40MG	\$0 (Tier 2) NDS, LA, PA
ZELBORAF TAB 240MG	\$0 (Tier 2) NDS, LA, PA
ZYDELIG TAB 100MG	\$0 (Tier 2) NDS, LA, PA
ZYDELIG TAB 150MG	\$0 (Tier 2) NDS, LA, PA
ZYKADIA TAB 150MG	\$0 (Tier 2) NDS, LA, PA

MISCELLANEOUS

<i>bexarotene cap 75 mg</i>	\$0 (Tier 2) NDS, PA
<i>hydroxyurea cap 500 mg</i>	\$0 (Tier 1)
INQOVI TAB 35-100MG	\$0 (Tier 2) NDS, LA, PA
LONSURF TAB 15-6.14	\$0 (Tier 2) NDS, PA
LONSURF TAB 20-8.19	\$0 (Tier 2) NDS, PA
MATULANE CAP 50MG	\$0 (Tier 2) NDS, LA
SYLATRON KIT 200MCG	\$0 (Tier 2) NDS, PA
SYLATRON KIT 300MCG	\$0 (Tier 2) NDS, PA
SYNRIBO INJ 3.5MG	\$0 (Tier 2) NDS, PA
TAZVERIK TAB 200MG	\$0 (Tier 2) NDS, LA, PA
<i>tretinoin cap 10 mg</i>	\$0 (Tier 2) NDS
XPOVIO PAK 40MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 60MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 80MG	\$0 (Tier 2) NDS, LA, PA
XPOVIO PAK 100MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PLATINUM-BASED AGENTS	
<i>carboplatin iv soln 50 mg/5ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 150 mg/15ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 450 mg/45ml</i>	\$0 (Tier 1) B/D
<i>carboplatin iv soln 600 mg/60ml</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	\$0 (Tier 1) B/D
<i>oxaliplatin for iv inj 50 mg</i>	\$0 (Tier 2) NDS, B/D
<i>oxaliplatin for iv inj 100 mg</i>	\$0 (Tier 2) NDS, B/D
<i>oxaliplatin iv soln 50 mg/10ml</i>	\$0 (Tier 1) B/D
<i>oxaliplatin iv soln 100 mg/20ml</i>	\$0 (Tier 1) B/D
PROTECTIVE AGENTS	
<i>leucovorin calcium for inj 50 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 100 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 200 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 350 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium for inj 500 mg</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	\$0 (Tier 1) B/D
<i>leucovorin calcium tab 5 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 10 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 15 mg</i>	\$0 (Tier 1)
<i>leucovorin calcium tab 25 mg</i>	\$0 (Tier 1)
MESNEX TAB 400MG	\$0 (Tier 2) NDS
TOPOISOMERASE INHIBITORS	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	\$0 (Tier 1) B/D
<i>toposar inj 1gm/50ml</i>	\$0 (Tier 1) B/D
<i>toposar inj 100/5ml</i>	\$0 (Tier 1) B/D

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION
CONDITIONS****ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD
PRESSURE**

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)
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<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
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<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)
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<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	\$0 (Tier 1)
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<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)
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<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	\$0 (Tier 1)
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ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>benazepril hcl tab 5 mg</i>	\$0 (Tier 1)
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<i>benazepril hcl tab 10 mg</i>	\$0 (Tier 1)
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<i>benazepril hcl tab 20 mg</i>	\$0 (Tier 1)
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<i>benazepril hcl tab 40 mg</i>	\$0 (Tier 1)
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<i>captopril tab 12.5 mg</i>	\$0 (Tier 1)
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<i>captopril tab 25 mg</i>	\$0 (Tier 1)
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<i>captopril tab 50 mg</i>	\$0 (Tier 1)
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<i>captopril tab 100 mg</i>	\$0 (Tier 1)
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<i>enalapril maleate tab 2.5 mg</i>	\$0 (Tier 1)
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<i>enalapril maleate tab 5 mg</i>	\$0 (Tier 1)
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<i>enalapril maleate tab 10 mg</i>	\$0 (Tier 1)
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<i>enalapril maleate tab 20 mg</i>	\$0 (Tier 1)
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<i>fosinopril sodium tab 10 mg</i>	\$0 (Tier 1)
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<i>fosinopril sodium tab 20 mg</i>	\$0 (Tier 1)
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<i>fosinopril sodium tab 40 mg</i>	\$0 (Tier 1)
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<i>lisinopril tab 2.5 mg</i>	\$0 (Tier 1)
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<i>lisinopril tab 5 mg</i>	\$0 (Tier 1)
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<i>lisinopril tab 10 mg</i>	\$0 (Tier 1)
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<i>lisinopril tab 20 mg</i>	\$0 (Tier 1)
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<i>lisinopril tab 30 mg</i>	\$0 (Tier 1)
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<i>lisinopril tab 40 mg</i>	\$0 (Tier 1)
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<i>moexipril hcl tab 7.5 mg</i>	\$0 (Tier 1)
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<i>moexipril hcl tab 15 mg</i>	\$0 (Tier 1)
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<i>perindopril erbumine tab 2 mg</i>	\$0 (Tier 1)
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<i>perindopril erbumine tab 4 mg</i>	\$0 (Tier 1)
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<i>perindopril erbumine tab 8 mg</i>	\$0 (Tier 1)
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<i>quinapril hcl tab 5 mg</i>	\$0 (Tier 1)
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<i>quinapril hcl tab 10 mg</i>	\$0 (Tier 1)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>quinapril hcl tab 20 mg</i>	\$0 (Tier 1)
<i>quinapril hcl tab 40 mg</i>	\$0 (Tier 1)
<i>ramipril cap 1.25 mg</i>	\$0 (Tier 1)
<i>ramipril cap 2.5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 5 mg</i>	\$0 (Tier 1)
<i>ramipril cap 10 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 1 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 2 mg</i>	\$0 (Tier 1)
<i>trandolapril tab 4 mg</i>	\$0 (Tier 1)
ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>eplerenone tab 25 mg</i>	\$0 (Tier 1)
<i>eplerenone tab 50 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 25 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 50 mg</i>	\$0 (Tier 1)
<i>spironolactone tab 100 mg</i>	\$0 (Tier 1)
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>doxazosin mesylate tab 1 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 2 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 4 mg</i>	\$0 (Tier 1)
<i>doxazosin mesylate tab 8 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 1 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 2 mg</i>	\$0 (Tier 1)
<i>prazosin hcl cap 5 mg</i>	\$0 (Tier 1)
<i>terazosin hcl cap 1 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>terazosin hcl cap 10 mg (base equivalent)</i>	\$0 (Tier 1)
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	\$0 (Tier 1)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	\$0 (Tier 1)	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	\$0 (Tier 1)	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	\$0 (Tier 1)	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	\$0 (Tier 1)	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	\$0 (Tier 1)	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	\$0 (Tier 1)	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	\$0 (Tier 1)	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	\$0 (Tier 1)	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	\$0 (Tier 1)	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	\$0 (Tier 1)	
ENTRESTO TAB 24-26MG	\$0 (Tier 2)	
ENTRESTO TAB 49-51MG	\$0 (Tier 2)	
ENTRESTO TAB 97-103MG	\$0 (Tier 2)	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	\$0 (Tier 1)	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	\$0 (Tier 1)	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	\$0 (Tier 1)	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	\$0 (Tier 1)	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	\$0 (Tier 1)	

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

ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE

<i>candesartan cilexetil tab 4 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil tab 8 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil tab 16 mg</i>	\$0 (Tier 1)
<i>candesartan cilexetil tab 32 mg</i>	\$0 (Tier 1)
<i>irbesartan tab 75 mg</i>	\$0 (Tier 1)
<i>irbesartan tab 150 mg</i>	\$0 (Tier 1)
<i>irbesartan tab 300 mg</i>	\$0 (Tier 1)

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

ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM

<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 200 mg</i>	\$0 (Tier 1)
<i>amiodarone hcl tab 400 mg</i>	\$0 (Tier 1)
<i>disopyramide phosphate cap 100 mg</i>	\$0 (Tier 2)
<i>disopyramide phosphate cap 150 mg</i>	\$0 (Tier 2)
<i>dofetilide cap 125 mcg (0.125 mg)</i>	\$0 (Tier 1)
<i>dofetilide cap 250 mcg (0.25 mg)</i>	\$0 (Tier 1)
<i>dofetilide cap 500 mcg (0.5 mg)</i>	\$0 (Tier 1)
<i>flecainide acetate tab 50 mg</i>	\$0 (Tier 1)
<i>flecainide acetate tab 100 mg</i>	\$0 (Tier 1)
<i>flecainide acetate tab 150 mg</i>	\$0 (Tier 1)
MULTAQ TAB 400MG	\$0 (Tier 2)
NORPACE CAP 100MG CR	\$0 (Tier 2)
NORPACE CAP 150MG CR	\$0 (Tier 2)
<i>pacerone tab 100mg</i>	\$0 (Tier 1)
<i>pacerone tab 200mg</i>	\$0 (Tier 1)
<i>pacerone tab 400mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 225 mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 325 mg</i>	\$0 (Tier 1)
<i>propafenone hcl cap er 12hr 425 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>propafenone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 225 mg</i>	\$0 (Tier 1)
<i>propafenone hcl tab 300 mg</i>	\$0 (Tier 1)
<i>quinidine sulfate tab 200 mg</i>	\$0 (Tier 1)
<i>quinidine sulfate tab 300 mg</i>	\$0 (Tier 1)
<i>sorine tab 80mg</i>	\$0 (Tier 1)
<i>sorine tab 120mg</i>	\$0 (Tier 1)
<i>sorine tab 160mg</i>	\$0 (Tier 1)
<i>sorine tab 240mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 80 mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 120 mg</i>	\$0 (Tier 1)
<i>sotalol hcl (afib/afl) tab 160 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 80 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 120 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 160 mg</i>	\$0 (Tier 1)
<i>sotalol hcl tab 240 mg</i>	\$0 (Tier 1)

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

<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	\$0 (Tier 1)
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	\$0 (Tier 1)
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	\$0 (Tier 1)
<i>lovastatin tab 10 mg</i>	\$0 (Tier 1)
<i>lovastatin tab 20 mg</i>	\$0 (Tier 1)
<i>lovastatin tab 40 mg</i>	\$0 (Tier 1)
<i>pravastatin sodium tab 10 mg</i>	\$0 (Tier 1)
<i>pravastatin sodium tab 20 mg</i>	\$0 (Tier 1)
<i>pravastatin sodium tab 40 mg</i>	\$0 (Tier 1)
<i>pravastatin sodium tab 80 mg</i>	\$0 (Tier 1)
<i>rosuvastatin calcium tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>rosuvastatin calcium tab 40 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>simvastatin tab 5 mg</i>	\$0 (Tier 1)
<i>simvastatin tab 10 mg</i>	\$0 (Tier 1)
<i>simvastatin tab 20 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>simvastatin tab 40 mg</i>	\$0 (Tier 1)
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<i>simvastatin tab 80 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
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ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>cholestyramine light powder 4 gm/dose</i>	\$0 (Tier 1)
<i>cholestyramine light powder packets 4 gm</i>	\$0 (Tier 1)
<i>cholestyramine powder 4 gm/dose</i>	\$0 (Tier 1)
<i>cholestyramine powder packets 4 gm</i>	\$0 (Tier 1)
<i>colesevelam hcl packet for susp 3.75 gm</i>	\$0 (Tier 1)
<i>colesevelam hcl tab 625 mg</i>	\$0 (Tier 1)
<i>colestipol hcl granule packets 5 gm</i>	\$0 (Tier 1)
<i>colestipol hcl granules 5 gm</i>	\$0 (Tier 1)
<i>colestipol hcl tab 1 gm</i>	\$0 (Tier 1)
<i>ezetimibe tab 10 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0 (Tier 1)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 67 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 134 mg</i>	\$0 (Tier 1)
<i>fenofibrate micronized cap 200 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 48 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 54 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 145 mg</i>	\$0 (Tier 1)
<i>fenofibrate tab 160 mg</i>	\$0 (Tier 1)
<i>gemfibrozil tab 600 mg</i>	\$0 (Tier 1)
JUXTAPID CAP 5MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 10MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 20MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 30MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 40MG	\$0 (Tier 2) NDS, LA, PA
JUXTAPID CAP 60MG	\$0 (Tier 2) NDS, LA, PA
<i>niacin (antihyperlipidemic) tab 500 mg</i>	\$0 (Tier 1)
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	\$0 (Tier 1)
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	\$0 (Tier 1)
<i>niacor tab 500mg</i>	\$0 (Tier 1)
PRALUENT INJ 75MG/ML	\$0 (Tier 2) PA
PRALUENT INJ 150MG/ML	\$0 (Tier 2) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>prevalite pow 4gm</i>	\$0 (Tier 1)
<i>prevalite pow 4gm pk</i>	\$0 (Tier 1)
VASCEPA CAP 0.5GM	\$0 (Tier 2)
VASCEPA CAP 1GM	\$0 (Tier 2)

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

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

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

<i>acebutolol hcl cap 200 mg</i>	\$0 (Tier 1)
<i>acebutolol hcl cap 400 mg</i>	\$0 (Tier 1)
<i>atenolol tab 25 mg</i>	\$0 (Tier 1)
<i>atenolol tab 50 mg</i>	\$0 (Tier 1)
<i>atenolol tab 100 mg</i>	\$0 (Tier 1)
<i>betaxolol hcl tab 10 mg</i>	\$0 (Tier 1)
<i>betaxolol hcl tab 20 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 5 mg</i>	\$0 (Tier 1)
<i>bisoprolol fumarate tab 10 mg</i>	\$0 (Tier 1)
BYSTOLIC TAB 2.5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BYSTOLIC TAB 20MG	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>carvedilol tab 3.125 mg</i>	\$0 (Tier 1)

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

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD
PRESSURE AND HEART CONDITIONS**

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 12hr 60 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 12hr 90 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 12hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	\$0 (Tier 1)
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	\$0 (Tier 1)
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	\$0 (Tier 1)
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	\$0 (Tier 1)

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>verapamil hcl cap er 24hr 360 mg</i>	\$0 (Tier 1)
<i>verapamil hcl iv soln 2.5 mg/ml</i>	\$0 (Tier 1)
<i>verapamil hcl tab 40 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab 80 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab 120 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab er 120 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab er 180 mg</i>	\$0 (Tier 1)
<i>verapamil hcl tab er 240 mg</i>	\$0 (Tier 1)
<i>DIGITALIS GLYCOSIDES - DRUGS TO TREAT HEART CONDITIONS</i>	
<i>digitek tab 0.25mg</i>	\$0 (Tier 1) PA; PA if 70 years and older
<i>digitek tab 0.125mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	\$0 (Tier 1)
<i>digoxin oral soln 0.05 mg/ml</i>	\$0 (Tier 1) PA; PA if 70 years and older
<i>digoxin tab 125 mcg (0.125 mg)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	\$0 (Tier 1) PA; PA if 70 years and older
<i>DIURETICS - DRUGS TO TREAT HEART CONDITIONS</i>	
<i>acetazolamide cap er 12hr 500 mg</i>	\$0 (Tier 1)
<i>acetazolamide tab 125 mg</i>	\$0 (Tier 1)
<i>acetazolamide tab 250 mg</i>	\$0 (Tier 1)
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	\$0 (Tier 1)
<i>amiloride hcl tab 5 mg</i>	\$0 (Tier 1)
<i>bumetanide inj 0.25 mg/ml</i>	\$0 (Tier 1)
<i>bumetanide tab 0.5 mg</i>	\$0 (Tier 1)
<i>bumetanide tab 1 mg</i>	\$0 (Tier 1)
<i>bumetanide tab 2 mg</i>	\$0 (Tier 1)
<i>chlorothiazide tab 250 mg</i>	\$0 (Tier 1)
<i>chlorothiazide tab 500 mg</i>	\$0 (Tier 1)
<i>chlorthalidone tab 25 mg</i>	\$0 (Tier 1)
<i>chlorthalidone tab 50 mg</i>	\$0 (Tier 1)
<i>furosemide inj 10 mg/ml</i>	\$0 (Tier 1)
<i>furosemide oral soln 8 mg/ml</i>	\$0 (Tier 1)
<i>furosemide oral soln 10 mg/ml</i>	\$0 (Tier 1)
<i>furosemide tab 20 mg</i>	\$0 (Tier 1)
<i>furosemide tab 40 mg</i>	\$0 (Tier 1)
<i>furosemide tab 80 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide cap 12.5 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>hydrochlorothiazide tab 12.5 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 25 mg</i>	\$0 (Tier 1)
<i>hydrochlorothiazide tab 50 mg</i>	\$0 (Tier 1)
<i>indapamide tab 1.25 mg</i>	\$0 (Tier 1)
<i>indapamide tab 2.5 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 25 mg</i>	\$0 (Tier 1)
<i>methazolamide tab 50 mg</i>	\$0 (Tier 1)
<i>metolazone tab 2.5 mg</i>	\$0 (Tier 1)
<i>metolazone tab 5 mg</i>	\$0 (Tier 1)
<i>metolazone tab 10 mg</i>	\$0 (Tier 1)
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	\$0 (Tier 1)
<i>torsemide tab 5 mg</i>	\$0 (Tier 1)
<i>torsemide tab 10 mg</i>	\$0 (Tier 1)
<i>torsemide tab 20 mg</i>	\$0 (Tier 1)
<i>torsemide tab 100 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	\$0 (Tier 1)
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	\$0 (Tier 1)

MISCELLANEOUS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>hydralazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>hydralazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>metyrosine cap 250 mg</i>	\$0 (Tier 2) NDS, PA
<i>midodrine hcl tab 2.5 mg</i>	\$0 (Tier 1)
<i>midodrine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>midodrine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>minoxidil tab 2.5 mg</i>	\$0 (Tier 1)
<i>minoxidil tab 10 mg</i>	\$0 (Tier 1)
NORTHERA CAP 100MG	\$0 (Tier 2) NDS, QL (90 caps / 30 days), LA, PA
NORTHERA CAP 200MG	\$0 (Tier 2) NDS, QL (180 caps / 30 days), LA, PA
NORTHERA CAP 300MG	\$0 (Tier 2) NDS, QL (180 caps / 30 days), LA, PA
<i>ranolazine tab er 12hr 500 mg</i>	\$0 (Tier 1)
<i>ranolazine tab er 12hr 1000 mg</i>	\$0 (Tier 1)

NITRATES - DRUGS TO TREAT HEART CONDITIONS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	\$0 (Tier 1)
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**PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT
PULMONARY HYPERTENSION**

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

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

ANTIANXIETY - DRUGS TO TREAT ANXIETY

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>alprazolam tab 1 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>buspirone hcl tab 5 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 10 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 15 mg</i>	\$0 (Tier 1)
<i>buspirone hcl tab 30 mg</i>	\$0 (Tier 1)
<i>fluvoxamine maleate tab 25 mg</i>	\$0 (Tier 1)
<i>fluvoxamine maleate tab 50 mg</i>	\$0 (Tier 1)
<i>fluvoxamine maleate tab 100 mg</i>	\$0 (Tier 1)
<i>lorazepam conc 2 mg/ml</i>	\$0 (Tier 1) QL (150 mL / 30 days)
<i>lorazepam inj 2 mg/ml</i>	\$0 (Tier 1)
<i>lorazepam inj 4 mg/ml</i>	\$0 (Tier 1)
<i>lorazepam tab 0.5 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>lorazepam tab 1 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>lorazepam tab 2 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)

ANTICONVULSANTS - DRUGS TO TREAT SEIZURES

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>carbamazepine tab 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 100 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 200 mg</i>	\$0 (Tier 1)
<i>carbamazepine tab er 12hr 400 mg</i>	\$0 (Tier 1)
CELONTIN CAP 300MG	\$0 (Tier 2)
<i>clobazam suspension 2.5 mg/ml</i>	\$0 (Tier 1) PA
<i>clobazam tab 10 mg</i>	\$0 (Tier 1) PA
<i>clobazam tab 20 mg</i>	\$0 (Tier 1) PA
<i>clonazepam orally disintegrating tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.25 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 0.125 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam orally disintegrating tab 2 mg</i>	\$0 (Tier 1) QL (300 tabs / 30 days)
<i>clonazepam tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam tab 1 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>clonazepam tab 2 mg</i>	\$0 (Tier 1) QL (300 tabs / 30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 7.5 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
<i>clorazepate dipotassium tab 15 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days), PA; PA if 65 years and older
DIASTAT ACDL GEL 5-10MG	\$0 (Tier 2)
DIASTAT ACDL GEL 12.5-20	\$0 (Tier 2)
DIASTAT PED GEL 2.5M GEL	\$0 (Tier 2)
<i>diazepam conc 5 mg/ml</i>	\$0 (Tier 1) QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam inj 5 mg/ml</i>	\$0 (Tier 1)
<i>diazepam oral soln 1 mg/ml</i>	\$0 (Tier 1) QL (1200 mL / 30 days), PA; PA if 65 years and older
<i>diazepam rectal gel delivery system 2.5 mg</i>	\$0 (Tier 1)
<i>diazepam rectal gel delivery system 10 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>diazepam rectal gel delivery system 20 mg</i>	\$0 (Tier 1)	
<i>diazepam tab 2 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 5 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam tab 10 mg</i>	\$0 (Tier 1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
DILANTIN CAP 30MG	\$0 (Tier 2)	
DILANTIN CAP 100MG	\$0 (Tier 2)	
DILANTIN CHW 50MG	\$0 (Tier 2)	
DILANTIN-125 SUS 125/5ML	\$0 (Tier 2)	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 125 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 250 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab delayed release 500 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab er 24 hr 250 mg</i>	\$0 (Tier 1)	
<i>divalproex sodium tab er 24 hr 500 mg</i>	\$0 (Tier 1)	
EPIDIOLEX SOL 100MG/ML	\$0 (Tier 2)	NDS, QL (600 mL / 30 days), LA, PA
<i>epitol tab 200mg</i>	\$0 (Tier 1)	
<i>ethosuximide cap 250 mg</i>	\$0 (Tier 1)	
<i>ethosuximide soln 250 mg/5ml</i>	\$0 (Tier 1)	
<i>felbamate susp 600 mg/5ml</i>	\$0 (Tier 2)	NDS
<i>felbamate tab 400 mg</i>	\$0 (Tier 1)	
<i>felbamate tab 600 mg</i>	\$0 (Tier 1)	
FINTEPLA SOL 2.2MG/ML	\$0 (Tier 2)	NDS, QL (360 mL / 30 days), LA, PA
FYCOMPA SUS 0.5MG/ML	\$0 (Tier 2)	NDS, QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
FYCOMPA TAB 6MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
FYCOMPA TAB 8MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
<i>gabapentin cap 100 mg</i>	\$0 (Tier 1) QL (1080 caps / 30 days)
<i>gabapentin cap 300 mg</i>	\$0 (Tier 1) QL (360 caps / 30 days)
<i>gabapentin cap 400 mg</i>	\$0 (Tier 1) QL (270 caps / 30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	\$0 (Tier 1) QL (2160 mL / 30 days)
<i>gabapentin tab 600 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>gabapentin tab 800 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>lamotrigine tab 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 100 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 150 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab 200 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab chewable dispersible 5 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab chewable dispersible 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 25 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 50 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 100 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 200 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 250 mg</i>	\$0 (Tier 1)
<i>lamotrigine tab er 24hr 300 mg</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	\$0 (Tier 1)
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	\$0 (Tier 1)
<i>levetiracetam oral soln 100 mg/ml</i>	\$0 (Tier 1)
<i>levetiracetam tab 250 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab 500 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab 750 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab 1000 mg</i>	\$0 (Tier 1)
<i>levetiracetam tab er 24hr 500 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>levetiracetam tab er 24hr 750 mg</i>	\$0 (Tier 1)
NAYZILAM SPR 5MG	\$0 (Tier 2)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	\$0 (Tier 1)
<i>oxcarbazepine tab 150 mg</i>	\$0 (Tier 1)
<i>oxcarbazepine tab 300 mg</i>	\$0 (Tier 1)
<i>oxcarbazepine tab 600 mg</i>	\$0 (Tier 1)
PEGANONE TAB 250MG	\$0 (Tier 2)
<i>phenobarbital elixir 20 mg/5ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital sodium inj 65 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital sodium inj 130 mg/ml</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 15 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 16.2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 30 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 32.4 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 60 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 64.8 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 97.2 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>phenobarbital tab 100 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
PHENYTEK CAP 200MG	\$0 (Tier 2)
PHENYTEK CAP 300MG	\$0 (Tier 2)
<i>phenytoin chew tab 50 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium extended cap 100 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium extended cap 200 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium extended cap 300 mg</i>	\$0 (Tier 1)
<i>phenytoin sodium inj 50 mg/ml</i>	\$0 (Tier 1)
<i>phenytoin susp 125 mg/5ml</i>	\$0 (Tier 1)
<i>pregabalin cap 25 mg</i>	\$0 (Tier 1) QL (120 caps / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>pregabalin cap 50 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 75 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 100 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 150 mg</i>	\$0 (Tier 1)	QL (120 caps / 30 days), PA
<i>pregabalin cap 200 mg</i>	\$0 (Tier 1)	QL (90 caps / 30 days), PA
<i>pregabalin cap 225 mg</i>	\$0 (Tier 1)	QL (60 caps / 30 days), PA
<i>pregabalin cap 300 mg</i>	\$0 (Tier 1)	QL (60 caps / 30 days), PA
<i>pregabalin soln 20 mg/ml</i>	\$0 (Tier 1)	QL (900 mL / 30 days), PA
<i>primidone tab 50 mg</i>	\$0 (Tier 1)	
<i>primidone tab 250 mg</i>	\$0 (Tier 1)	
<i>roweepra tab 500mg</i>	\$0 (Tier 1)	
<i>roweepra tab 750mg</i>	\$0 (Tier 1)	
<i>roweepra tab 1000mg</i>	\$0 (Tier 1)	
<i>roweepra xr tab 500mg xr</i>	\$0 (Tier 1)	
<i>roweepra xr tab 750mg xr</i>	\$0 (Tier 1)	
SPRITAM TAB 250MG	\$0 (Tier 2)	
SPRITAM TAB 500MG	\$0 (Tier 2)	
SPRITAM TAB 750MG	\$0 (Tier 2)	
SPRITAM TAB 1000MG	\$0 (Tier 2)	
SYMPAZAN MIS 5MG	\$0 (Tier 2)	PA
SYMPAZAN MIS 10MG	\$0 (Tier 2)	NDS, PA
SYMPAZAN MIS 20MG	\$0 (Tier 2)	NDS, PA
<i>tiagabine hcl tab 2 mg</i>	\$0 (Tier 1)	
<i>tiagabine hcl tab 4 mg</i>	\$0 (Tier 1)	
<i>tiagabine hcl tab 12 mg</i>	\$0 (Tier 1)	
<i>tiagabine hcl tab 16 mg</i>	\$0 (Tier 1)	
<i>topiramate sprinkle cap 15 mg</i>	\$0 (Tier 1)	
<i>topiramate sprinkle cap 25 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 25 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 50 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 100 mg</i>	\$0 (Tier 1)	
<i>topiramate tab 200 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>valproate sodium inj 100 mg/ml</i>	\$0 (Tier 1)
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	\$0 (Tier 1)
<i>valproic acid cap 250 mg</i>	\$0 (Tier 1)
VALTOCO LIQ 15MG	\$0 (Tier 2)
VALTOCO LIQ 20MG	\$0 (Tier 2)
VALTOCO SPR 5MG	\$0 (Tier 2)
VALTOCO SPR 10MG	\$0 (Tier 2)
<i>vigabatrin powd pack 500 mg</i>	\$0 (Tier 2) NDS, QL (180 packets / 30 days), LA, PA
<i>vigabatrin tab 500 mg</i>	\$0 (Tier 2) NDS, QL (180 tabs / 30 days), LA, PA
<i>vigadrone pow 500mg</i>	\$0 (Tier 2) NDS, QL (180 packets / 30 days), LA, PA
VIMPAT INJ 200MG/20	\$0 (Tier 2) NDS
VIMPAT SOL 10MG/ML	\$0 (Tier 2) NDS, QL (1200 mL / 30 days)
VIMPAT TAB 50MG	\$0 (Tier 2) QL (120 tabs / 30 days)
VIMPAT TAB 100MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
VIMPAT TAB 150MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
VIMPAT TAB 200MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	\$0 (Tier 2) QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	\$0 (Tier 2) NDS, QL (28 tabs / 28 days)
XCOPRI PAK 150-200	\$0 (Tier 2) NDS, QL (28 tabs / 28 days)
XCOPRI PAK 150-200	\$0 (Tier 2) NDS, QL (56 tabs / 28 days)
XCOPRI TAB 50-200MG	\$0 (Tier 2) NDS, QL (56 tabs / 28 days)
XCOPRI TAB 50MG	\$0 (Tier 2) NDS, QL (90 tabs / 30 days)
XCOPRI TAB 100MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
XCOPRI TAB 150MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
XCOPRI TAB 200MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>zonisamide cap 25 mg</i>	\$0 (Tier 1)
<i>zonisamide cap 50 mg</i>	\$0 (Tier 1)
<i>zonisamide cap 100 mg</i>	\$0 (Tier 1)

ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	\$0 (Tier 1)
<i>donepezil hydrochloride tab 5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>donepezil hydrochloride tab 10 mg</i>	\$0 (Tier 1)
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	\$0 (Tier 1)
<i>galantamine hydrobromide tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 8 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>galantamine hydrobromide tab 12 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>memantine hcl cap er 24hr 7 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 14 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 21 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl cap er 24hr 28 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl oral solution 2 mg/ml</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 5 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 10 mg</i>	\$0 (Tier 1) PA; PA if < 30 yrs
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	\$0 (Tier 2) PA; PA if < 30 yrs
<i>NAMZARIC CAP</i>	\$0 (Tier 2)
<i>NAMZARIC CAP 7-10MG</i>	\$0 (Tier 2)
<i>NAMZARIC CAP 14-10MG</i>	\$0 (Tier 2)
<i>NAMZARIC CAP 21-10MG</i>	\$0 (Tier 2)
<i>NAMZARIC CAP 28-10MG</i>	\$0 (Tier 2)
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	\$0 (Tier 1) QL (90 caps / 30 days)

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

ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>desipramine hcl tab 25 mg</i>	\$0 (Tier 2)	
<i>desipramine hcl tab 50 mg</i>	\$0 (Tier 2)	
<i>desipramine hcl tab 75 mg</i>	\$0 (Tier 2)	
<i>desipramine hcl tab 100 mg</i>	\$0 (Tier 2)	
<i>desipramine hcl tab 150 mg</i>	\$0 (Tier 2)	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	\$0 (Tier 1)	QL (30 tabs / 30 days), PA
<i>doxepin hcl cap 10 mg</i>	\$0 (Tier 2)	
<i>doxepin hcl cap 25 mg</i>	\$0 (Tier 2)	
<i>doxepin hcl cap 50 mg</i>	\$0 (Tier 2)	
<i>doxepin hcl cap 75 mg</i>	\$0 (Tier 2)	
<i>doxepin hcl cap 100 mg</i>	\$0 (Tier 2)	
<i>doxepin hcl cap 150 mg</i>	\$0 (Tier 2)	
<i>doxepin hcl conc 10 mg/ml</i>	\$0 (Tier 2)	
DRIZALMA CAP 20MG DR	\$0 (Tier 2)	QL (60 caps / 30 days), PA
DRIZALMA CAP 30MG DR	\$0 (Tier 2)	QL (60 caps / 30 days), PA
DRIZALMA CAP 40MG DR	\$0 (Tier 2)	QL (90 caps / 30 days), PA
DRIZALMA CAP 60MG DR	\$0 (Tier 2)	QL (60 caps / 30 days), PA
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	\$0 (Tier 1)	QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	\$0 (Tier 2)	NDS, QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	\$0 (Tier 2)	NDS, QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	\$0 (Tier 2)	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	\$0 (Tier 1)	

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>nortriptyline hcl cap 50 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl cap 75 mg</i>	\$0 (Tier 2)
<i>nortriptyline hcl soln 10 mg/5ml</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 10 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 20 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 30 mg</i>	\$0 (Tier 2)
<i>paroxetine hcl tab 40 mg</i>	\$0 (Tier 2)
PAXIL SUS 10MG/5ML	\$0 (Tier 2) QL (900 mL / 30 days)
<i>phenelzine sulfate tab 15 mg</i>	\$0 (Tier 1)
<i>protriptyline hcl tab 5 mg</i>	\$0 (Tier 2)
<i>protriptyline hcl tab 10 mg</i>	\$0 (Tier 2)
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	\$0 (Tier 1)
<i>sertraline hcl tab 25 mg</i>	\$0 (Tier 1)
<i>sertraline hcl tab 50 mg</i>	\$0 (Tier 1)
<i>sertraline hcl tab 100 mg</i>	\$0 (Tier 1)
<i>tranylcypromine sulfate tab 10 mg</i>	\$0 (Tier 1)
<i>trazodone hcl tab 50 mg</i>	\$0 (Tier 1)
<i>trazodone hcl tab 100 mg</i>	\$0 (Tier 1)
<i>trazodone hcl tab 150 mg</i>	\$0 (Tier 1)
<i>trimipramine maleate cap 25 mg</i>	\$0 (Tier 2) QL (240 caps / 30 days)
<i>trimipramine maleate cap 50 mg</i>	\$0 (Tier 2) QL (120 caps / 30 days)
<i>trimipramine maleate cap 100 mg</i>	\$0 (Tier 2) QL (60 caps / 30 days)
TRINTELLIX TAB 5MG	\$0 (Tier 2) QL (120 tabs / 30 days)
TRINTELLIX TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
TRINTELLIX TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	\$0 (Tier 1)
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	\$0 (Tier 1)
VIIBRYD KIT STARTER	\$0 (Tier 2)
VIIBRYD TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
VIIBRYD TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
VIIBRYD TAB 40MG	\$0 (Tier 2) QL (30 tabs / 30 days)

ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE

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

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>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	\$0 (Tier 1)	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	\$0 (Tier 1)	
<i>entacapone tab 200 mg</i>	\$0 (Tier 1)	
NEUPRO DIS 1MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 2MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 3MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 4MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 6MG/24HR	\$0 (Tier 2)	
NEUPRO DIS 8MG/24HR	\$0 (Tier 2)	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 1 mg</i>	\$0 (Tier 1)	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	\$0 (Tier 1)	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	\$0 (Tier 1)	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 0.5 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 0.25 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 1 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 2 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 3 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 4 mg</i>	\$0 (Tier 1)	
<i>ropinirole hydrochloride tab 5 mg</i>	\$0 (Tier 1)	
<i>selegiline hcl cap 5 mg</i>	\$0 (Tier 1)	
<i>selegiline hcl tab 5 mg</i>	\$0 (Tier 1)	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 2 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
<i>trihexyphenidyl hcl tab 5 mg</i>	\$0 (Tier 2)	PA; PA if 70 years and older
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
ABILIFY MAIN INJ 300MG	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
ABILIFY MAIN INJ 400MG	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
<i>aripiprazole oral solution 1 mg/ml</i>	\$0 (Tier 2)	NDS, QL (900 mL / 30 days)
<i>aripiprazole orally disintegrating tab 10 mg</i>	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
<i>aripiprazole orally disintegrating tab 15 mg</i>	\$0 (Tier 2)	NDS, QL (60 tabs / 30 days)
<i>aripiprazole tab 2 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>aripiprazole tab 5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>aripiprazole tab 10 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>aripiprazole tab 15 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>aripiprazole tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>aripiprazole tab 30 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
ARISTADA INJ 662MG/2	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
ARISTADA INJ 882MG/3	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
ARISTADA INJ 1064MG	\$0 (Tier 2)	NDS, QL (1 injection / 56 days)
ARISTADA INJ INITIO	\$0 (Tier 2)	NDS
CAPLYTA CAP 42MG	\$0 (Tier 2)	QL (30 caps / 30 days)
<i>chlorpromazine hcl inj 25 mg/ml</i>	\$0 (Tier 1)	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	\$0 (Tier 1)	
<i>chlorpromazine hcl tab 10 mg</i>	\$0 (Tier 1)	
<i>chlorpromazine hcl tab 25 mg</i>	\$0 (Tier 1)	
<i>chlorpromazine hcl tab 50 mg</i>	\$0 (Tier 1)	
<i>chlorpromazine hcl tab 100 mg</i>	\$0 (Tier 1)	
<i>chlorpromazine hcl tab 200 mg</i>	\$0 (Tier 1)	
<i>clozapine orally disintegrating tab 12.5 mg</i>	\$0 (Tier 1)	PA
<i>clozapine orally disintegrating tab 25 mg</i>	\$0 (Tier 1)	PA
<i>clozapine orally disintegrating tab 100 mg</i>	\$0 (Tier 1)	QL (270 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 150 mg</i>	\$0 (Tier 1)	QL (180 tabs / 30 days), PA
<i>clozapine orally disintegrating tab 200 mg</i>	\$0 (Tier 1)	QL (135 tabs / 30 days), PA
<i>clozapine tab 25 mg</i>	\$0 (Tier 1)	
<i>clozapine tab 50 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>clozapine tab 100 mg</i>	\$0 (Tier 1) QL (270 tabs / 30 days)
<i>clozapine tab 200 mg</i>	\$0 (Tier 1) QL (135 tabs / 30 days)
FANAPT PAK	\$0 (Tier 2) PA
FANAPT TAB 1MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 2MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 4MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 6MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 8MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
FANAPT TAB 12MG	\$0 (Tier 2) QL (60 tabs / 30 days), PA
<i>fluphenazine decanoate inj 25 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl inj 2.5 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl oral conc 5 mg/ml</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 1 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 2.5 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>fluphenazine hcl tab 10 mg</i>	\$0 (Tier 1)
GEODON INJ 20MG	\$0 (Tier 2) QL (6 mL / 3 days)
<i>haloperidol decanoate im soln 50 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol decanoate im soln 100 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol lactate inj 5 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol lactate oral conc 2 mg/ml</i>	\$0 (Tier 1)
<i>haloperidol tab 0.5 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 1 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 2 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 5 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 10 mg</i>	\$0 (Tier 1)
<i>haloperidol tab 20 mg</i>	\$0 (Tier 1)
INVEGA SUST INJ 39/0.25	\$0 (Tier 2) QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	\$0 (Tier 2) NDS, QL (1 injection / 28 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
INVEGA SUST INJ 117/0.75	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 156MG/ML	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
INVEGA SUST INJ 234/1.5	\$0 (Tier 2)	NDS, QL (1 injection / 28 days)
INVEGA TRINZ INJ 273MG	\$0 (Tier 2)	NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 410MG	\$0 (Tier 2)	NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 546MG	\$0 (Tier 2)	NDS, QL (1 injection / 90 days)
INVEGA TRINZ INJ 819MG	\$0 (Tier 2)	NDS, QL (1 injection / 90 days)
LATUDA TAB 20MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
LATUDA TAB 40MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
LATUDA TAB 60MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
LATUDA TAB 80MG	\$0 (Tier 2)	QL (60 tabs / 30 days)
LATUDA TAB 120MG	\$0 (Tier 2)	QL (30 tabs / 30 days)
<i>loxapine succinate cap 5 mg</i>	\$0 (Tier 1)	
<i>loxapine succinate cap 10 mg</i>	\$0 (Tier 1)	
<i>loxapine succinate cap 25 mg</i>	\$0 (Tier 1)	
<i>loxapine succinate cap 50 mg</i>	\$0 (Tier 1)	
<i>molindone hcl tab 5 mg</i>	\$0 (Tier 1)	
<i>molindone hcl tab 10 mg</i>	\$0 (Tier 1)	
<i>molindone hcl tab 25 mg</i>	\$0 (Tier 1)	
NUPLAZID CAP 34MG	\$0 (Tier 2)	NDS, QL (30 caps / 30 days), LA, PA
NUPLAZID TAB 10MG	\$0 (Tier 2)	NDS, QL (30 tabs / 30 days), LA, PA
<i>olanzapine for im inj 10 mg</i>	\$0 (Tier 1)	QL (3 vials / 1 day)
<i>olanzapine orally disintegrating tab 5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 10 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>olanzapine orally disintegrating tab 15 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olanzapine orally disintegrating tab 20 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olanzapine tab 2.5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>olanzapine tab 5 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>olanzapine tab 7.5 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)
<i>olanzapine tab 10 mg</i>	\$0 (Tier 1)	QL (60 tabs / 30 days)
<i>olanzapine tab 15 mg</i>	\$0 (Tier 1)	QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>olanzapine tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 1.5 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 3 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>paliperidone tab er 24hr 6 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>paliperidone tab er 24hr 9 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>perphenazine tab 2 mg</i>	\$0 (Tier 1)
<i>perphenazine tab 4 mg</i>	\$0 (Tier 1)
<i>perphenazine tab 8 mg</i>	\$0 (Tier 1)
<i>perphenazine tab 16 mg</i>	\$0 (Tier 1)
PERSERIS INJ 90MG	\$0 (Tier 2) NDS, QL (1 injection / 30 days)
PERSERIS INJ 120MG	\$0 (Tier 2) NDS, QL (1 injection / 30 days)
<i>pimozide tab 1 mg</i>	\$0 (Tier 1)
<i>pimozide tab 2 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 25 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 50 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 100 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 200 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 300 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab 400 mg</i>	\$0 (Tier 1)
<i>quetiapine fumarate tab er 24hr 50 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 150 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 200 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 300 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
<i>quetiapine fumarate tab er 24hr 400 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days), PA
REXULTI TAB 0.5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
REXULTI TAB 0.25MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
REXULTI TAB 1MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
REXULTI TAB 2MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days)
REXULTI TAB 3MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
REXULTI TAB 4MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days)
RISPERDAL INJ 12.5MG	\$0 (Tier 2) QL (2 injections / 28 days)
RISPERDAL INJ 25MG	\$0 (Tier 2) QL (2 injections / 28 days)
RISPERDAL INJ 37.5MG	\$0 (Tier 2) NDS, QL (2 injections / 28 days)
RISPERDAL INJ 50MG	\$0 (Tier 2) NDS, QL (2 injections / 28 days)
<i>risperidone orally disintegrating tab 0.5 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 0.25 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>risperidone orally disintegrating tab 1 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 2 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 3 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone orally disintegrating tab 4 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>risperidone soln 1 mg/ml</i>	\$0 (Tier 1) QL (240 mL / 30 days)
<i>risperidone tab 0.5 mg</i>	\$0 (Tier 1)
<i>risperidone tab 0.25 mg</i>	\$0 (Tier 1)
<i>risperidone tab 1 mg</i>	\$0 (Tier 1)
<i>risperidone tab 2 mg</i>	\$0 (Tier 1)
<i>risperidone tab 3 mg</i>	\$0 (Tier 1)
<i>risperidone tab 4 mg</i>	\$0 (Tier 1)
SAPHRIS SUB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SAPHRIS SUB 5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SAPHRIS SUB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SECUADO DIS 3.8MG	\$0 (Tier 2) QL (30 patches / 30 days)
SECUADO DIS 5.7MG	\$0 (Tier 2) QL (30 patches / 30 days)
SECUADO DIS 7.6MG	\$0 (Tier 2) QL (30 patches / 30 days)
<i>thioridazine hcl tab 10 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 25 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 50 mg</i>	\$0 (Tier 1)
<i>thioridazine hcl tab 100 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 1 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 2 mg</i>	\$0 (Tier 1)
<i>thiothixene cap 5 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>thiothixene cap 10 mg</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	\$0 (Tier 1)
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	\$0 (Tier 1)
VERSACLOZ SUS 50MG/ML	\$0 (Tier 2) NDS, QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5-3MG	\$0 (Tier 2) PA
VRAYLAR CAP 1.5MG	\$0 (Tier 2) NDS, QL (60 caps / 30 days), PA
VRAYLAR CAP 3MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 4.5MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
VRAYLAR CAP 6MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
<i>ziprasidone hcl cap 20 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 40 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 60 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone hcl cap 80 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	\$0 (Tier 1) QL (6 injections / 3 days)
ZYPREXA RELP INJ 210MG	\$0 (Tier 2) QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	\$0 (Tier 2) NDS, QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	\$0 (Tier 2) NDS, QL (1 vial / 28 days), PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	\$0 (Tier 1) QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	\$0 (Tier 1) QL (120 caps / 30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	\$0 (Tier 1) QL (60 caps / 30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	\$0 (Tier 1) QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>methylphenidate hcl soln 5 mg/5ml</i>	\$0 (Tier 1) QL (1800 mL / 30 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	\$0 (Tier 1) QL (900 mL / 30 days)
<i>methylphenidate hcl tab 5 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>methylphenidate hcl tab 10 mg</i>	\$0 (Tier 1) QL (180 tabs / 30 days)
<i>methylphenidate hcl tab 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 10 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>methylphenidate hcl tab er 20 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)

HYPNOTICS - DRUGS TO TREAT INSOMNIA

BELSOMRA TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BELSOMRA TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BELSOMRA TAB 15MG	\$0 (Tier 2) QL (30 tabs / 30 days)
BELSOMRA TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>eszopiclone tab 1 mg</i>	\$0 (Tier 2) QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>eszopiclone tab 2 mg</i>	\$0 (Tier 2) QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>eszopiclone tab 3 mg</i>	\$0 (Tier 2) QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
HETLIOZ CAP 20MG	\$0 (Tier 2) NDS, LA, PA
<i>temazepam cap 7.5 mg</i>	\$0 (Tier 1) QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam cap 15 mg</i>	\$0 (Tier 1) QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>zaleplon cap 5 mg</i>	\$0 (Tier 2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zaleplon cap 10 mg</i>	\$0 (Tier 2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab 5 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate tab 10 mg</i>	\$0 (Tier 2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES

<i>AIMOVIG INJ 70MG/ML</i>	\$0 (Tier 2)	QL (1 pen / 30 days), PA
<i>AIMOVIG INJ 140MG/ML</i>	\$0 (Tier 2)	QL (1 pen / 30 days), PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	\$0 (Tier 2)	NDS
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	\$0 (Tier 2)	NDS, QL (8 mL / 30 days), PA
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>EMGALITY INJ 120MG/ML</i>	\$0 (Tier 2)	QL (2 pens / 30 days), PA
<i>EMGALITY INJ 120MG/ML</i>	\$0 (Tier 2)	QL (2 syringes / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	\$0 (Tier 1)	
<i>naratriptan hcl tab 1 mg (base equiv)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	\$0 (Tier 1)	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	\$0 (Tier 1)	QL (18 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	\$0 (Tier 1) QL (18 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	\$0 (Tier 1) QL (18 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	\$0 (Tier 1) QL (24 inhalers / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	\$0 (Tier 1) QL (12 inhalers / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	\$0 (Tier 1) QL (12 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	\$0 (Tier 1) QL (18 injections / 30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	\$0 (Tier 1) QL (12 injections / 30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	\$0 (Tier 1) QL (18 injections / 30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	\$0 (Tier 1) QL (12 injections / 30 days)
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	\$0 (Tier 1) QL (12 injections / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	\$0 (Tier 1) QL (12 tabs / 30 days)

MISCELLANEOUS

AUSTEDO TAB 6MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
AUSTEDO TAB 9MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), PA
AUSTEDO TAB 12MG	\$0 (Tier 2) NDS, QL (120 tabs / 30 days), PA
INGREZZA CAP 40-80MG	\$0 (Tier 2) NDS, QL (28 caps / 28 days), PA
INGREZZA CAP 40MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA
INGREZZA CAP 80MG	\$0 (Tier 2) NDS, QL (30 caps / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>lithium carbonate cap 150 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate cap 300 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate cap 600 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate tab 300 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate tab er 300 mg</i>	\$0 (Tier 1)	
<i>lithium carbonate tab er 450 mg</i>	\$0 (Tier 1)	
LITHIUM SOL 8MEQ/5ML	\$0 (Tier 2)	
LYRICA CR TAB 82.5MG	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
LYRICA CR TAB 165MG	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
LYRICA CR TAB 330MG	\$0 (Tier 2)	QL (60 tabs / 30 days), PA
NUEDEXTA CAP 20-10MG	\$0 (Tier 2)	QL (60 caps / 30 days), PA
<i>pyridostigmine bromide tab 60 mg</i>	\$0 (Tier 1)	
<i>riluzole tab 50 mg</i>	\$0 (Tier 1)	
<i>tetrabenazine tab 12.5 mg</i>	\$0 (Tier 2)	NDS, QL (240 tabs / 30 days), PA
<i>tetrabenazine tab 25 mg</i>	\$0 (Tier 2)	NDS, QL (120 tabs / 30 days), PA

MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS

BETASERON INJ 0.3MG	\$0 (Tier 2)	NDS, QL (14 syringes / 28 days), PA
<i>dalfampridine tab er 12hr 10 mg</i>	\$0 (Tier 2)	NDS, PA
GILENYA CAP 0.5MG	\$0 (Tier 2)	NDS, QL (28 caps / 28 days), PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	\$0 (Tier 2)	NDS, QL (30 syringes / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	\$0 (Tier 2)	NDS, QL (12 syringes / 28 days), PA
<i>glatopa inj 20mg/ml</i>	\$0 (Tier 2)	NDS, QL (30 syringes / 30 days), PA
<i>glatopa inj 40mg/ml</i>	\$0 (Tier 2)	NDS, QL (12 syringes / 28 days), PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

<i>baclofen tab 10 mg</i>	\$0 (Tier 1)	
<i>baclofen tab 20 mg</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>carisoprodol tab 350 mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 5 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>cyclobenzaprine hcl tab 10 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>dantrolene sodium cap 25 mg</i>	\$0 (Tier 1)
<i>dantrolene sodium cap 50 mg</i>	\$0 (Tier 1)
<i>dantrolene sodium cap 100 mg</i>	\$0 (Tier 1)
<i>methocarbamol tab 500 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>methocarbamol tab 750 mg</i>	\$0 (Tier 2) PA; PA if 70 years and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	\$0 (Tier 1)
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	\$0 (Tier 1)
<i>vanadom tab 350mg</i>	\$0 (Tier 2) QL (120 tabs / 30 days), PA; PA if 70 years and older

NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS

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

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	\$0 (Tier 1)
ADIPEX-P CAP 37.5MG	\$0 (Tier 3) DP
ADIPEX-P TAB 37.5MG	\$0 (Tier 3) DP
<i>benzphetamine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	\$0 (Tier 1) QL (90 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	\$0 (Tier 1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	\$0 (Tier 1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	\$0 (Tier 1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	\$0 (Tier 1)	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	\$0 (Tier 1)	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	\$0 (Tier 1)	
CHANTIX PAK 0.5& 1MG	\$0 (Tier 2)	PA
CHANTIX PAK 1MG	\$0 (Tier 2)	PA
CHANTIX TAB 0.5MG	\$0 (Tier 2)	PA
CHANTIX TAB 1MG	\$0 (Tier 2)	PA
<i>diethylpropion hcl tab 25 mg</i>	\$0 (Tier 3)	DP
<i>diethylpropion hcl tab er 24hr 75 mg</i>	\$0 (Tier 3)	DP
<i>disulfiram tab 250 mg</i>	\$0 (Tier 1)	
<i>disulfiram tab 500 mg</i>	\$0 (Tier 1)	
<i>gnp nicotine gum 2mg mint</i>	\$0 (Tier 3)	DP
<i>gnp nicotine gum 2mg orig</i>	\$0 (Tier 3)	DP
<i>gnp nicotine gum 4mg mint</i>	\$0 (Tier 3)	DP
<i>gnp nicotine loz 2mg mint</i>	\$0 (Tier 3)	DP
<i>gnp nicotine loz 4mg mint</i>	\$0 (Tier 3)	DP
<i>gnp nicotine loz mini 2mg</i>	\$0 (Tier 3)	DP
<i>hm nicotine dis 14mg/24h</i>	\$0 (Tier 3)	DP
<i>hm nicotine dis 21mg/24h</i>	\$0 (Tier 3)	DP
<i>hm nicotine gum 2mg mint</i>	\$0 (Tier 3)	DP
<i>hm nicotine gum 4mg mint</i>	\$0 (Tier 3)	DP
<i>hm nicotine loz 2mg mint</i>	\$0 (Tier 3)	DP
<i>hm nicotine loz 4mg mint</i>	\$0 (Tier 3)	DP
<i>naloxone hcl inj 0.4 mg/ml</i>	\$0 (Tier 1)	
<i>naloxone hcl inj 4 mg/10ml</i>	\$0 (Tier 1)	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	\$0 (Tier 1)	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	\$0 (Tier 1)	
<i>naltrexone hcl tab 50 mg</i>	\$0 (Tier 1)	

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

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

ANADROL-50 TAB 50MG	\$0 (Tier 2) NDS, PA
ANDRODERM DIS 2MG/24HR	\$0 (Tier 2) QL (30 patches / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ANDRODERM DIS 4MG/24HR	\$0 (Tier 2) QL (30 patches / 30 days), PA
<i>oxandrolone tab 2.5 mg</i>	\$0 (Tier 1) PA
<i>oxandrolone tab 10 mg</i>	\$0 (Tier 1) PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	\$0 (Tier 1) PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	\$0 (Tier 1) QL (300 grams / 30 days), PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	\$0 (Tier 1) QL (300 grams / 30 days), PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	\$0 (Tier 1) QL (300 grams / 30 days), PA

ANTIDIABETICS, INJECTABLE - DRUGS TO TREAT DIABETES

BASAGLAR INJ 100UNIT	\$0 (Tier 2)
BD ALCOHOL SWABS	\$0 (Tier 2)
BD ULTRAFINE INSULIN SYRINGE	\$0 (Tier 2)
BD ULTRAFINE/NANO PEN NEEDLES	\$0 (Tier 2)
BYDUREON BC INJ 2/0.85ML	\$0 (Tier 2) QL (4 pens / 28 days)
BYDUREON PEN INJ 2MG	\$0 (Tier 2) QL (4 pens / 28 days)
BYETTA INJ 5MCG	\$0 (Tier 2) QL (1 pen / 30 days)
BYETTA INJ 10MCG	\$0 (Tier 2) QL (1 pen / 30 days)
FIASP FLEX INJ TOUCH	\$0 (Tier 2)
FIASP INJ 100/ML	\$0 (Tier 2)
FIASP PENFIL INJ U-100	\$0 (Tier 2)
GAUZE PADS 2" X 2"	\$0 (Tier 2)
HUMULIN R INJ U-500	\$0 (Tier 2) NDS
HUMULIN R INJ U-500	\$0 (Tier 2) NDS, B/D
INSULIN PEN NEEDLE	\$0 (Tier 2)
INSULIN SAFETY NEEDLES	\$0 (Tier 2)
INSULIN SYRINGE	\$0 (Tier 2)
LEVEMIR INJ	\$0 (Tier 2)
LEVEMIR INJ FLEXTouc	\$0 (Tier 2)
NOVOLIN INJ 70/30	\$0 (Tier 2) (brand RELION not covered)
NOVOLIN INJ 70/30 FP	\$0 (Tier 2) (brand RELION not covered)

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

ANTIDIABETICS, ORAL - DRUGS TO TREAT DIABETES

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

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
JARDIANCE TAB 10MG	\$0 (Tier 2) QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	\$0 (Tier 2) QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
JENTADUETO TAB XR	\$0 (Tier 2) QL (30 tabs / 30 days)
JENTADUETO TAB XR	\$0 (Tier 2) QL (60 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	\$0 (Tier 1) QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	\$0 (Tier 1) QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl tab er 24hr 750 mg</i>	\$0 (Tier 1) QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>nateglinide tab 60 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>nateglinide tab 120 mg</i>	\$0 (Tier 1) QL (90 tabs / 30 days)
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>repaglinide tab 1 mg</i>	\$0 (Tier 1) QL (120 tabs / 30 days)
<i>repaglinide tab 2 mg</i>	\$0 (Tier 1) QL (240 tabs / 30 days)
RYBELSUS TAB 3MG	\$0 (Tier 2) QL (30 tabs / 30 days)
RYBELSUS TAB 7MG	\$0 (Tier 2) QL (30 tabs / 30 days)
RYBELSUS TAB 14MG	\$0 (Tier 2) QL (30 tabs / 30 days)
SYNJARDY TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY TAB 5-500MG	\$0 (Tier 2) QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0 (Tier 2) QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	\$0 (Tier 2) QL (30 tabs / 30 days)
TRIJARDY XR TAB	\$0 (Tier 2) QL (30 tabs / 30 days)
TRIJARDY XR TAB	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 2.5-1000	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0 (Tier 2) QL (60 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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XIGDUO XR TAB 5-1000MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0 (Tier 2) QL (30 tabs / 30 days)

BISPHOSPHONATES - DRUGS TO TREAT BONE LOSS

<i>alendronate sodium oral soln 70 mg/75ml</i>	\$0 (Tier 1)
<i>alendronate sodium tab 5 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 10 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 35 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 40 mg</i>	\$0 (Tier 1)
<i>alendronate sodium tab 70 mg</i>	\$0 (Tier 1)
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium for inj 30 mg</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium for inj 90 mg</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium iv soln 3 mg/ml</i>	\$0 (Tier 1) B/D
<i>pamidronate disodium iv soln 9 mg/ml</i>	\$0 (Tier 1) B/D
PAMIDRONATE INJ 6MG/ML	\$0 (Tier 2) B/D
<i>risedronate sodium tab 5 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab 35 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab 150 mg</i>	\$0 (Tier 1)
<i>risedronate sodium tab delayed release 35 mg</i>	\$0 (Tier 1)
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	\$0 (Tier 1) B/D
<i>zoledronic acid iv soln 4 mg/100ml</i>	\$0 (Tier 1) B/D
<i>zoledronic acid iv soln 5 mg/100ml</i>	\$0 (Tier 1) B/D

CHELATING AGENTS

CHEMET CAP 100MG	\$0 (Tier 2)
<i>clovique cap 250mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox granules packet 90 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox granules packet 180 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox granules packet 360 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox tab 90 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox tab 180 mg</i>	\$0 (Tier 2) NDS, PA
<i>deferasirox tab 360 mg</i>	\$0 (Tier 2) NDS, PA
JADENU SPRKL GRA 90MG	\$0 (Tier 2) NDS, LA, PA
JADENU SPRKL GRA 180MG	\$0 (Tier 2) NDS, LA, PA
JADENU SPRKL GRA 360MG	\$0 (Tier 2) NDS, LA, PA
JADENU TAB 180MG	\$0 (Tier 2) NDS, LA, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LOKELMA PAK 5GM	\$0 (Tier 2)
LOKELMA PAK 10GM	\$0 (Tier 2)
<i>penicillamine tab 250 mg</i>	\$0 (Tier 2) NDS
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	\$0 (Tier 1)
<i>sodium polystyrene sulfonate powder</i>	\$0 (Tier 1)
<i>trientine hcl cap 250 mg</i>	\$0 (Tier 2) NDS, PA
VELTASSA POW 8.4GM	\$0 (Tier 2) LA, PA
VELTASSA POW 16.8GM	\$0 (Tier 2) LA, PA
VELTASSA POW 25.2GM	\$0 (Tier 2) LA, PA
CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL	
<i>alyacen tab 1/35</i>	\$0 (Tier 1)
<i>amethia lo tab</i>	\$0 (Tier 1)
<i>amethia tab</i>	\$0 (Tier 1)
<i>apri tab</i>	\$0 (Tier 1)
<i>aranelle tab</i>	\$0 (Tier 1)
<i>ashlyna tab</i>	\$0 (Tier 1)
<i>aubra tab 0.1-0.02</i>	\$0 (Tier 1)
<i>aviane tab</i>	\$0 (Tier 1)
<i>balziva tab</i>	\$0 (Tier 1)
<i>bekyree tab</i>	\$0 (Tier 1)
<i>blisovi 24 tab fe 1/20</i>	\$0 (Tier 1)
<i>blisovi fe tab 1.5/30</i>	\$0 (Tier 1)
<i>briellyn tab</i>	\$0 (Tier 1)
<i>camila tab 0.35mg</i>	\$0 (Tier 1)
<i>camrese lo tab</i>	\$0 (Tier 1)
<i>cryselle-28 tab 28 tabs</i>	\$0 (Tier 1)
<i>cyclafem tab 1/35</i>	\$0 (Tier 1)
<i>cyclafem tab 7/7/7</i>	\$0 (Tier 1)
<i>dasetta tab 1/35</i>	\$0 (Tier 1)
<i>dasetta tab 7/7/7</i>	\$0 (Tier 1)
<i>deblitane tab 0.35mg</i>	\$0 (Tier 1)
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	\$0 (Tier 1)
<i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i>	\$0 (Tier 1)
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	\$0 (Tier 1)
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	\$0 (Tier 1)
<i>ELLA TAB 30MG</i>	\$0 (Tier 2)
<i>eluryng mis</i>	\$0 (Tier 1)
<i>emoquette tab</i>	\$0 (Tier 1)
<i>enpresse-28 tab</i>	\$0 (Tier 1)
<i>enskyce tab</i>	\$0 (Tier 1)
<i>errin tab 0.35mg</i>	\$0 (Tier 1)
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0 (Tier 1)
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	\$0 (Tier 1)
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	\$0 (Tier 1)
<i>falmina tab</i>	\$0 (Tier 1)
<i>fayosim tab</i>	\$0 (Tier 1)
<i>femynor tab 0.25-35</i>	\$0 (Tier 1)
<i>hailey 24 tab fe</i>	\$0 (Tier 1)
<i>heather tab 0.35mg</i>	\$0 (Tier 1)
<i>incassia tab 0.35mg</i>	\$0 (Tier 1)
<i>introvale tab</i>	\$0 (Tier 1)
<i>isibloom tab</i>	\$0 (Tier 1)
<i>jasmiel tab 3-0.02mg</i>	\$0 (Tier 1)
<i>jolivette tab 0.35mg</i>	\$0 (Tier 1)
<i>juleber tab</i>	\$0 (Tier 1)
<i>junel 1.5/30 tab</i>	\$0 (Tier 1)
<i>junel 1/20 tab</i>	\$0 (Tier 1)
<i>junel fe 24 tab 1/20</i>	\$0 (Tier 1)
<i>junel fe tab 1.5/30</i>	\$0 (Tier 1)
<i>junel fe tab 1/20</i>	\$0 (Tier 1)
<i>kaitlib fe chw</i>	\$0 (Tier 1)
<i>kariva tab 28 day</i>	\$0 (Tier 1)
<i>kelnor 1/50 tab</i>	\$0 (Tier 1)
<i>kelnor tab 1/35</i>	\$0 (Tier 1)
<i>kurvelo tab 0.15/30</i>	\$0 (Tier 1)
<i>larin fe tab 1.5/30</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>larin fe tab 1/20</i>	\$0 (Tier 1)
<i>larin tab 1.5/30</i>	\$0 (Tier 1)
<i>larin tab 1/20</i>	\$0 (Tier 1)
<i>layolis fe chw</i>	\$0 (Tier 1)
<i>lessina tab</i>	\$0 (Tier 1)
<i>levonest tab</i>	\$0 (Tier 1)
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg</i>	\$0 (Tier 1)
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 1)
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	\$0 (Tier 1)
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0 (Tier 1)
<i>levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg</i>	\$0 (Tier 1)
<i>levora-28 tab 0.15/30</i>	\$0 (Tier 1)
<i>loryna tab 3-0.02mg</i>	\$0 (Tier 1)
<i>lutra tab</i>	\$0 (Tier 1)
<i>lyza tab 0.35mg</i>	\$0 (Tier 1)
<i>marlissa tab 0.15/30</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	\$0 (Tier 1)
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	\$0 (Tier 1)
<i>melodetta chw 24 fe</i>	\$0 (Tier 1)
<i>mibelas 24 chw fe</i>	\$0 (Tier 1)
<i>mili tab 0.25/35</i>	\$0 (Tier 1)
<i>necon tab 0.5/35</i>	\$0 (Tier 1)
<i>nikki tab 3-0.02mg</i>	\$0 (Tier 1)
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	\$0 (Tier 1)
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	\$0 (Tier 1)
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	\$0 (Tier 1)	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	\$0 (Tier 1)	
<i>norethindrone tab 0.35 mg</i>	\$0 (Tier 1)	
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	\$0 (Tier 1)	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	\$0 (Tier 1)	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	\$0 (Tier 1)	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	\$0 (Tier 1)	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	\$0 (Tier 1)	
<i>nortrel tab 0.5/35</i>	\$0 (Tier 1)	
<i>nortrel tab 1/35</i>	\$0 (Tier 1)	
<i>nortrel tab 7/7/7</i>	\$0 (Tier 1)	
<i>orsythia tab</i>	\$0 (Tier 1)	
<i>philith tab 0.4-35</i>	\$0 (Tier 1)	
<i>pimtrea tab</i>	\$0 (Tier 1)	
<i>pirmella tab 1/35</i>	\$0 (Tier 1)	
<i>portia-28 tab</i>	\$0 (Tier 1)	
<i>previfem tab</i>	\$0 (Tier 1)	
<i>reclipsen tab</i>	\$0 (Tier 1)	
<i>rivelsa tab</i>	\$0 (Tier 1)	
<i>sharobel tab 0.35mg</i>	\$0 (Tier 1)	
<i>sprintec 28 tab 28 day</i>	\$0 (Tier 1)	
<i>tarina 24 fe tab</i>	\$0 (Tier 1)	
<i>tarina fe tab 1/20</i>	\$0 (Tier 1)	
<i>tri-estaryll tab</i>	\$0 (Tier 1)	
<i>tri-legest tab fe</i>	\$0 (Tier 1)	
<i>tri-lo- tab sprintec</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>tri-mili tab</i>	\$0 (Tier 1)
<i>tri-previfem tab</i>	\$0 (Tier 1)
<i>tri-sprintec tab</i>	\$0 (Tier 1)
<i>tri-vylibra tab</i>	\$0 (Tier 1)
<i>tri-vylibra tab lo</i>	\$0 (Tier 1)
<i>trivora-28 tab</i>	\$0 (Tier 1)
<i>tulana tab 0.35mg</i>	\$0 (Tier 1)
<i>tydemy tab</i>	\$0 (Tier 1)
<i>velivet pak</i>	\$0 (Tier 1)
<i>vienva tab 0.1-20</i>	\$0 (Tier 1)
<i>viorele tab</i>	\$0 (Tier 1)
<i>vyfemla tab 0.4-35</i>	\$0 (Tier 1)
<i>vylibra tab 0.25-35</i>	\$0 (Tier 1)
<i>wymzya fe chw 0.4mg-35</i>	\$0 (Tier 1)
<i>zarah tab 3-0.03mg</i>	\$0 (Tier 1)
<i>zovia 1/35e tab</i>	\$0 (Tier 1)

ENDOMETRIOSIS

<i>danazol cap 50 mg</i>	\$0 (Tier 1)
<i>danazol cap 100 mg</i>	\$0 (Tier 1)
<i>danazol cap 200 mg</i>	\$0 (Tier 1)
SYNAREL SOL 2MG/ML	\$0 (Tier 2) NDS

ENZYME REPLACEMENTS - DRUGS TO TREAT ENZYME DEFICIENCIES

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>nitisinone cap 2 mg</i>	\$0 (Tier 2) NDS, PA
<i>nitisinone cap 5 mg</i>	\$0 (Tier 2) NDS, PA
<i>nitisinone cap 10 mg</i>	\$0 (Tier 2) NDS, PA
NITYR TAB 2MG	\$0 (Tier 2) NDS, LA, PA
NITYR TAB 5MG	\$0 (Tier 2) NDS, LA, PA
NITYR TAB 10MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 2MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 5MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 10MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN CAP 20MG	\$0 (Tier 2) NDS, LA, PA
ORFADIN SUS 4MG/ML	\$0 (Tier 2) NDS, LA, PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	\$0 (Tier 2) NDS, PA
<i>sodium phenylbutyrate tab 500 mg</i>	\$0 (Tier 2) NDS, PA

ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES

DELESTROGEN INJ 10MG/ML	\$0 (Tier 2)
<i>estradiol tab 0.5 mg</i>	\$0 (Tier 2)
<i>estradiol tab 1 mg</i>	\$0 (Tier 2)
<i>estradiol tab 2 mg</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.1 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.05 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.06 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.025 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.075 mg/24hr</i>	\$0 (Tier 2)
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	\$0 (Tier 2)
<i>estradiol vaginal cream 0.1 mg/gm</i>	\$0 (Tier 1)
<i>estradiol vaginal tab 10 mcg</i>	\$0 (Tier 1)
<i>estradiol valerate im in oil 20 mg/ml</i>	\$0 (Tier 1)
<i>estradiol valerate im in oil 40 mg/ml</i>	\$0 (Tier 1)
<i>fyavolv tab 0.5-2.5</i>	\$0 (Tier 2)
<i>jinteli tab 1mg-5mcg</i>	\$0 (Tier 2)
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	\$0 (Tier 2)
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	\$0 (Tier 2)

GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE

<i>cortisone acetate tab 25 mg</i>	\$0 (Tier 1)
DEXAMETHASON CON 1MG/ML	\$0 (Tier 2)
<i>dexamethasone elixir 0.5 mg/5ml</i>	\$0 (Tier 1)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	\$0 (Tier 1)	
<i>dexamethasone soln 0.5 mg/5ml</i>	\$0 (Tier 1)	
<i>dexamethasone tab 0.5 mg</i>	\$0 (Tier 1)	
<i>dexamethasone tab 0.75 mg</i>	\$0 (Tier 1)	
<i>dexamethasone tab 1 mg</i>	\$0 (Tier 1)	
<i>dexamethasone tab 1.5 mg</i>	\$0 (Tier 1)	
<i>dexamethasone tab 2 mg</i>	\$0 (Tier 1)	
<i>dexamethasone tab 4 mg</i>	\$0 (Tier 1)	
<i>dexamethasone tab 6 mg</i>	\$0 (Tier 1)	
<i>fludrocortisone acetate tab 0.1 mg</i>	\$0 (Tier 1)	
<i>hydrocortisone tab 5 mg</i>	\$0 (Tier 1)	
<i>hydrocortisone tab 10 mg</i>	\$0 (Tier 1)	
<i>hydrocortisone tab 20 mg</i>	\$0 (Tier 1)	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone tab 4 mg</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone tab 8 mg</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone tab 16 mg</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone tab 32 mg</i>	\$0 (Tier 1)	B/D
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	\$0 (Tier 1)	

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

GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR

<i>diazoxide susp 50 mg/ml</i>	\$0 (Tier 1)
GLUCAGEN INJ HYPOKIT	\$0 (Tier 2)
GLUCAGON KIT 1MG	\$0 (Tier 2)
GVOKE HYPO 2 INJ 1MG/.2ML	\$0 (Tier 2)
GVOKE HYPO 2 INJ .5/.1ML	\$0 (Tier 2)
GVOKE PFS INJ	\$0 (Tier 2)
PROGLYCEM SUS 50MG/ML	\$0 (Tier 2)

MISCELLANEOUS

<i>cabergoline tab 0.5 mg</i>	\$0 (Tier 1)
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	\$0 (Tier 1) B/D
CHARCOAL POW	\$0 (Tier 3) DP
CHEMSTRIP TES UGK	\$0 (Tier 3) DP
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (120 tabs / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (60 tabs / 30 days)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	\$0 (Tier 2) NDS, B/D, QL (120 tabs / 30 days)
D-XYLOSE POW	\$0 (Tier 3) DP
DIASCREEN 3 MIS	\$0 (Tier 3) DP
DIASCREEN 5 MIS	\$0 (Tier 3) DP
DIASCREEN 6 MIS	\$0 (Tier 3) DP
DIASCREEN 7 MIS	\$0 (Tier 3) DP
DIASCREEN 8 MIS	\$0 (Tier 3) DP
DIASCREEN 9 MIS	\$0 (Tier 3) DP
DIASCREEN 10 MIS	\$0 (Tier 3) DP
DIASCREEN MIS 1G	\$0 (Tier 3) DP
DIASCREEN MIS 2GK	\$0 (Tier 3) DP
DIASCREEN MIS 4OBL	\$0 (Tier 3) DP
DIASTIX TES STRIPS	\$0 (Tier 3) DP
FORTEO SOL 600/2.4	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.2MG	\$0 (Tier 2) PA
GENOTROPIN INJ 0.4MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.6MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 0.8MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.4MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.6MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1.8MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 1MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 2MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 5MG	\$0 (Tier 2) NDS, PA
GENOTROPIN INJ 12MG	\$0 (Tier 2) NDS, PA
INCRELEX INJ 40MG/4ML	\$0 (Tier 2) NDS, LA, PA
KETO-DIASTIX TES	\$0 (Tier 3) DP
KORLYM TAB 300MG	\$0 (Tier 2) NDS, LA, PA
LUPR DEP-PED INJ 3M 30MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 7.5MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 11.25MG	\$0 (Tier 2) NDS, PA
LUPR DEP-PED INJ 15MG	\$0 (Tier 2) NDS, PA
NATPARA INJ 25MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 50MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 75MCG	\$0 (Tier 2) NDS, PA
NATPARA INJ 100MCG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	\$0 (Tier 1) PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	\$0 (Tier 2) NDS, PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	\$0 (Tier 2) NDS, PA
OSPHERA TAB 60MG	\$0 (Tier 2) PA
PROLIA SOL 60MG/ML	\$0 (Tier 2) QL (1 injection / 180 days)
<i>raloxifene hcl tab 60 mg</i>	\$0 (Tier 1)
SIGNIFOR INJ 0.3MG/ML	\$0 (Tier 2) NDS, LA, PA
SIGNIFOR INJ 0.6MG/ML	\$0 (Tier 2) NDS, LA, PA
SIGNIFOR INJ 0.9MG/ML	\$0 (Tier 2) NDS, LA, PA
SOMATULINE INJ 60/0.2ML	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 90/0.3ML	\$0 (Tier 2) NDS, PA
SOMATULINE INJ 120/.5ML	\$0 (Tier 2) NDS, PA
SOMAVERT INJ 10MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 15MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 20MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 25MG	\$0 (Tier 2) NDS, LA, PA
SOMAVERT INJ 30MG	\$0 (Tier 2) NDS, LA, PA
TYMLOS INJ	\$0 (Tier 2) NDS, PA
XGEVA INJ	\$0 (Tier 2) NDS, PA

PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS

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

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

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

THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS

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

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

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

VASOPRESSINS - DRUGS TO REGULATE PITUITARY HORMONES

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

GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS

ANTACIDS

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

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

ANTI-DIARRHEAL

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

ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING

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

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

ANTISPASMODICS - DRUGS FOR STOMACH SPASMS

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

H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID

<i>famotidine for susp 40 mg/5ml</i>	\$0 (Tier 1)
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	\$0 (Tier 1)
<i>famotidine inj 20 mg/2ml</i>	\$0 (Tier 1)
<i>famotidine inj 40 mg/4ml</i>	\$0 (Tier 1)
<i>famotidine inj 200 mg/20ml</i>	\$0 (Tier 1)
<i>famotidine tab 20 mg</i>	\$0 (Tier 1)
<i>famotidine tab 40 mg</i>	\$0 (Tier 1)
<i>nizatidine cap 150 mg</i>	\$0 (Tier 1)
<i>nizatidine cap 300 mg</i>	\$0 (Tier 1)

INFLAMMATORY BOWEL DISEASE

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

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

LAXATIVES

<i>bisac-evac sup 10mg</i>	\$0 (Tier 3) DP
<i>bisacodyl suppos 10 mg</i>	\$0 (Tier 3) DP
<i>bisacodyl tab 5mg ec</i>	\$0 (Tier 3) DP
<i>biscolax sup 10mg</i>	\$0 (Tier 3) DP
<i>constulose sol 10gm/15</i>	\$0 (Tier 1)
<i>docu liq 50mg/5ml</i>	\$0 (Tier 3) DP
<i>docu soft cap 100mg</i>	\$0 (Tier 3) DP
<i>docusate cal cap 240mg</i>	\$0 (Tier 3) DP
<i>docusate sod cap 100mg</i>	\$0 (Tier 3) DP
<i>docusate sod liq 50mg/5ml</i>	\$0 (Tier 3) DP
<i>docusate sodium cap 100 mg</i>	\$0 (Tier 3) DP
<i>docusate sodium liquid 150 mg/15ml</i>	\$0 (Tier 3) DP
<i>docusil cap 100mg</i>	\$0 (Tier 3) DP
DOCUSOL MINI ENE	\$0 (Tier 3) DP
<i>dok plus tab 8.6-50mg</i>	\$0 (Tier 3) DP
<i>ducodyl tab 5mg ec</i>	\$0 (Tier 3) DP
ENEMEEZ MINI ENE	\$0 (Tier 3) DP
ENEMEEZ PLUS ENE 20-283	\$0 (Tier 3) DP
<i>enulose sol 10gm/15</i>	\$0 (Tier 1)
<i>epsom salt gra</i>	\$0 (Tier 3) DP
EPSOM SALT POW	\$0 (Tier 3) DP
<i>gavilyte-c sol</i>	\$0 (Tier 1)
<i>gavilyte-g sol</i>	\$0 (Tier 1)
<i>gavilyte-n sol flav pk</i>	\$0 (Tier 1)
<i>generlac sol 10gm/15</i>	\$0 (Tier 1)
<i>gentle laxat sup 10mg</i>	\$0 (Tier 3) DP
<i>gentle laxat tab 5mg ec</i>	\$0 (Tier 3) DP
<i>glycerin suppos 1 gm</i>	\$0 (Tier 3) DP
<i>gnp bisa-lax tab 5mg ec</i>	\$0 (Tier 3) DP
<i>gnp glycerin sup 1.2gm</i>	\$0 (Tier 3) DP
<i>gnp laxative sup 10mg</i>	\$0 (Tier 3) DP
<i>gnp laxative tab 5mg ec</i>	\$0 (Tier 3) DP
<i>gnp laxative tab 25mg</i>	\$0 (Tier 3) DP
GOLYTELY SOL	\$0 (Tier 2)

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

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

MISCELLANEOUS

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

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

PANCREATIC ENZYMES

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

PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID

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

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

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

MISCELLANEOUS

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

URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

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

VAGINAL ANTI-INFECTIVES

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

HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS

ANTICOAGULANTS - BLOOD THINNERS

COUMADIN TAB 1MG	\$0 (Tier 2)
ELIQUIS ST P TAB 5MG	\$0 (Tier 2) QL (74 tabs / 30 days)
ELIQUIS TAB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
ELIQUIS TAB 5MG	\$0 (Tier 2) QL (74 tabs / 30 days)
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 100 mg/ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 150 mg/ml</i>	\$0 (Tier 1)
<i>enoxaparin sodium inj 300 mg/3ml</i>	\$0 (Tier 1)
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	\$0 (Tier 1)
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	\$0 (Tier 2) NDS
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	\$0 (Tier 2) NDS
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	\$0 (Tier 2) NDS
HEP SOD/NAACL INJ 25000UNT	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	\$0 (Tier 2)
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	\$0 (Tier 1) B/D
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	\$0 (Tier 2)
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	\$0 (Tier 2)
HEPARIN/NACL INJ 25000UNT	\$0 (Tier 2)
<i>jantoven tab 1mg</i>	\$0 (Tier 1)
<i>jantoven tab 2.5mg</i>	\$0 (Tier 1)
<i>jantoven tab 2mg</i>	\$0 (Tier 1)
<i>jantoven tab 3mg</i>	\$0 (Tier 1)
<i>jantoven tab 4mg</i>	\$0 (Tier 1)
<i>jantoven tab 5mg</i>	\$0 (Tier 1)
<i>jantoven tab 6mg</i>	\$0 (Tier 1)
<i>jantoven tab 7.5mg</i>	\$0 (Tier 1)
<i>jantoven tab 10mg</i>	\$0 (Tier 1)
PRADAXA CAP 75MG	\$0 (Tier 2) QL (60 caps / 30 days)
PRADAXA CAP 110MG	\$0 (Tier 2) QL (60 caps / 30 days)
PRADAXA CAP 150MG	\$0 (Tier 2) QL (60 caps / 30 days)
<i>warfarin sodium tab 1 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 2 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 2.5 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 3 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 4 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 5 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 6 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 7.5 mg</i>	\$0 (Tier 1)
<i>warfarin sodium tab 10 mg</i>	\$0 (Tier 1)
XARELTO STAR TAB 15/20MG	\$0 (Tier 2) QL (51 tabs / 30 days)
XARELTO TAB 2.5MG	\$0 (Tier 2) QL (60 tabs / 30 days)
XARELTO TAB 10MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XARELTO TAB 15MG	\$0 (Tier 2) QL (30 tabs / 30 days)
XARELTO TAB 20MG	\$0 (Tier 2) QL (30 tabs / 30 days)
HEMATOPOIETIC GROWTH FACTORS	
PROCRIT INJ 2000/ML	\$0 (Tier 2) PA
PROCRIT INJ 3000/ML	\$0 (Tier 2) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PROCRIT INJ 4000/ML	\$0 (Tier 2) PA
PROCRIT INJ 10000/ML	\$0 (Tier 2) PA
PROCRIT INJ 20000/ML	\$0 (Tier 2) NDS, PA
PROCRIT INJ 40000/ML	\$0 (Tier 2) NDS, PA
ZARXIO INJ 300/0.5	\$0 (Tier 2) NDS, PA
ZARXIO INJ 480/0.8	\$0 (Tier 2) NDS, PA

IRON

DUOFER TAB 28MG	\$0 (Tier 3) DP
EZFE 200 CAP 200MG	\$0 (Tier 3) DP
FE SULFATE POW	\$0 (Tier 3) DP
FERAHEME INJ 510/17ML	\$0 (Tier 3) DP
<i>ferate tab 27mg</i>	\$0 (Tier 3) DP
FERGON TAB 27MG	\$0 (Tier 3) DP
<i>ferosul elx 220/5ml</i>	\$0 (Tier 3) DP
<i>ferosul tab 325mg</i>	\$0 (Tier 3) DP
FERRETTS IPS SOL	\$0 (Tier 3) DP
FERRETTS TAB 325MG	\$0 (Tier 3) DP
<i>ferrex 150 cap 150mg</i>	\$0 (Tier 3) DP
FERRIMIN 150 TAB	\$0 (Tier 3) DP
FERRLECIT INJ 12.5MG/M	\$0 (Tier 3) DP
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	\$0 (Tier 3) DP
FERROUS GLUC TAB 324MG	\$0 (Tier 3) DP
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous gluconate tab 324 mg (37.5 mg elemental iron)</i>	\$0 (Tier 3) DP
FERROUS SULF TAB 324MG EC	\$0 (Tier 3) DP
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	\$0 (Tier 3) DP
FERROUS SULFATE SYRUP 300 MG/5ML (60 MG/5ML ELEMENTAL FE)	\$0 (Tier 3) DP
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	\$0 (Tier 3) DP
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	\$0 (Tier 3) DP
<i>ferrousul tab 325mg</i>	\$0 (Tier 3) DP
FOLITAB 500 TAB	\$0 (Tier 3) DP

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

MISCELLANEOUS

<i>anagrelide hcl cap 0.5 mg</i>	\$0 (Tier 1)
<i>anagrelide hcl cap 1 mg</i>	\$0 (Tier 1)
BERINERT INJ 500UNIT	\$0 (Tier 2) NDS, QL (24 boxes / 30 days), LA, PA
<i>cilostazol tab 50 mg</i>	\$0 (Tier 1)
<i>cilostazol tab 100 mg</i>	\$0 (Tier 1)
DROXIA CAP 200MG	\$0 (Tier 2)
DROXIA CAP 300MG	\$0 (Tier 2)
DROXIA CAP 400MG	\$0 (Tier 2)
ENDARI POW 5GM	\$0 (Tier 2) NDS, LA, PA
HAEGARDA INJ 2000UNIT	\$0 (Tier 2) NDS, QL (30 vials / 30 days), LA, PA
HAEGARDA INJ 3000UNIT	\$0 (Tier 2) NDS, QL (20 vials / 30 days), LA, PA
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	\$0 (Tier 2) NDS, QL (9 syringes / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>pentoxifylline tab er 400 mg</i>	\$0 (Tier 1)
PROMACTA PAK 25MG	\$0 (Tier 2) NDS, QL (180 packets / 30 days), LA, PA
PROMACTA POW 12.5MG	\$0 (Tier 2) NDS, QL (360 packets / 30 days), LA, PA
PROMACTA TAB 12.5MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
PROMACTA TAB 25MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), LA, PA
PROMACTA TAB 50MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
PROMACTA TAB 75MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), LA, PA
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	\$0 (Tier 1)
<i>tranexamic acid tab 650 mg</i>	\$0 (Tier 1)

PLATELET AGGREGATION INHIBITORS

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

IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM

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

ENBREL INJ 25/0.5ML	\$0 (Tier 2) NDS, QL (16 syringes / 28 days), PA
ENBREL INJ 25MG	\$0 (Tier 2) NDS, QL (16 vials / 28 days), PA
ENBREL INJ 50MG/ML	\$0 (Tier 2) NDS, QL (8 syringes / 28 days), PA
ENBREL MINI INJ 50MG/ML	\$0 (Tier 2) NDS, QL (8 injections / 28 days), PA
ENBREL SRCLK INJ 50MG/ML	\$0 (Tier 2) NDS, QL (8 injections / 28 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
HUMIRA INJ 10/0.1ML	\$0 (Tier 2) NDS, QL (2 injections / 28 days), PA
HUMIRA INJ 10MG/0.2	\$0 (Tier 2) NDS, QL (2 syringes / 28 days), PA
HUMIRA INJ 20/0.2ML	\$0 (Tier 2) NDS, QL (2 injections / 28 days), PA
HUMIRA INJ 40/0.4ML	\$0 (Tier 2) NDS, QL (6 injections / 28 days), PA
HUMIRA KIT 20MG/0.4	\$0 (Tier 2) NDS, QL (2 syringes / 28 days), PA
HUMIRA KIT 40MG/0.8	\$0 (Tier 2) NDS, QL (6 syringes / 28 days), PA
HUMIRA PEDIA INJ CROHNS	\$0 (Tier 2) NDS, PA
HUMIRA PEN INJ 40/0.4ML	\$0 (Tier 2) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ 40MG/0.8	\$0 (Tier 2) NDS, QL (6 pens / 28 days), PA
HUMIRA PEN INJ CD/UC/HS	\$0 (Tier 2) NDS, PA
HUMIRA PEN INJ PS/UV	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT CD/UC/HS	\$0 (Tier 2) NDS, PA
HUMIRA PEN KIT PS/UV	\$0 (Tier 2) NDS, PA
<i>hydroxychloroquine sulfate tab 200 mg</i>	\$0 (Tier 1)
<i>leflunomide tab 10 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>leflunomide tab 20 mg</i>	\$0 (Tier 1) QL (30 tabs / 30 days)
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	\$0 (Tier 1)
REMICADE INJ 100MG	\$0 (Tier 2) NDS, PA
RENFLEXIS INJ 100MG	\$0 (Tier 2) NDS, LA, PA
RINVOQ TAB 15MG ER	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
SKYRIZI INJ 150DOSE	\$0 (Tier 2) NDS, QL (7 kits / year), PA
STELARA INJ 45MG/0.5	\$0 (Tier 2) NDS, QL (1 syringe / 28 days), PA
STELARA INJ 45MG/0.5	\$0 (Tier 2) NDS, QL (1 vial / 28 days), LA, PA
STELARA INJ 90MG/ML	\$0 (Tier 2) NDS, QL (1 syringe / 28 days), PA
XATMEP SOL 2.5MG/ML	\$0 (Tier 2) B/D
XELJANZ TAB 5MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
XELJANZ TAB 10MG	\$0 (Tier 2) NDS, QL (60 tabs / 30 days), PA
XELJANZ XR TAB 11MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA
XELJANZ XR TAB 22MG	\$0 (Tier 2) NDS, QL (30 tabs / 30 days), PA

IMMUNOGLOBULINS

BIVIGAM INJ 10%	\$0 (Tier 2) NDS, PA
FLEBOGAMMA INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
FLEBOGAMMA INJ 10/100ML	\$0 (Tier 2) NDS, PA
FLEBOGAMMA INJ 10/200ML	\$0 (Tier 2) NDS, PA
FLEBOGAMMA INJ 20/200ML	\$0 (Tier 2) NDS, PA
FLEBOGAMMA INJ 20/400ML	\$0 (Tier 2) NDS, PA
FLEBOGAMMA INJ DIF 5%	\$0 (Tier 2) NDS, PA
GAMASTAN INJ	\$0 (Tier 2) B/D
GAMMAGARD INJ 1GM/10ML	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 2.5GM/25	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 10GM/100	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 20GM/200	\$0 (Tier 2) NDS, PA
GAMMAGARD INJ 30GM/300	\$0 (Tier 2) NDS, PA
GAMMAGARD SD INJ 5GM HU	\$0 (Tier 2) NDS, PA
GAMMAGARD SD INJ 10GM HU	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 1GM/10ML	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 10GM/100	\$0 (Tier 2) NDS, PA
GAMMAKED INJ 20GM/200	\$0 (Tier 2) NDS, PA
GAMMAPLEX INJ 5%	\$0 (Tier 2) NDS, PA
GAMMAPLEX INJ 10%	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 1GM/10ML	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 2.5GM/25	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 5GM/50ML	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 10GM/100	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 20GM/200	\$0 (Tier 2) NDS, PA
GAMUNEX-C INJ 40/400ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 1GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 2.5GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 2GM/20ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 5GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 5GM/50ML	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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OCTAGAM INJ 10/100ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 10GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 20/200ML	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 25GM	\$0 (Tier 2) NDS, PA
OCTAGAM INJ 30/300ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 1GM/10ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 2.5/25ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 5GM/50ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 10/100ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 20/200ML	\$0 (Tier 2) NDS, PA
PANZYGA SOL 30/300ML	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 5 GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 10GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 20GRAMS	\$0 (Tier 2) NDS, PA
PRIVIGEN INJ 40GRAMS	\$0 (Tier 2) NDS, PA

IMMUNOMODULATORS

ACTIMMUNE INJ 2MU/0.5	\$0 (Tier 2) NDS, LA, PA
ARCALYST INJ 220MG	\$0 (Tier 2) NDS, PA
INTRON A INJ 10MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 18MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 25MU	\$0 (Tier 2) NDS, B/D
INTRON A INJ 50MU	\$0 (Tier 2) NDS, B/D

IMMUNOSUPPRESSANTS

<i>azathioprine tab 50 mg</i>	\$0 (Tier 1) B/D
BENLYSTA INJ 120MG	\$0 (Tier 2) NDS, PA
BENLYSTA INJ 200MG/ML	\$0 (Tier 2) NDS, PA
BENLYSTA INJ 400MG	\$0 (Tier 2) NDS, PA
<i>cyclosporine cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine cap 100 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine iv soln 50 mg/ml</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 25 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 50 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified cap 100 mg</i>	\$0 (Tier 1) B/D
<i>cyclosporine modified oral soln 100 mg/ml</i>	\$0 (Tier 1) B/D
<i>everolimus tab 0.5 mg</i>	\$0 (Tier 2) NDS, B/D
<i>everolimus tab 0.25 mg</i>	\$0 (Tier 1) B/D
<i>everolimus tab 0.75 mg</i>	\$0 (Tier 2) NDS, B/D
<i>gengraf cap 25mg</i>	\$0 (Tier 1) B/D
<i>gengraf cap 100mg</i>	\$0 (Tier 1) B/D

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>gengraf sol 100mg/ml</i>	\$0 (Tier 1) B/D
<i>mycophenolate mofetil cap 250 mg</i>	\$0 (Tier 1) B/D
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>mycophenolate mofetil tab 500 mg</i>	\$0 (Tier 1) B/D
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	\$0 (Tier 1) B/D
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	\$0 (Tier 1) B/D
NULOJIX INJ 250MG	\$0 (Tier 2) NDS, B/D
PROGRAF GRA 0.2MG	\$0 (Tier 2) B/D
PROGRAF GRA 1MG	\$0 (Tier 2) B/D
SANDIMMUNE SOL 100MG/ML	\$0 (Tier 2) B/D
<i>sirolimus oral soln 1 mg/ml</i>	\$0 (Tier 2) NDS, B/D
<i>sirolimus tab 0.5 mg</i>	\$0 (Tier 1) B/D
<i>sirolimus tab 1 mg</i>	\$0 (Tier 1) B/D
<i>sirolimus tab 2 mg</i>	\$0 (Tier 2) NDS, B/D
<i>tacrolimus cap 0.5 mg</i>	\$0 (Tier 1) B/D
<i>tacrolimus cap 1 mg</i>	\$0 (Tier 1) B/D
<i>tacrolimus cap 5 mg</i>	\$0 (Tier 1) B/D
ZORTRESS TAB 0.5MG	\$0 (Tier 2) NDS, B/D
ZORTRESS TAB 0.25MG	\$0 (Tier 2) NDS, B/D
ZORTRESS TAB 0.75MG	\$0 (Tier 2) NDS, B/D
ZORTRESS TAB 1MG	\$0 (Tier 2) NDS, B/D

VACCINES

ACTHIB INJ	\$0 (Tier 2)
ADACEL INJ	\$0 (Tier 2)
BCG VACCINE INJ	\$0 (Tier 2)
BEXSERO INJ	\$0 (Tier 2)
BOOSTRIX INJ	\$0 (Tier 2)
DAPTACEL INJ	\$0 (Tier 2)
DIP/TET PED INJ 25-5LFU	\$0 (Tier 2) B/D
ENGERIX-B INJ 10/0.5ML	\$0 (Tier 2) B/D
ENGERIX-B INJ 20MCG/ML	\$0 (Tier 2) B/D
GARDASIL 9 INJ	\$0 (Tier 2)
HAVRIX INJ 720UNIT	\$0 (Tier 2)
HAVRIX INJ 1440UNIT	\$0 (Tier 2)
HIBERIX SOL 10MCG	\$0 (Tier 2)
IMOVAX RABIE INJ 2.5/ML	\$0 (Tier 2) B/D
INFANRIX INJ	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
IPOL INJ INACTIVE	\$0 (Tier 2)
IXIARO INJ	\$0 (Tier 2)
KINRIX INJ	\$0 (Tier 2)
M-M-R II INJ	\$0 (Tier 2)
MENACTRA INJ	\$0 (Tier 2)
MENVEO INJ	\$0 (Tier 2)
PEDIARIX INJ 0.5ML	\$0 (Tier 2)
PEDVAX HIB INJ	\$0 (Tier 2)
PENTACEL INJ	\$0 (Tier 2)
PROQUAD INJ	\$0 (Tier 2)
QUADRACEL INJ	\$0 (Tier 2)
RABAVERT INJ	\$0 (Tier 2) B/D
RECOMBIVA HB INJ 5MCG/0.5	\$0 (Tier 2) B/D
RECOMBIVA HB INJ 10MCG/ML	\$0 (Tier 2) B/D
RECOMBIVA-HB INJ 40MCG/ML	\$0 (Tier 2) B/D
ROTARIX SUS	\$0 (Tier 2)
ROTATEQ SOL	\$0 (Tier 2)
SHINGRIX INJ 50/0.5ML	\$0 (Tier 2) QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	\$0 (Tier 2) B/D
TENIVAC INJ 5-2LF	\$0 (Tier 2) B/D
TRUMENBA INJ	\$0 (Tier 2)
TWINRIX INJ	\$0 (Tier 2)
TYPHIM VI INJ	\$0 (Tier 2)
VAQTA INJ 25/0.5ML	\$0 (Tier 2)
VAQTA INJ 50UNT/ML	\$0 (Tier 2)
VARIVAX INJ	\$0 (Tier 2)
YF-VAX INJ	\$0 (Tier 2)
ZOSTAVAX INJ	\$0 (Tier 2) QL (1 vial per lifetime)

NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS

ELECTROLYTES

<i>gnp pediatri sol electrol</i>	\$0 (Tier 3) DP
<i>klor-con 8 tab 8meq er</i>	\$0 (Tier 1)
<i>klor-con 10 tab 10meq er</i>	\$0 (Tier 1)
MAGNESIUM SU INJ 2GM/50ML	\$0 (Tier 2)
MAGNESIUM SU INJ 4G/100ML	\$0 (Tier 2)
MAGNESIUM SU INJ 20/500ML	\$0 (Tier 2)
MAGNESIUM SU INJ 40G/1000	\$0 (Tier 2)
MAGNESIUM SU INJ 80MG/ML	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0 (Tier 2)	
<i>magnesium sulfate inj 50%</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	\$0 (Tier 2)	
<i>MG SO4/D5W INJ 10MG/ML</i>	\$0 (Tier 2)	
<i>oral electrolyte solution</i>	\$0 (Tier 3)	DP
<i>oralyte sol</i>	\$0 (Tier 3)	DP
<i>oralyte sol freeze</i>	\$0 (Tier 3)	DP
<i>ped elctrylt sol freezer</i>	\$0 (Tier 3)	DP
<i>ped elctrylt sol fruit</i>	\$0 (Tier 3)	DP
<i>ped elctrylt sol grape</i>	\$0 (Tier 3)	DP
<i>ped elctrylt sol unflavrd</i>	\$0 (Tier 3)	DP
<i>potassium chloride cap er 8 meq</i>	\$0 (Tier 1)	
<i>potassium chloride cap er 10 meq</i>	\$0 (Tier 1)	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	\$0 (Tier 1)	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	\$0 (Tier 1)	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	\$0 (Tier 1)	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	\$0 (Tier 1)	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	\$0 (Tier 1)	
<i>potassium chloride powder packet 20 meq</i>	\$0 (Tier 1)	
<i>potassium chloride tab er 8 meq (600 mg)</i>	\$0 (Tier 1)	
<i>potassium chloride tab er 10 meq</i>	\$0 (Tier 1)	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	\$0 (Tier 1)	
<i>SOD FLUORIDE POW</i>	\$0 (Tier 3)	DP
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0 (Tier 1)
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<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	\$0 (Tier 3) DP
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TPN ELECTROL INJ	\$0 (Tier 2) B/D
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IV NUTRITION

AMINOSYN II INJ 10%	\$0 (Tier 2) B/D
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AMINOSYN-PF INJ 7%	\$0 (Tier 2) B/D
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<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	\$0 (Tier 3) DP
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CLINIMIX INJ 4.25/D5W	\$0 (Tier 2) B/D
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CLINIMIX INJ 4.25/D10	\$0 (Tier 2) B/D
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CLINIMIX INJ 5%/D15W	\$0 (Tier 2) B/D
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CLINIMIX INJ 5%/D20W	\$0 (Tier 2) B/D
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<i>clinisol sf inj 15%</i>	\$0 (Tier 1) B/D
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CLINOLIPID EMU 20%	\$0 (Tier 2) B/D
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COPPER SULF CRY	\$0 (Tier 3) DP
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<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	\$0 (Tier 3) DP
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FREAMINE HBC INJ 6.9%	\$0 (Tier 2) B/D
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FREAMINE III INJ 10%	\$0 (Tier 2) B/D
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<i>hepatamine sol 8%</i>	\$0 (Tier 2) B/D
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INTRALIPID INJ 20%	\$0 (Tier 2) B/D
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INTRALIPID INJ 30%	\$0 (Tier 2) B/D
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NEPHRAMINE INJ 5.4%	\$0 (Tier 2) B/D
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NUTRILIPID EMU 20%	\$0 (Tier 2) B/D
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<i>plenamine inj 15%</i>	\$0 (Tier 1) B/D
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PREMASOL SOL 10%	\$0 (Tier 2) B/D
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PROCALAMINE INJ 3%	\$0 (Tier 2) B/D
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PROSOL INJ 20%	\$0 (Tier 2) B/D
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TRAVASOL INJ 10%	\$0 (Tier 2) B/D
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TROPHAMINE INJ 10%	\$0 (Tier 2) B/D
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<i>zinc chloride inj 1 mg/ml</i>	\$0 (Tier 3) DP
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IV REPLACEMENT SOLUTIONS

D5W/LYTES INJ #48	\$0 (Tier 2)
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D5W/NACL INJ 0.3%	\$0 (Tier 2)
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D10W/NACL INJ 0.2%	\$0 (Tier 2)
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<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)
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<i>dextrose 5% in lactated ringers</i>	\$0 (Tier 1)
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<i>dextrose 5% w/ sodium chloride 0.2%</i>	\$0 (Tier 1)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG WILL COST YOU (TIER LEVEL)	RESTRICTIONS OR LIMITS ON USE
<i>dextrose 5% w/ sodium chloride 0.9%</i>	\$0 (Tier 1)	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	\$0 (Tier 1)	
<i>dextrose inj 5%</i>	\$0 (Tier 1)	
<i>dextrose inj 10%</i>	\$0 (Tier 1)	
<i>dextrose inj 50%</i>	\$0 (Tier 1)	
<i>dextrose inj 70%</i>	\$0 (Tier 1)	
ISOLYTE-P INJ /D5W	\$0 (Tier 2)	
ISOLYTE-S INJ	\$0 (Tier 2)	
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	\$0 (Tier 1)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	\$0 (Tier 1)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0 (Tier 1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0 (Tier 1)	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	\$0 (Tier 1)	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	\$0 (Tier 1)	
KCL/D5W/NACL INJ 0.3/0.9%	\$0 (Tier 2)	
KCL/D5W/NACL INJ 0.15/0.2	\$0 (Tier 2)	
<i>lactated ringer's solution</i>	\$0 (Tier 1)	
NORMOSOL -M INJ /D5W	\$0 (Tier 2)	
PLASMA-LYTE INJ -148	\$0 (Tier 2)	
PLASMA-LYTE INJ -A	\$0 (Tier 2)	
POT CHLORIDE INJ 10MEQ	\$0 (Tier 1)	
POT CHLORIDE INJ 20MEQ	\$0 (Tier 1)	
POT CHLORIDE INJ 40MEQ	\$0 (Tier 1)	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0 (Tier 1)	
<i>potassium chloride inj 2 meq/ml</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 0.9%</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 0.45%</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 3%</i>	\$0 (Tier 1)	
<i>sodium chloride iv soln 5%</i>	\$0 (Tier 1)	

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>sodium chloride tab 1 gm</i>	\$0 (Tier 3) DP
MINERALS	
BEELITH TAB	\$0 (Tier 3) DP
CA PHOS DIHY POW DIBASIC	\$0 (Tier 3) DP
CALCET PETIT TAB 200-250	\$0 (Tier 3) DP
CALCI-CHEW CHW 1250MG	\$0 (Tier 3) DP
CALCI-MIX CAP 1250MG	\$0 (Tier 3) DP
<i>calcitrate tab</i>	\$0 (Tier 3) DP
<i>calcitrate tab 950mg</i>	\$0 (Tier 3) DP
<i>calcium 600 chw +d/miner</i>	\$0 (Tier 3) DP
<i>calcium 600 tab</i>	\$0 (Tier 3) DP
<i>calcium 600 tab + d</i>	\$0 (Tier 3) DP
<i>calcium 600 tab +d/mnrls</i>	\$0 (Tier 3) DP
<i>calcium 600 tab -d</i>	\$0 (Tier 3) DP
<i>calcium +d tab maximum</i>	\$0 (Tier 3) DP
CALCIUM CARB POW	\$0 (Tier 3) DP
CALCIUM CARB POW EX-LIGHT	\$0 (Tier 3) DP
CALCIUM CARB POW HEAVY	\$0 (Tier 3) DP
<i>calcium carb-vit d w/ minerals chew tab 600 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	\$0 (Tier 3) DP
<i>calcium carbonate tab 600 mg</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol chew tab 500 mg-100 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 500 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 500 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 600 mg-200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-cholecalciferol tab 600 mg-400 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 500 mg- 200 unit</i>	\$0 (Tier 3) DP
<i>calcium carbonate-vitamin d tab 500 mg- 400 unit</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>calcium carbonate-vitamin d tab 600 mg-125 unit</i>	\$0 (Tier 3) DP
<i>calcium citr tab w/vit d3</i>	\$0 (Tier 3) DP
<i>calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)</i>	\$0 (Tier 3) DP
CALCIUM GLUC POW	\$0 (Tier 3) DP
CALCIUM LACT POW PENTAHYD	\$0 (Tier 3) DP
CALCIUM LACT TAB 648MG	\$0 (Tier 3) DP
CALCIUM PHOS POW TRIBASIC	\$0 (Tier 3) DP
<i>calcium plus tab 600 +d</i>	\$0 (Tier 3) DP
<i>calcium soft chw mlk choc</i>	\$0 (Tier 3) DP
<i>calcium tab 500/d</i>	\$0 (Tier 3) DP
<i>calcium tab 600mg</i>	\$0 (Tier 3) DP
<i>calcium tab vit d</i>	\$0 (Tier 3) DP
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	\$0 (Tier 3) DP
<i>calcium-magnesium-zinc tab 334-134-5 mg</i>	\$0 (Tier 3) DP
<i>calcium/d3 tab</i>	\$0 (Tier 3) DP
<i>calcium/d chw 500-400</i>	\$0 (Tier 3) DP
<i>cit calc/d tab 315-250</i>	\$0 (Tier 3) DP
<i>gnp ca/mg/zn tab</i>	\$0 (Tier 3) DP
<i>gnp ca/vit d chw minerals</i>	\$0 (Tier 3) DP
<i>gnp calcium tab 500/d</i>	\$0 (Tier 3) DP
<i>gnp calcium tab 600/d</i>	\$0 (Tier 3) DP
<i>gnp calcium tab cit +d3</i>	\$0 (Tier 3) DP
<i>gnp magnesiu tab 250mg</i>	\$0 (Tier 3) DP
<i>gnp zinc tab 50mg</i>	\$0 (Tier 3) DP
MAG CARBONAT POW HEAVY	\$0 (Tier 3) DP
<i>mag-g tab 500mg</i>	\$0 (Tier 3) DP
MAGDELAY TAB 70MG	\$0 (Tier 3) DP
MAGN CHLORID POW	\$0 (Tier 3) DP
MAGNEBIND TAB 200	\$0 (Tier 3) DP
MAGNEBIND TAB 300	\$0 (Tier 3) DP
<i>magnesium gluconate tab 500 mg (27 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg (240 mg elemental mg)</i>	\$0 (Tier 3) DP
<i>magnesium oxide tab 400 mg (241.3 mg elemental mg)</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>magnesium oxide tab 500 mg (mg supplement)</i>	\$0 (Tier 3) DP
MAGNESIUM POW HYDROXID	\$0 (Tier 3) DP
<i>magnesium tab 250 mg</i>	\$0 (Tier 3) DP
<i>magnesium tab 250mg</i>	\$0 (Tier 3) DP
MAGONATE LIQ 1000/5ML	\$0 (Tier 3) DP
<i>magonate tab 500mg</i>	\$0 (Tier 3) DP
<i>manganese chloride inj 0.1 mg/ml</i>	\$0 (Tier 3) DP
<i>oysco 500 tab 500mg</i>	\$0 (Tier 3) DP
<i>oysco 500+d chw</i>	\$0 (Tier 3) DP
<i>oysco 500+d tab</i>	\$0 (Tier 3) DP
<i>oyst cal/d tab 500mg</i>	\$0 (Tier 3) DP
<i>oyst shell/d tab 500mg</i>	\$0 (Tier 3) DP
<i>oyster shell calcium tab 500 mg</i>	\$0 (Tier 3) DP
<i>oyster shell tab 500mg</i>	\$0 (Tier 3) DP
PHOS-NAK POW CONCENTR	\$0 (Tier 3) DP
<i>potassium & sodium phosphates powder pack 280-160-250 mg</i>	\$0 (Tier 3) DP
RISACAL-D TAB	\$0 (Tier 3) DP
<i>sm ca/mg/zn tab</i>	\$0 (Tier 3) DP
<i>sm calcium chw</i>	\$0 (Tier 3) DP
<i>sm calcium/d tab 600-400</i>	\$0 (Tier 3) DP
SM CORAL CAL TAB 1000MG	\$0 (Tier 3) DP
<i>sm zinc tab 50mg</i>	\$0 (Tier 3) DP
SOD ACETATE POW ANHYDR	\$0 (Tier 3) DP
SOD CHLORIDE GRA	\$0 (Tier 3) DP
<i>zinc gluconate tab 50 mg (elemental zn)</i>	\$0 (Tier 3) DP
ZINC SULFATE CAP 50MG	\$0 (Tier 3) DP
ZINC SULFATE POW GRANULAR	\$0 (Tier 3) DP
ZINC SULFATE POW MONOHYD	\$0 (Tier 3) DP
<i>zinc sulfate tab 220 mg (50 mg zinc equivalent)</i>	\$0 (Tier 3) DP
<i>zinc tab 50 mg</i>	\$0 (Tier 3) DP

MISCELLANEOUS

ACACIA POW	\$0 (Tier 3) DP
APPLE FLAVOR LIQ	\$0 (Tier 3) DP
ASPARTAME POW	\$0 (Tier 3) DP
BANANA LIQ FLAVOR	\$0 (Tier 3) DP
BENZYL ALC LIQ	\$0 (Tier 3) DP
BITTERNESS POW NATURAL	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
BUFFER CREAM POW	\$0 (Tier 3) DP
BUTTER RUM LIQ FLAVOR	\$0 (Tier 3) DP
BUTYLPARABEN POW	\$0 (Tier 3) DP
CARBOGEL GEL 940	\$0 (Tier 3) DP
CARBOHOL GEL 940	\$0 (Tier 3) DP
CETYL ALCOHO GRA	\$0 (Tier 3) DP
CHERRY CON	\$0 (Tier 3) DP
CHERRY SYP	\$0 (Tier 3) DP
CHERRY SYP CONCENTR	\$0 (Tier 3) DP
CHOCOLATE CON FLAVOR	\$0 (Tier 3) DP
CINNAMON OIL FLAVOR	\$0 (Tier 3) DP
CLOVE FLAVOR OIL	\$0 (Tier 3) DP
CO-ENZYME WAF Q10/E	\$0 (Tier 3) DP
COCOA BUTTER MIS	\$0 (Tier 3) DP
<i>coenzyme q10 cap 10 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 30 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 30mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 50 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 60 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 75 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 100 mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 100mg</i>	\$0 (Tier 3) DP
<i>coenzyme q10 cap 150 mg</i>	\$0 (Tier 3) DP
COENZYME Q10 CHW 60MG	\$0 (Tier 3) DP
COENZYME Q10 LIQ 30MG/5ML	\$0 (Tier 3) DP
COENZYME Q10 TAB 25MG	\$0 (Tier 3) DP
<i>coenzyme q10 tab 60 mg</i>	\$0 (Tier 3) DP
COENZYME Q10 TAB 200MG	\$0 (Tier 3) DP
COLLODION LIQ	\$0 (Tier 3) DP
COLLODION LIQ FLEXIBLE	\$0 (Tier 3) DP
COQ-10 CAP 100MG TR	\$0 (Tier 3) DP
DIABETISWEET POW	\$0 (Tier 3) DP
DISTILLED LIQ WATER	\$0 (Tier 3) DP
<i>eq1 coq10 cap 100mg</i>	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 100%	\$0 (Tier 3) DP
FATTYBLEND MIS	\$0 (Tier 3) DP
FDC BLUE 1 POW	\$0 (Tier 3) DP
FDC BLUE 1 POW AL LAKE	\$0 (Tier 3) DP
FDC BLUE 2 POW	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
FDC GREEN #3 POW	\$0 (Tier 3) DP
FDC RED 40 POW	\$0 (Tier 3) DP
FDC RED #3 POW	\$0 (Tier 3) DP
FDC RED #40 POW AL LAKE	\$0 (Tier 3) DP
FDC YELLOW 5 POW	\$0 (Tier 3) DP
FDC YELLOW 5 POW AL LAKE	\$0 (Tier 3) DP
FDC YELLOW 6 POW	\$0 (Tier 3) DP
FLAVORX LIQ	\$0 (Tier 3) DP
FRUCTOSE GRA	\$0 (Tier 3) DP
<i>gnp co q10 cap 60mg</i>	\$0 (Tier 3) DP
<i>gnp co q10 cap 100mg</i>	\$0 (Tier 3) DP
GOWEY TIN TINCTURE	\$0 (Tier 3) DP
GRAPE LIQ FLAVOR	\$0 (Tier 3) DP
GRAPE SYP	\$0 (Tier 3) DP
<i>h2q cap 100mg</i>	\$0 (Tier 3) DP
<i>hm coq10 cap 50mg</i>	\$0 (Tier 3) DP
<i>hm coq10 cap 100mg</i>	\$0 (Tier 3) DP
HRT BASE CRE	\$0 (Tier 3) DP
HYDROPHILIC OIN	\$0 (Tier 3) DP
HYDROUS CRE EMULSIFI	\$0 (Tier 3) DP
JELENE OIN	\$0 (Tier 3) DP
KARAYA GUM	\$0 (Tier 3) DP
L-ARGININE POW	\$0 (Tier 3) DP
L-CYSTINE POW	\$0 (Tier 3) DP
L-GLUTAMINE POW	\$0 (Tier 3) DP
L-GLUTATHION CRY	\$0 (Tier 3) DP
L-ISOLEUCINE POW	\$0 (Tier 3) DP
L-METHIONINE POW	\$0 (Tier 3) DP
L-TYROSINE POW	\$0 (Tier 3) DP
L-VALINE POW	\$0 (Tier 3) DP
LACTOSE POW	\$0 (Tier 3) DP
LACTOSE POW ANHYDROU	\$0 (Tier 3) DP
LACTOSE POW HYDROUS	\$0 (Tier 3) DP
LACTOSE POW MONOHYDR	\$0 (Tier 3) DP
LECITHIN GRA	\$0 (Tier 3) DP
LEMON FLAVOR OIL	\$0 (Tier 3) DP
LIP BALM OIN BASE	\$0 (Tier 3) DP
LIP BALM OIN NATURAL	\$0 (Tier 3) DP
LIPOBASE CRE	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
LIPOIL OIL	\$0 (Tier 3) DP
LIPOVAN BASE CRE	\$0 (Tier 3) DP
LOLLIBASE POW	\$0 (Tier 3) DP
LOZIBASE MIS	\$0 (Tier 3) DP
METHYLCELLUL GEL 2%	\$0 (Tier 3) DP
METHYLCELLUL GEL 3%	\$0 (Tier 3) DP
METHYLCELLUL POW 1500CPS	\$0 (Tier 3) DP
METHYLCELLUL POW 4000CPS	\$0 (Tier 3) DP
METHYLPARABE POW	\$0 (Tier 3) DP
MICRODERM CRE BASE	\$0 (Tier 3) DP
MICROSOME CRE BASE	\$0 (Tier 3) DP
NICE DISTILL LIQ WATER	\$0 (Tier 3) DP
ORA-BLEND SF SUS	\$0 (Tier 3) DP
ORA-BLEND SUS	\$0 (Tier 3) DP
ORA-HESIVE PST BASE	\$0 (Tier 3) DP
ORA-PLUS LIQ	\$0 (Tier 3) DP
ORA-SWEET SF SYP	\$0 (Tier 3) DP
ORA-SWEET SYP	\$0 (Tier 3) DP
ORANGE CONC LIQ	\$0 (Tier 3) DP
PCCA BASE CRE 7542	\$0 (Tier 3) DP
PCCA MBK MIS FAT ACID	\$0 (Tier 3) DP
PEG 300 LIQ	\$0 (Tier 3) DP
PEG 1000 LIQ	\$0 (Tier 3) DP
PEG 3350 POW	\$0 (Tier 3) DP
PEG BLEND OIN	\$0 (Tier 3) DP
PEPPERMINT OIL FLAVOR	\$0 (Tier 3) DP
PFCB CRE	\$0 (Tier 3) DP
PHARMABASE CRE ANTIOXID	\$0 (Tier 3) DP
PHARMABASE CRE COSMETIC	\$0 (Tier 3) DP
PHARMABASE CRE LIGHT	\$0 (Tier 3) DP
PHARMABASE CRE VAGINAL	\$0 (Tier 3) DP
PHYTOBASE CRE	\$0 (Tier 3) DP
PLO20 GEL FLOWABLE	\$0 (Tier 3) DP
PLO LECITHIN GEL BASE	\$0 (Tier 3) DP
PNA-HRT BASE CRE	\$0 (Tier 3) DP
POLOX GEL 20%	\$0 (Tier 3) DP
POLOX GEL 30%	\$0 (Tier 3) DP
POLOXAMER POW 407	\$0 (Tier 3) DP
POLY GLYCOL LIQ 1450	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
POLY GLYCOL POW 8000	\$0 (Tier 3) DP
POLYETHYLENE LIQ GLY 400	\$0 (Tier 3) DP
POLYOXYL 40 POW STEARATE	\$0 (Tier 3) DP
POT SORBATE CRY	\$0 (Tier 3) DP
<i>prasterone (dhea) cap 25 mg</i>	\$0 (Tier 3) DP
PROPYLENE GL LIQ	\$0 (Tier 3) DP
PROPYLENE LIQ GLYCOL	\$0 (Tier 3) DP
PROPYPARABEN POW	\$0 (Tier 3) DP
Q-DERM CRE	\$0 (Tier 3) DP
<i>q-sorb cap 30mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 75mg</i>	\$0 (Tier 3) DP
<i>q-sorb cap 150mg</i>	\$0 (Tier 3) DP
<i>q-sorb co-q cap 100mg</i>	\$0 (Tier 3) DP
RASPBERRY LIQ FLAVOR	\$0 (Tier 3) DP
RDT BASE POW	\$0 (Tier 3) DP
SACCHARIN POW	\$0 (Tier 3) DP
SACCHARIN POW SODIUM	\$0 (Tier 3) DP
SAFFLOWER OIL	\$0 (Tier 3) DP
SALTSTABLE CRE	\$0 (Tier 3) DP
SHEA BUTTER MIS	\$0 (Tier 3) DP
SIMPLE SYP	\$0 (Tier 3) DP
<i>sm coq-10 cap 50mg</i>	\$0 (Tier 3) DP
SOD BENZOATE POW	\$0 (Tier 3) DP
SOD LAURYL POW SULFATE	\$0 (Tier 3) DP
SOD SACCHARI GRA	\$0 (Tier 3) DP
SORBIC ACID POW	\$0 (Tier 3) DP
SORBITOL SOL 70%	\$0 (Tier 3) DP
SPERMACETI MIS	\$0 (Tier 3) DP
STRAWBERRY LIQ FLAVOR	\$0 (Tier 3) DP
SUPPOSIBLEND MIS	\$0 (Tier 3) DP
SUSPENDIT GEL	\$0 (Tier 3) DP
SYRSPEND SF SUS ALKA	\$0 (Tier 3) DP
TANGERINE POW FLAVOR	\$0 (Tier 3) DP
THREONINE POW	\$0 (Tier 3) DP
TROCHIBASE MIS	\$0 (Tier 3) DP
TROCHIBASE S MIS	\$0 (Tier 3) DP
TROCHIBASE S MIS CLASSIC	\$0 (Tier 3) DP
TROLAMINE LIQ	\$0 (Tier 3) DP
TUTTI FRUTTI CON	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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U-BASE CRE	\$0 (Tier 3) DP
UNIBASE CRE	\$0 (Tier 3) DP
V-MAX CRE	\$0 (Tier 3) DP
V-R FATIGUE TAB COMPLEX	\$0 (Tier 3) DP
VANIBASE CRE	\$0 (Tier 3) DP
VERSATILE CRE BASE	\$0 (Tier 3) DP
VERSIGEL CRE	\$0 (Tier 3) DP
WATERMELON LIQ FLAVOR	\$0 (Tier 3) DP
<i>white petrolatum gel</i>	\$0 (Tier 3) DP
WITEPSOL H15 MIS	\$0 (Tier 3) DP
XANTHAN GUM POW	\$0 (Tier 3) DP

VITAMINS

ADULT 50+ CAP OCUVITE	\$0 (Tier 3) DP
<i>animal shape chw</i>	\$0 (Tier 3) DP
<i>animal shape chw complete</i>	\$0 (Tier 3) DP
ANIMAL SHAPE CHW IRON	\$0 (Tier 3) DP
<i>antioxidant tab</i>	\$0 (Tier 3) DP
<i>antioxidant tab vitamins</i>	\$0 (Tier 3) DP
APATATE FORT LIQ	\$0 (Tier 3) DP
APATATE LIQ	\$0 (Tier 3) DP
AQUADEKS CHW	\$0 (Tier 3) DP
<i>aquadeks dro</i>	\$0 (Tier 3) DP
AQUASOL A INJ 50000/ML	\$0 (Tier 3) DP
<i>aqueous e dro 15/0.3ml</i>	\$0 (Tier 3) DP
<i>ascorbic acid cap er 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid chew tab 250 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid chew tab 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 250 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 500 mg</i>	\$0 (Tier 3) DP
<i>ascorbic acid tab 1000 mg</i>	\$0 (Tier 3) DP
B-12 DOTS TAB 500MCG	\$0 (Tier 3) DP
<i>b-complex vitamin cap</i>	\$0 (Tier 3) DP
<i>b-complex vitamin tab</i>	\$0 (Tier 3) DP
<i>b-complex w/ c & calcium tab</i>	\$0 (Tier 3) DP
<i>b-complex w/ c tab</i>	\$0 (Tier 3) DP
<i>biotin cap 5 mg</i>	\$0 (Tier 3) DP
<i>biotin tab 5 mg</i>	\$0 (Tier 3) DP
<i>biotin tab 300 mcg</i>	\$0 (Tier 3) DP
<i>c 250 tab</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>c-500 chw 500mg</i>	\$0 (Tier 3) DP
<i>c-1000/rh tab 1000mg</i>	\$0 (Tier 3) DP
<i>c/rosehip tr tab 1000mg</i>	\$0 (Tier 3) DP
<i>ca citrate + tab</i>	\$0 (Tier 3) DP
<i>cal-mag-zinc tab +d3</i>	\$0 (Tier 3) DP
<i>calciferol dro 8000/ml</i>	\$0 (Tier 3) DP
<i>calcitriol cap 0.5 mcg</i>	\$0 (Tier 1) B/D
<i>calcitriol cap 0.25 mcg</i>	\$0 (Tier 1) B/D
<i>calcitriol inj 1 mcg/ml</i>	\$0 (Tier 1) B/D
<i>calcitriol oral soln 1 mcg/ml</i>	\$0 (Tier 1) B/D
<i>centamin liq</i>	\$0 (Tier 3) DP
<i>centavite liq</i>	\$0 (Tier 3) DP
<i>century tab</i>	\$0 (Tier 3) DP
<i>century tab mature</i>	\$0 (Tier 3) DP
<i>cerovite jr chw</i>	\$0 (Tier 3) DP
<i>cerovite tab advanced</i>	\$0 (Tier 3) DP
<i>cerovite tab senior</i>	\$0 (Tier 3) DP
CERTAVITE TAB SENIOR	\$0 (Tier 3) DP
<i>certavite/ tab antioxid</i>	\$0 (Tier 3) DP
<i>chewabl vite chw childrns</i>	\$0 (Tier 3) DP
<i>chewable c chw 500mg</i>	\$0 (Tier 3) DP
<i>child chew chw iron</i>	\$0 (Tier 3) DP
<i>child chew chw vitamins</i>	\$0 (Tier 3) DP
<i>child chew/ chw extra c</i>	\$0 (Tier 3) DP
<i>childrens chw /iron</i>	\$0 (Tier 3) DP
CHILDRENS CHW COMPLETE	\$0 (Tier 3) DP
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 10 mcg (400 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 25 mcg (1000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 50 mcg (2000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol cap 250 mcg (10000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 10 mcg (400 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	\$0 (Tier 3) DP
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	\$0 (Tier 3) DP
CL PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
<i>cod liver cap</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>cod liver oil cap</i>	\$0 (Tier 3) DP
COD LIVER OIL OIL	\$0 (Tier 3) DP
<i>compete tab</i>	\$0 (Tier 3) DP
<i>complete tab</i>	\$0 (Tier 3) DP
<i>complete tab senior</i>	\$0 (Tier 3) DP
<i>cyanocobalamin inj 1000 mcg/ml</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 100 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 250 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 500 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab 1000 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab er 1000 mcg</i>	\$0 (Tier 3) DP
<i>cyanocobalamin tab er 2000 mcg</i>	\$0 (Tier 3) DP
<i>d3 cap 1000unit</i>	\$0 (Tier 3) DP
<i>d3 super str cap 2000unit</i>	\$0 (Tier 3) DP
<i>d 400 tab 400unit</i>	\$0 (Tier 3) DP
<i>daily vit tab</i>	\$0 (Tier 3) DP
<i>daily-vite tab</i>	\$0 (Tier 3) DP
<i>daily-vite/ tab iron</i>	\$0 (Tier 3) DP
DIALYVIT 800 TAB ZINC 15	\$0 (Tier 3) DP
<i>dialyvite d cap 5000unit</i>	\$0 (Tier 3) DP
<i>dialyvite tab 800</i>	\$0 (Tier 3) DP
<i>dialyvite tab 800/d</i>	\$0 (Tier 3) DP
DIALYVITE TAB 800/ZINC	\$0 (Tier 3) DP
<i>e-400 cap 400unit</i>	\$0 (Tier 3) DP
<i>ecee plus tab</i>	\$0 (Tier 3) DP
<i>eldertonic liq</i>	\$0 (Tier 3) DP
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	\$0 (Tier 3) DP
<i>ergocalciferol soln 200 mcg/ml (8000 unit/ml)</i>	\$0 (Tier 3) DP
<i>essentl one tab daily</i>	\$0 (Tier 3) DP
<i>ester-c tab 500mg</i>	\$0 (Tier 3) DP
EZFE FORTE CAP	\$0 (Tier 3) DP
FOLGARD TAB	\$0 (Tier 3) DP
<i>folic acid inj 5 mg/ml</i>	\$0 (Tier 3) DP
<i>folic acid tab 1 mg</i>	\$0 (Tier 3) DP
<i>folic acid tab 400 mcg</i>	\$0 (Tier 3) DP
<i>folic acid tab 400mcg</i>	\$0 (Tier 3) DP
<i>folic acid tab 800 mcg</i>	\$0 (Tier 3) DP
FOSFREE TAB	\$0 (Tier 3) DP

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ICAPS AREDS TAB FORMULA	\$0 (Tier 3) DP
<i>icaps cap</i>	\$0 (Tier 3) DP
<i>icaps lutein cap /omega-3</i>	\$0 (Tier 3) DP
ICAPS LUTEIN TAB ZEAXANTH	\$0 (Tier 3) DP
<i>icaps mv tab</i>	\$0 (Tier 3) DP
ICAPS PLUS TAB	\$0 (Tier 3) DP
ICAR PEDS SUS GRAPE	\$0 (Tier 3) DP
ICAR-C TAB	\$0 (Tier 3) DP
INFUVITE INJ	\$0 (Tier 3) DP
INFUVITE INJ ADULT	\$0 (Tier 3) DP
INFUVITE INJ PEDIATRI	\$0 (Tier 3) DP
M-NATAL PLUS TAB	\$0 (Tier 2)
M.V.I PEDIAT INJ	\$0 (Tier 3) DP
<i>maximum d3 cap 325mcg</i>	\$0 (Tier 3) DP
<i>mega multi tab men</i>	\$0 (Tier 3) DP
<i>mega multi tab women</i>	\$0 (Tier 3) DP
MEGA MULTIVI TAB MEN	\$0 (Tier 3) DP
MEGA MULTIVI TAB WOMEN	\$0 (Tier 3) DP
MEPHYTON TAB 5MG	\$0 (Tier 3) DP
<i>mult vitamin tab essent</i>	\$0 (Tier 3) DP
<i>mult vitamin tab mens</i>	\$0 (Tier 3) DP
<i>mult vitamin tab womens</i>	\$0 (Tier 3) DP
<i>multi-delyn liq</i>	\$0 (Tier 3) DP
MULTI-DELYN LIQ /IRON	\$0 (Tier 3) DP
<i>multi-vitam tab</i>	\$0 (Tier 3) DP
<i>multilex tab</i>	\$0 (Tier 3) DP
<i>multilex-t&m tab</i>	\$0 (Tier 3) DP
<i>multiple vitamins w/ minerals tab</i>	\$0 (Tier 3) DP
<i>nail-ex tab 2.5mg</i>	\$0 (Tier 3) DP
NASCOBAL SPR 500MCG	\$0 (Tier 3) DP
NEPHRO-VITE TAB	\$0 (Tier 3) DP
NEPHRONEX LIQ 0.9/5ML	\$0 (Tier 3) DP
<i>niacin cap 500mg</i>	\$0 (Tier 3) DP
<i>niacin cap er 250 mg</i>	\$0 (Tier 3) DP
<i>niacin cap er 500 mg</i>	\$0 (Tier 3) DP
NIACIN POW	\$0 (Tier 3) DP
<i>niacin tab 100 mg</i>	\$0 (Tier 3) DP
<i>niacin tab 500 mg</i>	\$0 (Tier 3) DP
<i>niacin tab er 500 mg</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>niacin tab er 750 mg</i>	\$0 (Tier 3) DP
NIACIN TR TAB 1000MG	\$0 (Tier 3) DP
NIACINAMIDE POW	\$0 (Tier 3) DP
<i>niacinamide tab 500 mg</i>	\$0 (Tier 3) DP
<i>nutr-e-sol liq 400/15ml</i>	\$0 (Tier 3) DP
OCUVITE CAP ADULT	\$0 (Tier 3) DP
<i>ocuvite tab lutein</i>	\$0 (Tier 3) DP
<i>ocuvite xtra tab</i>	\$0 (Tier 3) DP
<i>once daily tab</i>	\$0 (Tier 3) DP
<i>once daily tab iron</i>	\$0 (Tier 3) DP
ONCOVITE TAB	\$0 (Tier 3) DP
<i>one daily tab</i>	\$0 (Tier 3) DP
<i>one daily tab maximum</i>	\$0 (Tier 3) DP
<i>one daily tab men 50+</i>	\$0 (Tier 3) DP
<i>one daily tab mens</i>	\$0 (Tier 3) DP
<i>one daily tab mens 50+</i>	\$0 (Tier 3) DP
<i>one daily tab pls iron</i>	\$0 (Tier 3) DP
<i>one daily tab wom 50+</i>	\$0 (Tier 3) DP
<i>one daily tab womens</i>	\$0 (Tier 3) DP
OPCON-A SOL OP	\$0 (Tier 3) DP
<i>paricalcitol cap 1 mcg</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 2 mcg</i>	\$0 (Tier 1) B/D
<i>paricalcitol cap 4 mcg</i>	\$0 (Tier 1) B/D
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	\$0 (Tier 3) DP
<i>phytonadione inj 10 mg/ml</i>	\$0 (Tier 3) DP
<i>phytonadione tab 5 mg</i>	\$0 (Tier 3) DP
PNV FOLIC AC TAB + IRON	\$0 (Tier 2)
<i>poly vitamin chw</i>	\$0 (Tier 3) DP
POLY-VI-SOL SOL IRON	\$0 (Tier 3) DP
<i>poly-vite sol /iron</i>	\$0 (Tier 3) DP
<i>polyvitamin chw /iron</i>	\$0 (Tier 3) DP
PRENATAL PLUS	\$0 (Tier 2)
PRENATAL TAB	\$0 (Tier 3) DP
PRENATAL TAB 27-0.8MG	\$0 (Tier 3) DP
PRENATAL TAB 27-1MG	\$0 (Tier 2)
PRENATAL TAB 28-0.8MG	\$0 (Tier 3) DP
PRENATAL TAB LOW IRON	\$0 (Tier 3) DP
PRENATAL TAB PLUS	\$0 (Tier 2)
PRENATAL VIT TAB LOW IRON	\$0 (Tier 2)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
PRESERVISION CAP AREDS	\$0 (Tier 3) DP
PRESERVISION CAP AREDS 2	\$0 (Tier 3) DP
PRESERVISION CAP LUTEIN	\$0 (Tier 3) DP
PRESERVISION TAB AREDS	\$0 (Tier 3) DP
<i>prosight tab</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl inj 100 mg/ml</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 25 mg</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>pyridoxine hcl tab 100 mg</i>	\$0 (Tier 3) DP
<i>qc therin-m tab</i>	\$0 (Tier 3) DP
RAYALDEE CAP 30MCG	\$0 (Tier 2) NDS
<i>rena-vite tab</i>	\$0 (Tier 3) DP
<i>sentry tab</i>	\$0 (Tier 3) DP
<i>sentry tab senior</i>	\$0 (Tier 3) DP
<i>slo-niacin tab 250mg cr</i>	\$0 (Tier 3) DP
SLO-NIACIN TAB 500MG CR	\$0 (Tier 3) DP
SLO-NIACIN TAB 750MG CR	\$0 (Tier 3) DP
<i>sm animal chw shapes</i>	\$0 (Tier 3) DP
<i>sm balanced tab b-50</i>	\$0 (Tier 3) DP
<i>sm balanced tab b-100</i>	\$0 (Tier 3) DP
<i>sm complete tab</i>	\$0 (Tier 3) DP
<i>sm complete tab adv form</i>	\$0 (Tier 3) DP
<i>sm complete tab senior</i>	\$0 (Tier 3) DP
<i>sm folic acd tab 400mcg</i>	\$0 (Tier 3) DP
<i>sm multiple tab vit/iron</i>	\$0 (Tier 3) DP
<i>sm multiple tab vitamins</i>	\$0 (Tier 3) DP
<i>sm opti-vita tab</i>	\$0 (Tier 3) DP
SM PRENATAL TAB VITAMINS	\$0 (Tier 3) DP
<i>sm vit b-6 tab 100mg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 100mcg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 500mcg</i>	\$0 (Tier 3) DP
<i>sm vit b-12 tab 1000 tr</i>	\$0 (Tier 3) DP
<i>sm vit c/rh tab 1000mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c chw 500mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c tab 250mg</i>	\$0 (Tier 3) DP
<i>sm vitamin c tab 1000mg</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 200unit</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 400unit</i>	\$0 (Tier 3) DP
<i>sm vitamin e cap 1000unit</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>stress form/ tab zinc</i>	\$0 (Tier 3) DP
<i>stress formu tab</i>	\$0 (Tier 3) DP
<i>stress formu tab w/iron</i>	\$0 (Tier 3) DP
STUART ONE CAP	\$0 (Tier 3) DP
<i>super b comp tab vit c</i>	\$0 (Tier 3) DP
<i>super liq nu-thera</i>	\$0 (Tier 3) DP
SUPER POW NU-THERA	\$0 (Tier 3) DP
<i>super tab nu-thera</i>	\$0 (Tier 3) DP
<i>super vikaps tab</i>	\$0 (Tier 3) DP
<i>superplex-t tab</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab /iron</i>	\$0 (Tier 3) DP
<i>tab-a-vite tab beta car</i>	\$0 (Tier 3) DP
THERA M PLUS TAB	\$0 (Tier 3) DP
<i>thera tab</i>	\$0 (Tier 3) DP
THERA TAB	\$0 (Tier 3) DP
<i>thera-m tab</i>	\$0 (Tier 3) DP
THERA-M TAB	\$0 (Tier 3) DP
THERAPEUTIC SOL	\$0 (Tier 3) DP
<i>therapeutic- tab m</i>	\$0 (Tier 3) DP
<i>therems tab</i>	\$0 (Tier 3) DP
THEREMS-H TAB	\$0 (Tier 3) DP
THEREMS-M TAB	\$0 (Tier 3) DP
<i>thiamine hcl inj 100 mg/ml</i>	\$0 (Tier 3) DP
THIAMINE HCL POW	\$0 (Tier 3) DP
<i>thiamine hcl tab 50 mg</i>	\$0 (Tier 3) DP
<i>thiamine hcl tab 100 mg</i>	\$0 (Tier 3) DP
<i>total b/c tab</i>	\$0 (Tier 3) DP
TRICARE TAB PRENATAL	\$0 (Tier 2)
UNICOMPLEX-M TAB	\$0 (Tier 3) DP
<i>vita-bee/c tab</i>	\$0 (Tier 3) DP
<i>vitamin a cap 3 mg (10000 unit)</i>	\$0 (Tier 3) DP
<i>vitamin a cap 8000unit</i>	\$0 (Tier 3) DP
<i>vitamin b12 tab 1000mcg</i>	\$0 (Tier 3) DP
<i>vitamin c tab 500mg</i>	\$0 (Tier 3) DP
<i>vitamin c tab 500mg tr</i>	\$0 (Tier 3) DP
<i>vitamin d3 dro 400unit</i>	\$0 (Tier 3) DP
<i>vitamin d3 tab 1000unit</i>	\$0 (Tier 3) DP
<i>vitamin d3 tab 50000unt</i>	\$0 (Tier 3) DP

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

OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS

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

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

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

AZASITE SOL 1%	\$0 (Tier 2)
<i>bacitracin ophth oint 500 unit/gm</i>	\$0 (Tier 1)
<i>bacitracin-polymyxin b ophth oint</i>	\$0 (Tier 1)
BESIVANCE SUS 0.6%	\$0 (Tier 2)
CILOXAN OIN 0.3% OP	\$0 (Tier 2)
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	\$0 (Tier 1)
<i>erythromycin ophth oint 5 mg/gm</i>	\$0 (Tier 1)

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

ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>prednisolone acetate ophth susp 1%</i>	\$0 (Tier 1)
PROLENSA SOL 0.07%	\$0 (Tier 2)
ANTIALLERGICS - DRUGS TO TREAT ALLERGIES	
<i>azelastine hcl ophth soln 0.05%</i>	\$0 (Tier 1)
BEPREVE DRO 1.5%	\$0 (Tier 2)
<i>cromolyn sodium ophth soln 4%</i>	\$0 (Tier 1)
<i>eye allergy sol relief</i>	\$0 (Tier 3) DP
LASTACFT SOL 0.25%	\$0 (Tier 2)
NAPHCONE-A SOL OP	\$0 (Tier 3) DP
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	\$0 (Tier 1)
PAZEO DRO 0.7%	\$0 (Tier 2)
ZERVIAE DRO 0.24%	\$0 (Tier 2)
ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA	
ALPHAGAN P SOL 0.1%	\$0 (Tier 2)
AZOPT SUS 1% OP	\$0 (Tier 2)
<i>betaxolol hcl ophth soln 0.5%</i>	\$0 (Tier 1)
BETOPTIC-S SUS 0.25% OP	\$0 (Tier 2)
<i>brimonidine tartrate ophth soln 0.2%</i>	\$0 (Tier 1)
<i>brimonidine tartrate ophth soln 0.15%</i>	\$0 (Tier 1)
<i>carteolol hcl ophth soln 1%</i>	\$0 (Tier 1)
COMBIGAN SOL 0.2/0.5%	\$0 (Tier 2)
<i>dorzolamide hcl ophth soln 2%</i>	\$0 (Tier 1)
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	\$0 (Tier 1)
<i>latanoprost ophth soln 0.005%</i>	\$0 (Tier 1)
<i>levobunolol hcl ophth soln 0.5%</i>	\$0 (Tier 1)
LUMIGAN SOL 0.01%	\$0 (Tier 2)
PHOSPHOLINE SOL 0.125%OP	\$0 (Tier 2)
<i>pilocarpine hcl ophth soln 1%</i>	\$0 (Tier 1)
<i>pilocarpine hcl ophth soln 2%</i>	\$0 (Tier 1)
<i>pilocarpine hcl ophth soln 4%</i>	\$0 (Tier 1)
RHOPRESSA SOL 0.02%	\$0 (Tier 2)
SIMBRINZA SUS 1-0.2%	\$0 (Tier 2)
<i>timolol maleate ophth gel forming soln 0.5%</i>	\$0 (Tier 1)
<i>timolol maleate ophth gel forming soln 0.25%</i>	\$0 (Tier 1)
<i>timolol maleate ophth soln 0.5%</i>	\$0 (Tier 1)

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

\$0 (Tier 1)

timolol maleate ophth soln 0.25%

\$0 (Tier 1)

*travoprost ophth soln 0.004%
(benzalkonium free) (bak free)*

\$0 (Tier 1)

MISCELLANEOUS

ATROPINE SUL SOL 1% OP

\$0 (Tier 2)

CYSTARAN SOL 0.44%

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

proparacaine hcl ophth soln 0.5%

\$0 (Tier 1)

RESTASIS EMU 0.05%

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

RESTASIS MUL EMU 0.05%

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

RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD

ANORO ELLIPT AER 62.5-25

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

BEVESPI AER 9-4.8MCG

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

COMBIVENT AER 20-100

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

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

\$0 (Tier 1) B/D

TRELEGY AER ELLIPTA

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

ANTICHOLINERGICS - DRUGS TO TREAT COPD

ATROVENT HFA AER 17MCG

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

INCRUSE ELPT INH 62.5MCG

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

ipratropium bromide inhal soln 0.02%

\$0 (Tier 1) B/D

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

\$0 (Tier 1)

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

\$0 (Tier 1)

ANTI-HISTAMINES - DRUGS TO TREAT ALLERGIES

all day allg sol 1mg/ml

\$0 (Tier 3) DP

all day allg sol 5mg/5ml

\$0 (Tier 3) DP

all day allg tab 10mg

\$0 (Tier 3) DP

aller-chlor tab 4mg

\$0 (Tier 3) DP

aller-ease tab 60mg

\$0 (Tier 3) DP

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

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>mucinex allr tab 180mg</i>	\$0 (Tier 3) DP
<i>pharbecchlor tab 4mg</i>	\$0 (Tier 3) DP
<i>pharbedryl cap 25mg</i>	\$0 (Tier 3) DP
<i>pharbedryl cap 50mg</i>	\$0 (Tier 3) DP
<i>qc allergy tab 10mg</i>	\$0 (Tier 3) DP
<i>siladryl alr liq 12.5/5ml</i>	\$0 (Tier 3) DP
<i>sm all day tab allergy</i>	\$0 (Tier 3) DP
<i>sm allergy tab 4mg</i>	\$0 (Tier 3) DP
<i>sm allergy tab 25mg rlf</i>	\$0 (Tier 3) DP

BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>terbutaline sulfate tab 5 mg</i>	\$0 (Tier 1)
VENTOLIN HFA AER	\$0 (Tier 2) QL (2 inhalers / 30 days)

COUGH AND COLD

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

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	\$0 (Tier 3) DP
<i>pseudoephedr tab 120mg er</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab 30 mg</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab 60 mg</i>	\$0 (Tier 3) DP
<i>pseudoephedrine hcl tab er 12hr 120 mg</i>	\$0 (Tier 3) DP
<i>qc suphedrin tab 120mg sr</i>	\$0 (Tier 3) DP
<i>ra cough dm sus 30mg/5ml</i>	\$0 (Tier 3) DP
REFENESEN TAB CHST CNG	\$0 (Tier 3) DP
<i>robafen dm syp 100-10/5</i>	\$0 (Tier 3) DP
<i>robafen syp 100/5ml</i>	\$0 (Tier 3) DP
RYDEX LIQ	\$0 (Tier 3) DP
<i>rynex pse liq</i>	\$0 (Tier 3) DP
<i>sb cgh contr liq dm</i>	\$0 (Tier 3) DP
<i>siltuss das liq 100/5ml</i>	\$0 (Tier 3) DP
<i>siltussin dm liq das</i>	\$0 (Tier 3) DP
<i>siltussin sa syp 100/5ml</i>	\$0 (Tier 3) DP
<i>siltussin-dm liq diabetic</i>	\$0 (Tier 3) DP
<i>siltussin-dm liq max st</i>	\$0 (Tier 3) DP
<i>siltussin-dm syp alc free</i>	\$0 (Tier 3) DP
<i>sm nasal dec tab 30mg</i>	\$0 (Tier 3) DP
<i>sm tussin cf liq</i>	\$0 (Tier 3) DP
<i>sm tussin dm syp 100-10/5</i>	\$0 (Tier 3) DP
<i>sm tussin syp dm</i>	\$0 (Tier 3) DP
<i>sudogest pe tab 10mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 30mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 60mg</i>	\$0 (Tier 3) DP
<i>sudogest tab 120mg er</i>	\$0 (Tier 3) DP
TESSALON PER CAP 100MG	\$0 (Tier 3) DP
<i>trymine cg liq 225-7.5</i>	\$0 (Tier 3) DP
TUSNEL C SYP	\$0 (Tier 3) DP
<i>tusnel diabt liq 10-100/5</i>	\$0 (Tier 3) DP
TUSSICAPS CAP 10-8MG	\$0 (Tier 3) DP
<i>tussin adult liq 100/5ml</i>	\$0 (Tier 3) DP
<i>tussin adult liq cgh/cong</i>	\$0 (Tier 3) DP
<i>tussin adult liq cold</i>	\$0 (Tier 3) DP
<i>tussin cf liq</i>	\$0 (Tier 3) DP
<i>tussin cf liq cgh/cold</i>	\$0 (Tier 3) DP
<i>tussin chest syp 100/5ml</i>	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>tussin dm liq</i>	\$0 (Tier 3) DP
<i>tussin dm liq 100-10/5</i>	\$0 (Tier 3) DP
<i>tussin dm liq max</i>	\$0 (Tier 3) DP
<i>tussin dm syp 100-10/5</i>	\$0 (Tier 3) DP

LEUKOTRIENE MODULATORS

<i>montelukast sodium chew tab 4 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	\$0 (Tier 1)
<i>montelukast sodium tab 10 mg (base equiv)</i>	\$0 (Tier 1)
<i>zafirlukast tab 10 mg</i>	\$0 (Tier 1)
<i>zafirlukast tab 20 mg</i>	\$0 (Tier 1)

MAST CELL STABILIZERS - DRUGS TO TREAT ALLERGIES

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	\$0 (Tier 1) B/D
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MISCELLANEOUS

<i>acetylcysteine inhal soln 10%</i>	\$0 (Tier 1) B/D
<i>acetylcysteine inhal soln 20%</i>	\$0 (Tier 1) B/D
ARALAST NP INJ 500MG	\$0 (Tier 2) NDS, LA, PA
ARALAST NP INJ 1000MG	\$0 (Tier 2) NDS, LA, PA
AYR SALINE KIT NETI RNS	\$0 (Tier 3) DP
AYR SALINE KIT RINSE	\$0 (Tier 3) DP
DALIRESP TAB 250MCG	\$0 (Tier 2)
DALIRESP TAB 500MCG	\$0 (Tier 2)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 1) (generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	\$0 (Tier 1) (generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	\$0 (Tier 1) (generic of EpiPen)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	\$0 (Tier 1) (generic of Adrenaclick)
ESBRIET CAP 267MG	\$0 (Tier 2) NDS, PA
ESBRIET TAB 267MG	\$0 (Tier 2) NDS, PA
ESBRIET TAB 801MG	\$0 (Tier 2) NDS, PA
FASENRA INJ 30MG/ML	\$0 (Tier 2) NDS, LA, PA
FASENRA PEN INJ 30MG/ML	\$0 (Tier 2) NDS, LA, PA
KALYDECO PAK 25MG	\$0 (Tier 2) NDS, PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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KALYDECO PAK 50MG	\$0 (Tier 2) NDS, PA
KALYDECO PAK 75MG	\$0 (Tier 2) NDS, PA
KALYDECO TAB 150MG	\$0 (Tier 2) NDS, PA
NUCALA INJ 100MG	\$0 (Tier 2) NDS, LA, PA
NUCALA INJ 100MG/ML	\$0 (Tier 2) NDS, LA, PA
OFEV CAP 100MG	\$0 (Tier 2) NDS, PA
OFEV CAP 150MG	\$0 (Tier 2) NDS, PA
ORKAMBI GRA 100-125	\$0 (Tier 2) NDS, PA
ORKAMBI GRA 150-188	\$0 (Tier 2) NDS, PA
ORKAMBI TAB 100-125	\$0 (Tier 2) NDS, PA
ORKAMBI TAB 200-125	\$0 (Tier 2) NDS, PA
PROLASTIN-C INJ 1000MG	\$0 (Tier 2) NDS, LA, PA
PULMOZYME SOL 1MG/ML	\$0 (Tier 2) NDS, PA
SYMDEKO TAB 50-75MG	\$0 (Tier 2) NDS, LA, PA
SYMDEKO TAB 100-150	\$0 (Tier 2) NDS, LA, PA
SYMJEPI INJ 0.3MG	\$0 (Tier 2)
SYMJEPI INJ 0.15MG	\$0 (Tier 2)
THEO-24 CAP 100MG CR	\$0 (Tier 2)
THEO-24 CAP 200MG CR	\$0 (Tier 2)
THEO-24 CAP 300MG CR	\$0 (Tier 2)
THEO-24 CAP 400MG ER	\$0 (Tier 2)
<i>theophylline soln 80 mg/15ml</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 300 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 12hr 450 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 24hr 400 mg</i>	\$0 (Tier 1)
<i>theophylline tab er 24hr 600 mg</i>	\$0 (Tier 1)
TRIKAFTA TAB	\$0 (Tier 2) NDS, LA, PA
XOLAIR INJ 75/0.5	\$0 (Tier 2) NDS, LA, PA
XOLAIR INJ 150MG/ML	\$0 (Tier 2) NDS, LA, PA
XOLAIR SOL 150MG	\$0 (Tier 2) NDS, LA, PA
ZEMAIRA INJ 1000MG	\$0 (Tier 2) NDS, LA, PA

NASAL STEROIDS - DRUGS TO TREAT ALLERGIES

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

STERIOD INHALANTS - DRUGS TO TREAT ASTHMA

ARNUITY ELPT INH 50MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ARNUITY ELPT INH 100MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
ARNUITY ELPT INH 200MCG	\$0 (Tier 2) QL (30 inhalations / 30 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	\$0 (Tier 1) B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	\$0 (Tier 1) B/D
FLOVENT DISK AER 50MCG	\$0 (Tier 2) QL (120 inhalations / 30 days)
FLOVENT DISK AER 100MCG	\$0 (Tier 2) QL (120 inhalations / 30 days)
FLOVENT DISK AER 250MCG	\$0 (Tier 2) QL (240 inhalations / 30 days)
FLOVENT HFA AER 44MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
FLOVENT HFA AER 110MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
FLOVENT HFA AER 220MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
PULMICORT INH 90MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)
PULMICORT INH 180MCG	\$0 (Tier 2) QL (2 inhalers / 30 days)

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

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

Drug Name**WHAT THE NECESSARY ACTIONS
DRUG RESTRICTIONS OR
WILL LIMITS ON USE
COST YOU
(TIER
LEVEL)****TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS****DERMATOLOGY, ACNE**

<i>amnesteem cap 10mg</i>	\$0 (Tier 1) PA
<i>amnesteem cap 20mg</i>	\$0 (Tier 1) PA
<i>amnesteem cap 40mg</i>	\$0 (Tier 1) PA
<i>avita cre 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>avita gel 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	\$0 (Tier 1)
<i>claravis cap 10mg</i>	\$0 (Tier 1) PA
<i>claravis cap 20mg</i>	\$0 (Tier 1) PA
<i>claravis cap 30mg</i>	\$0 (Tier 1) PA
<i>claravis cap 40mg</i>	\$0 (Tier 1) PA
<i>clindamycin phosphate gel 1%</i>	\$0 (Tier 1) QL (75 grams / 30 days)
<i>clindamycin phosphate lotion 1%</i>	\$0 (Tier 1)
<i>clindamycin phosphate soln 1%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>erythromycin gel 2%</i>	\$0 (Tier 1)
<i>erythromycin pads 2%</i>	\$0 (Tier 1)
<i>erythromycin soln 2%</i>	\$0 (Tier 1)
<i>isotretinoin cap 10 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 20 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 30 mg</i>	\$0 (Tier 1) PA
<i>isotretinoin cap 40 mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 10mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 20mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 30mg</i>	\$0 (Tier 1) PA
<i>myorisan cap 40mg</i>	\$0 (Tier 1) PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	\$0 (Tier 1)
<i>tretinoin cream 0.1%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin cream 0.05%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin cream 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin gel 0.01%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>tretinoin gel 0.025%</i>	\$0 (Tier 1) QL (45 grams / 30 days), PA
<i>zenatane cap 10mg</i>	\$0 (Tier 1) PA

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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<i>zenatane cap 20mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 30mg</i>	\$0 (Tier 1) PA
<i>zenatane cap 40mg</i>	\$0 (Tier 1) PA

DERMATOLOGY, ANTIBIOTICS

<i>bacitr zinc oin 500/gm</i>	\$0 (Tier 3) DP
<i>bacitracin oin 500/gm</i>	\$0 (Tier 3) DP
<i>bacitracin oint 500 unit/gm</i>	\$0 (Tier 3) DP
<i>bacitracin zinc oint 500 unit/gm</i>	\$0 (Tier 3) DP
<i>gentamicin sulfate cream 0.1%</i>	\$0 (Tier 1)
<i>gentamicin sulfate oint 0.1%</i>	\$0 (Tier 1)
<i>hm triple oin antibiot</i>	\$0 (Tier 3) DP
<i>mupirocin oint 2%</i>	\$0 (Tier 1) QL (220 grams / 30 days)
<i>neomycin-bacitracin-polymyxin oint</i>	\$0 (Tier 3) DP
<i>sb triple oin antibiot</i>	\$0 (Tier 3) DP
<i>silver sulfadiazine cream 1%</i>	\$0 (Tier 1)
<i>sm antibioti oin 500/gm</i>	\$0 (Tier 3) DP
<i>sm triple oin antibiot</i>	\$0 (Tier 3) DP
<i>ssd cre 1%</i>	\$0 (Tier 1)
SULFAMYLON CRE 85MG/GM	\$0 (Tier 2)
<i>tri-biozene oin</i>	\$0 (Tier 3) DP
<i>triple antib oin</i>	\$0 (Tier 3) DP
<i>triple antib oin max st</i>	\$0 (Tier 3) DP
<i>triple antib oin plus</i>	\$0 (Tier 3) DP

DERMATOLOGY, ANTIFUNGALS

<i>anti-fungal cre 1%</i>	\$0 (Tier 3) DP
<i>anti-fungal pow 1%</i>	\$0 (Tier 3) DP
<i>antifungal aer 1%</i>	\$0 (Tier 3) DP
<i>antifungal cre 1%</i>	\$0 (Tier 3) DP
<i>antifungal cre 2%</i>	\$0 (Tier 3) DP
<i>athlete foot cre 1%</i>	\$0 (Tier 3) DP
<i>athlete foot cre af</i>	\$0 (Tier 3) DP
<i>baza antifun cre 2%</i>	\$0 (Tier 3) DP
BENZOIN TIN	\$0 (Tier 3) DP
BENZOIN TIN PLAIN	\$0 (Tier 3) DP
<i>castellani paint</i>	\$0 (Tier 3) DP
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	\$0 (Tier 1) QL (90 grams / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>clotrimazole cre 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole cream 1%</i>	\$0 (Tier 1)
<i>clotrimazole cream 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole soln 1%</i>	\$0 (Tier 1) QL (30 mL / 30 days)
<i>clotrimazole soln 1%</i>	\$0 (Tier 3) DP
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0 (Tier 1)
<i>fungoid-d cre 1%</i>	\$0 (Tier 3) DP
<i>jock itch aer 1%</i>	\$0 (Tier 3) DP
<i>ketoconazole cream 2%</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>miconazole nitrate cream 2%</i>	\$0 (Tier 3) DP
<i>nyamyc pow 100000</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>nystatin cream 100000 unit/gm</i>	\$0 (Tier 1)
<i>nystatin oint 100000 unit/gm</i>	\$0 (Tier 1)
<i>nystatin topical powder 100000 unit/gm</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>nystop pow 100000</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>podactin pow 1%</i>	\$0 (Tier 3) DP
<i>sm antifungr cre 1%</i>	\$0 (Tier 3) DP
<i>sm antifungr cre 2%</i>	\$0 (Tier 3) DP
<i>soothe&cool cre inzo 2%</i>	\$0 (Tier 3) DP
<i>terbinafine cre 1%</i>	\$0 (Tier 3) DP
<i>terbinafine hcl cream 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate cre 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate cream 1%</i>	\$0 (Tier 3) DP
<i>tolnaftate powder 1%</i>	\$0 (Tier 3) DP

DERMATOLOGY, ANTIPSORIATICS

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

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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TAZORAC CRE 0.05%	\$0 (Tier 2) QL (60 grams / 30 days), PA
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DERMATOLOGY, ANTISEBORRHEICS

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

DERMATOLOGY, CORTICOSTEROIDS

<i>ala-cort cre 1%</i>	\$0 (Tier 1)
<i>ala-cort cre 2.5%</i>	\$0 (Tier 1)
<i>alclometasone dipropionate cream 0.05%</i>	\$0 (Tier 1)
<i>alclometasone dipropionate oint 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented cream 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented gel 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate augmented oint 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate cream 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate lotion 0.05%</i>	\$0 (Tier 1)
<i>betamethasone dipropionate oint 0.05%</i>	\$0 (Tier 1)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	\$0 (Tier 1)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	\$0 (Tier 1)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	\$0 (Tier 1)
ENSTILAR AER	\$0 (Tier 2) QL (120 grams / 30 days), PA
<i>fluocinolone acetonide cream 0.01%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide cream 0.025%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	\$0 (Tier 1)
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	\$0 (Tier 1)
<i>fluocinolone acetonide oint 0.025%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide soln 0.01%</i>	\$0 (Tier 1) QL (90 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	\$0 (Tier 1) QL (120 grams / 30 days)
<i>fluocinonide emulsified base cream 0.05%</i>	\$0 (Tier 1) QL (120 grams / 30 days)
<i>fluocinonide gel 0.05%</i>	\$0 (Tier 1) QL (60 grams / 30 days)

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

<i>fluocinonide oint 0.05%</i>	\$0 (Tier 1) QL (60 grams / 30 days)
<i>fluocinonide soln 0.05%</i>	\$0 (Tier 1) QL (60 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	\$0 (Tier 1)
<i>fluticasone propionate oint 0.005%</i>	\$0 (Tier 1)
<i>halobetasol propionate cream 0.05%</i>	\$0 (Tier 1) QL (50 grams / 30 days)
<i>halobetasol propionate oint 0.05%</i>	\$0 (Tier 1) QL (50 grams / 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	\$0 (Tier 1) QL (45 grams / 30 days)
<i>hydrocortisone butyrate oint 0.1%</i>	\$0 (Tier 1) QL (45 grams / 30 days)
<i>hydrocortisone cream 1%</i>	\$0 (Tier 1)
<i>hydrocortisone cream 2.5%</i>	\$0 (Tier 1)
<i>hydrocortisone lotion 2.5%</i>	\$0 (Tier 1)
<i>hydrocortisone oint 2.5%</i>	\$0 (Tier 1)
<i>mometasone furoate cream 0.1%</i>	\$0 (Tier 1)
<i>mometasone furoate oint 0.1%</i>	\$0 (Tier 1)
<i>mometasone furoate solution 0.1% (lotion)</i>	\$0 (Tier 1)
TEXACORT SOL 2.5%	\$0 (Tier 2)
<i>triamcinolone acetonide cream 0.1%</i>	\$0 (Tier 1) QL (454 grams / 30 days)
<i>triamcinolone acetonide cream 0.5%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide cream 0.025%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide lotion 0.1%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide lotion 0.025%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.1%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.5%</i>	\$0 (Tier 1)
<i>triamcinolone acetonide oint 0.025%</i>	\$0 (Tier 1)

DERMATOLOGY, LOCAL ANESTHETICS

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

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

ACESULFAME POW POTASSIU	\$0 (Tier 3) DP
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
ACETIC ACID SOL 3%	\$0 (Tier 3) DP
ACETIC ACID SOL GLACIAL	\$0 (Tier 3) DP
ACETYL-L-CAR POW HCL	\$0 (Tier 3) DP
ALLANTOIN POW	\$0 (Tier 3) DP
ALMOND OIL SWEET	\$0 (Tier 3) DP
ALUM AMMONIU POW	\$0 (Tier 3) DP
ALUMINUM CL CRY	\$0 (Tier 3) DP
ALUMINUM POW HYDROXID	\$0 (Tier 3) DP
<i>amlactin lot 12%</i>	\$0 (Tier 3) DP
AMMONIUM GRA CHLORIDE	\$0 (Tier 3) DP
AMMONIUM POW ALUMINUM	\$0 (Tier 3) DP
ARGININE HCL POW	\$0 (Tier 3) DP
ASCORBIC ACD GRA	\$0 (Tier 3) DP
ASCORBIC ACD POW	\$0 (Tier 3) DP
ASCORBYL POW PALMITAT	\$0 (Tier 3) DP
AZ CREAM CRE	\$0 (Tier 3) DP
BETAINE POW ANHYDROU	\$0 (Tier 3) DP
BIOFLAVINOID POW LEMON	\$0 (Tier 3) DP
BIOFLAVONOID POW CITRUS	\$0 (Tier 3) DP
BISMUTH POW SUBNITRA	\$0 (Tier 3) DP
BISMUTH SUBC POW	\$0 (Tier 3) DP
BORIC ACID GRA	\$0 (Tier 3) DP
BORIC ACID POW	\$0 (Tier 3) DP
CALAMINE LOT	\$0 (Tier 3) DP
CALAMINE LOT 8-8%	\$0 (Tier 3) DP
CALAMINE LOT PHENOLAT	\$0 (Tier 3) DP
CALCIUM POW CITRATE	\$0 (Tier 3) DP
CALCIUM POW HYDROXID	\$0 (Tier 3) DP
CALCIUM POW SACCHARA	\$0 (Tier 3) DP
CAMPHOR CRY	\$0 (Tier 3) DP
<i>capsaicin cre 0.1%</i>	\$0 (Tier 3) DP
<i>capsaicin cream 0.025%</i>	\$0 (Tier 3) DP
CAPSAICIN LIQ 0.15%	\$0 (Tier 3) DP
CARBOMER POW HOMOPOLY	\$0 (Tier 3) DP
CARBOXYMETHY POW SODIUM	\$0 (Tier 3) DP
CHLOROFORM SOL	\$0 (Tier 3) DP
CHOLESTEROL POW ACETATE	\$0 (Tier 3) DP
CHRYSLIN POW	\$0 (Tier 3) DP
CITRIC ACID GRA ANHYDROU	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
CITRIC ACID GRA MONOHYDR	\$0 (Tier 3) DP
CITRIC ACID POW ANHYDROU	\$0 (Tier 3) DP
CLORPACTIN POW WCS-90	\$0 (Tier 3) DP
CLOVE OIL	\$0 (Tier 3) DP
COAL TAR SOL 20%	\$0 (Tier 3) DP
COCONUT OIL	\$0 (Tier 3) DP
COENZYME Q10 POW	\$0 (Tier 3) DP
CORN STARCH POW	\$0 (Tier 3) DP
COTTONSEED OIL	\$0 (Tier 3) DP
CREATINE POW MONOHYDR	\$0 (Tier 3) DP
CROTON OIL	\$0 (Tier 3) DP
D-VITAMIN E POW SUCCINAT	\$0 (Tier 3) DP
<i>diclofenac sodium gel 1%</i>	\$0 (Tier 1) QL (1000 grams / 30 days), PA
ETHOXY ETHNL LIQ REAGENT	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 95%	\$0 (Tier 3) DP
ETHYL ALCOHO SOL 95% USP	\$0 (Tier 3) DP
ETHYL ALCOHO SOL SDA 95%	\$0 (Tier 3) DP
ETHYL OLEATE LIQ	\$0 (Tier 3) DP
EUGENOL SOL	\$0 (Tier 3) DP
FERRIC POW SUBSULFA	\$0 (Tier 3) DP
FERRIC SUBSU SOL	\$0 (Tier 3) DP
<i>fluorouracil cream 5%</i>	\$0 (Tier 1) QL (40 grams / 30 days)
<i>fluorouracil soln 2%</i>	\$0 (Tier 1) QL (10 mL / 30 days)
<i>fluorouracil soln 5%</i>	\$0 (Tier 1) QL (10 mL / 30 days)
FORMALDEHYDE SOL 37%	\$0 (Tier 3) DP
FREE & CLEAR SHA	\$0 (Tier 3) DP
FULLERS POW EARTH	\$0 (Tier 3) DP
GLUCOSAMINE POW HCL	\$0 (Tier 3) DP
GLUCOSAMINE POW SULFATE	\$0 (Tier 3) DP
GLYCERIN LIQ	\$0 (Tier 3) DP
GLYCOLIC ACD CRY	\$0 (Tier 3) DP
GLYCOLIC ACD SOL 70%	\$0 (Tier 3) DP
GRAPE SEED OIL	\$0 (Tier 3) DP
GREEN TEA EX LIQ 90%	\$0 (Tier 3) DP
HYDROCHL ACD LIQ 37%	\$0 (Tier 3) DP
<i>hydrocortisone perianal cream 2.5%</i>	\$0 (Tier 1)
ICHTHAMMOL POW	\$0 (Tier 3) DP
<i>imiquimod cream 5%</i>	\$0 (Tier 1) QL (24 packets / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
INDOLE-3- POW CARBINOL	\$0 (Tier 3) DP
INOSITOL POW HEXANICO	\$0 (Tier 3) DP
IODINE CRY RESUBLIM	\$0 (Tier 3) DP
ISOPROPYL LIQ PALMITAT	\$0 (Tier 3) DP
JESSNERS SOL	\$0 (Tier 3) DP
KOJIC ACID POW	\$0 (Tier 3) DP
L-CITRULLINE POW	\$0 (Tier 3) DP
LAC-HYDRIN LOT 12%	\$0 (Tier 3) DP
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 1)
<i>lactic acid (ammonium lactate) cream 12%</i>	\$0 (Tier 3) DP
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 1)
<i>lactic acid (ammonium lactate) lotion 12%</i>	\$0 (Tier 3) DP
LACTIC ACID SOL	\$0 (Tier 3) DP
LIPOIC ACID POW	\$0 (Tier 3) DP
LIPOVAN BASE CRE	\$0 (Tier 3) DP
MAG CITRATE POW TRIBASIC	\$0 (Tier 3) DP
MALIC ACID POW	\$0 (Tier 3) DP
METHYL SULF CRY	\$0 (Tier 3) DP
<i>metronidazole cream 0.75%</i>	\$0 (Tier 1)
<i>metronidazole gel 0.75%</i>	\$0 (Tier 1)
<i>metronidazole lotion 0.75%</i>	\$0 (Tier 1)
NA PHOS MONO POW ANHYDROU	\$0 (Tier 3) DP
NEW SKIN AER	\$0 (Tier 3) DP
OIL-ALMOND OIL SWEET	\$0 (Tier 3) DP
OIL-COCONUT OIL	\$0 (Tier 3) DP
ORNITHINE POW HCL	\$0 (Tier 3) DP
OXALIC ACID CRY	\$0 (Tier 3) DP
PANRETIN GEL 0.1%	\$0 (Tier 2) NDS, QL (60 grams / 30 days)
PENTRAVAN CRE	\$0 (Tier 3) DP
PENTRAVAN CRE PLUS	\$0 (Tier 3) DP
PERUVIAN LIQ BALSAM	\$0 (Tier 3) DP
PHENOL LIQ	\$0 (Tier 3) DP
PHOSPHATIDYL POW 20%	\$0 (Tier 3) DP
PICATO GEL 0.05%	\$0 (Tier 2) QL (2 tubes / 30 days)
PICATO GEL 0.015%	\$0 (Tier 2) QL (3 tubes / 30 days)
<i>podofilox soln 0.5%</i>	\$0 (Tier 1)
POLYSORBATE SOL 20	\$0 (Tier 3) DP
POT GLUCONAT POW ANHYDROU	\$0 (Tier 3) DP

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
POT HYDROXID SOL 10%	\$0 (Tier 3) DP
POT HYDROXID SOL 20%	\$0 (Tier 3) DP
POT NITRATE GRA	\$0 (Tier 3) DP
POT NITRATE GRA PURIFIED	\$0 (Tier 3) DP
POTASSIUM CRY BROMIDE	\$0 (Tier 3) DP
POTASSIUM CRY IODIDE	\$0 (Tier 3) DP
POTASSIUM MIS HYDROXID	\$0 (Tier 3) DP
<i>procto-med cre hc 2.5%</i>	\$0 (Tier 1)
<i>procto-pak cre 1%</i>	\$0 (Tier 1)
<i>proctozone cre -hc 2.5%</i>	\$0 (Tier 1)
PX CALAMINE LOT	\$0 (Tier 3) DP
PYRUVIC ACID LIQ	\$0 (Tier 3) DP
RA CALAMINE LOT	\$0 (Tier 3) DP
RECTIV OIN 0.4%	\$0 (Tier 2) QL (30 grams / 30 days)
RED YEAST POW RICE	\$0 (Tier 3) DP
RESORCINOL POW	\$0 (Tier 3) DP
<i>rosadan cre 0.75%</i>	\$0 (Tier 1)
SAFFLOWER OIL	\$0 (Tier 3) DP
SM CALAMINE LOT	\$0 (Tier 3) DP
SM CALAMINE LOT PHENOLAT	\$0 (Tier 3) DP
SOD BROMIDE GRA	\$0 (Tier 3) DP
SOD METABISU GRA ANHYDR	\$0 (Tier 3) DP
SOD PERBORAT CRY	\$0 (Tier 3) DP
SOD PHOSPHAT GRA DIBASIC	\$0 (Tier 3) DP
SOD PROPION POW	\$0 (Tier 3) DP
SOD SULFITE POW ANHYDROU	\$0 (Tier 3) DP
SODIUM BORAT POW	\$0 (Tier 3) DP
SODIUM CITRA GRA DIHYDRAT	\$0 (Tier 3) DP
SODIUM MIS HYDROXID	\$0 (Tier 3) DP
SODIUM POW BICARBON	\$0 (Tier 3) DP
SOYBEAN OIL	\$0 (Tier 3) DP
SQUARIC ACID LIQ BUTANOL	\$0 (Tier 3) DP
SQUARIC ACID POW DI-N-BUT	\$0 (Tier 3) DP
STEVIA POW EXTRACT	\$0 (Tier 3) DP
SULFUR POW	\$0 (Tier 3) DP
SULFUR POW PRECIPIT	\$0 (Tier 3) DP
<i>tacrolimus oint 0.1%</i>	\$0 (Tier 1) QL (100 grams / 30 days)
<i>tacrolimus oint 0.03%</i>	\$0 (Tier 1) QL (100 grams / 30 days)

Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
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TALC POW	\$0 (Tier 3) DP
TANNIC ACID POW	\$0 (Tier 3) DP
TARGRETIN GEL 1%	\$0 (Tier 2) NDS, QL (60 grams / 30 days), PA
TARTARIC ACD GRA	\$0 (Tier 3) DP
THYMOL CRY	\$0 (Tier 3) DP
TURPENTINE LIQ SPIRITS	\$0 (Tier 3) DP
UNDECYLENIC LIQ ACID	\$0 (Tier 3) DP
UREA BEA	\$0 (Tier 3) DP
UREA POW PEROXIDE	\$0 (Tier 3) DP
VALCHLOR GEL 0.016%	\$0 (Tier 2) NDS, QL (60 grams / 30 days), LA, PA
VEEGUM MIS LUMP	\$0 (Tier 3) DP
VITAMIN K-1 POW	\$0 (Tier 3) DP
XYLITOL POW	\$0 (Tier 3) DP
ZINC CHLORID GRA	\$0 (Tier 3) DP
ZINC OXIDE POW	\$0 (Tier 3) DP
zostrix hp cre 0.1%	\$0 (Tier 3) DP
ZOSTRIX NAT CRE 0.033%	\$0 (Tier 3) DP

DERMATOLOGY, SCABICIDES AND PEDICULIDES

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

DERMATOLOGY, WOUND CARE AGENTS

<i>acetic acid irrigation soln 0.25%</i>	\$0 (Tier 1)
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Drug Name	WHAT THE NECESSARY ACTIONS DRUG RESTRICTIONS OR WILL LIMITS ON USE COST YOU (TIER LEVEL)
REGRANEX GEL 0.01%	\$0 (Tier 2) NDS, QL (30 grams / 30 days), PA
SANTYL OIN 250/GM	\$0 (Tier 2)
<i>sodium chloride irrigation soln 0.9%</i>	\$0 (Tier 1)
<i>water for irrigation, sterile irrigation soln</i>	\$0 (Tier 1)
MOUTH/THROAT/DENTAL AGENTS	
<i>cevimeline hcl cap 30 mg</i>	\$0 (Tier 1)
<i>chlorhexidine gluconate soln 0.12%</i>	\$0 (Tier 1)
<i>clotrimazole troche 10 mg</i>	\$0 (Tier 1)
<i>lidocaine hcl viscous soln 2%</i>	\$0 (Tier 1)
<i>little teeth gel 7.5%</i>	\$0 (Tier 3) DP
<i>nystatin susp 100000 unit/ml</i>	\$0 (Tier 1)
ORASEP SPR	\$0 (Tier 3) DP
<i>periogard sol 0.12%</i>	\$0 (Tier 1)
<i>periomed con 0.63%</i>	\$0 (Tier 3) DP
<i>pilocarpine hcl tab 5 mg</i>	\$0 (Tier 1)
<i>pilocarpine hcl tab 7.5 mg</i>	\$0 (Tier 1)
<i>triamcinolone acetonide dental paste 0.1%</i>	\$0 (Tier 1)
OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR	
<i>acetic acid otic soln 2%</i>	\$0 (Tier 1)
CIPRODEX SUS 0.3-0.1%	\$0 (Tier 2)
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	\$0 (Tier 1)
<i>flac oil 0.01%</i>	\$0 (Tier 1)
<i>fluocinolone acetonide (otic) oil 0.01%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc otic soln 1%</i>	\$0 (Tier 1)
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	\$0 (Tier 1)
<i>ofloxacin otic soln 0.3%</i>	\$0 (Tier 1)

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<i>allergy relf tab 10mg</i>	135
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<i>allergy tab 4mg</i>	135
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<i>aller-tec tab 10mg</i>	135
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<i>almacone sus</i>	94
<i>ALMOND OIL SWEET</i>	149
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	100
<i>alose tron hcl tab 1 mg (base equiv)</i>	100
<i>ALPHAGAN P SOL 0.1%</i>	133
<i>alprazolam tab 0.25 mg</i>	48
<i>alprazolam tab 0.5 mg</i>	48
<i>alprazolam tab 1 mg</i>	49
<i>alprazolam tab 2 mg</i>	49
<i>ALREX SUS 0.2%</i>	132
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<i>amiloride hcl tab 5 mg</i>	45
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<i>amiodarone hcl tab 400 mg</i>	38
<i>AMITIZA CAP 24MCG</i>	100
<i>AMITIZA CAP 8MCG</i>	100
<i>amitriptyline hcl tab 100 mg</i>	57
<i>amitriptyline hcl tab 10 mg</i>	57
<i>amitriptyline hcl tab 150 mg</i>	57
<i>amitriptyline hcl tab 25 mg</i>	57
<i>amitriptyline hcl tab 50 mg</i>	57
<i>amitriptyline hcl tab 75 mg</i>	57
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<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	36
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	36
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<i>AMMONIUM POW ALUMINUM</i>	149
<i>amnestem cap 10mg</i>	144
<i>amnestem cap 20mg</i>	144
<i>amnestem cap 40mg</i>	144
<i>amoxapine tab 100 mg</i>	57
<i>amoxapine tab 150 mg</i>	57
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<i>amoxicillin (trihydrate) chew tab 125 mg</i>	19

<i>amoxicillin (trihydrate) chew tab 250 mg</i>	19
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	19
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	19
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	20
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	20
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<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	19
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<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	19
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	19
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	19
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<i>amphotericin b for iv soln 50 mg</i>	10
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	20
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	20
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	20
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<i>ampicillin sodium for inj 125 mg</i>	20
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<i>antifungal cre 2%</i>	145	<i>armodafinil tab 250 mg</i>	74
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<i>aprepitant capsule 80 mg</i>	96	<i>ascorbic acid chew tab 500 mg</i>	123
<i>aprepitant capsule therapy pack 80 &</i> <i>125 mg</i>	96	<i>ascorbic acid tab 1000 mg</i>	123
<i>apri tab</i>	82	<i>ascorbic acid tab 250 mg</i>	123
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<i>aquadeks dro</i>	123	<i>aspirin tab 325mg</i>	1
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<i>aqueous e dro 15/0.3ml</i>	123	<i>aspirin tab 325mg ec</i>	1
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ARALAST NP INJ 500MG	141	<i>atazanavir sulfate cap 150 mg (base</i> <i>equiv)</i>	12
<i>aranelle tab</i>	82	<i>atazanavir sulfate cap 200 mg (base</i> <i>equiv)</i>	12
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<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	39	<i>azithromycin powd pack for susp 1 gm</i>	18
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	39	<i>azithromycin tab 250 mg</i>	18
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	39	<i>azithromycin tab 500 mg</i>	18
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	11	<i>azithromycin tab 600 mg</i>	18
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	11	<i>AZOPT SUS 1% OP</i>	133
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<i>AVASTIN INJ 400/16ML</i>	24	<i>bacitr zinc oin 500/gm</i>	145
<i>aviane tab</i>	82	<i>baclofen tab 10 mg</i>	73
<i>avita cre 0.025%</i>	144	<i>baclofen tab 20 mg</i>	73
<i>avita gel 0.025%</i>	144	<i>balsalazide disodium cap 750 mg</i>	97
<i>AYR SALINE KIT NETI RNS</i>	141	<i>BALVERSA TAB 3MG</i>	28
<i>AYR SALINE KIT RINSE</i>	141	<i>BALVERSA TAB 4MG</i>	28
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<i>AYVAKIT TAB 200MG</i>	28	<i>balziva tab</i>	82
<i>AYVAKIT TAB 300MG</i>	28	<i>BANANA LIQ FLAVOR</i>	118
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<i>AZASITE SOL 1%</i>	131	<i>banophen cap 50mg</i>	135
		<i>banophen liq 12.5/5ml</i>	135
		<i>banophen tab 25mg</i>	135
		<i>BANZEL SUS 40MG/ML</i>	49
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<i>benazepril hcl tab 40 mg</i>	34
<i>benazepril hcl tab 5 mg</i>	34
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<i>benztropine mesylate inj 1 mg/ml</i>	61
<i>benztropine mesylate tab 0.5 mg</i>	61
<i>benztropine mesylate tab 1 mg</i>	61
<i>benztropine mesylate tab 2 mg</i>	61
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<i>betamethasone dipropionate</i> <i>augmented oint 0.05%</i>	147
<i>betamethasone dipropionate cream</i> <i>0.05%</i>	147
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<i>bisacodyl suppos 10 mg</i>	98
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BOSULIF TAB 500MG	28	<i>buprenorphine td patch weekly 20 mcg/hr</i>	4
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<i>cromolyn sodium nasal aerosol soln 5.2</i>		D10W/NACL INJ 0.2%.....	114
<i>mg/act (4%)</i>	138	<i>d3 cap 1000unit</i>	125
<i>cromolyn sodium ophth soln 4%</i>	133	<i>d3 super str cap 2000unit</i>	125
<i>cromolyn sodium oral conc 100 mg/5ml</i>		<i>d 400 tab 400unit</i>	125
.....	100	D5W/LYTES INJ #48.....	114
<i>cromolyn sodium soln nebu 20 mg/2ml</i>		D5W/NACL INJ 0.3%	114
.....	141	<i>daily-vite/ tab iron</i>	125
CROTON OIL.....	150	<i>daily-vite tab</i>	125
<i>cryselle-28 tab 28 tabs</i>	82	<i>daily vit tab</i>	125
<i>cupric chloride inj 0.4 mg/ml</i>		<i>dalfampridine tab er 12hr 10 mg</i>	73
<i>(elemental)</i>	114	DALIRESP TAB 250MCG	141
<i>cvs cough dm sus 30mg/5ml</i>	138	DALIRESP TAB 500MCG	141
<i>cyanocobalamin inj 1000 mcg/ml</i> ...	125	<i>danazol cap 100 mg</i>	86
<i>cyanocobalamin tab 1000 mcg</i>	125	<i>danazol cap 200 mg</i>	86
<i>cyanocobalamin tab 100 mcg</i>	125	<i>danazol cap 50 mg</i>	86
<i>cyanocobalamin tab 250 mcg</i>	125	<i>dantrolene sodium cap 100 mg</i>	74
<i>cyanocobalamin tab 500 mcg</i>	125	<i>dantrolene sodium cap 25 mg</i>	74
<i>cyanocobalamin tab er 1000 mcg</i> ...	125	<i>dantrolene sodium cap 50 mg</i>	74
<i>cyanocobalamin tab er 2000 mcg</i> ...	125	<i>dapsone tab 100 mg</i>	9
<i>cyclafem tab 1/35</i>	82	<i>dapsone tab 25 mg</i>	9
<i>cyclafem tab 7/7/7</i>	82	DAPTACEL INJ.....	111
<i>cyclobenzaprine hcl tab 10 mg</i>	74	<i>daptomycin for iv soln 350 mg</i>	9
<i>cyclobenzaprine hcl tab 5 mg</i>	74	<i>daptomycin for iv soln 500 mg</i>	9
CYCLOPHOSPHA INJ 500MG	21	<i>dasetta tab 1/35</i>	82
<i>cyclophosphamide cap 25 mg</i>	22	<i>dasetta tab 7/7/7</i>	82
<i>cyclophosphamide cap 50 mg</i>	22	DAURISMO TAB 100MG.....	24
<i>cyclophosphamide for inj 1 gm</i>	22	DAURISMO TAB 25MG	24
<i>cyclophosphamide for inj 2 gm</i>	22	<i>dayhist alrg tab 12 hour</i>	135
<i>cyclophosphamide for inj 500 mg</i>	22	<i>deblitane tab 0.35mg</i>	82

<i>decongestant tab 120mg er</i>	138
<i>deferasirox granules packet 180 mg</i>	81
<i>deferasirox granules packet 360 mg</i>	81
<i>deferasirox granules packet 90 mg</i>	81
<i>deferasirox tab 180 mg</i>	81
<i>deferasirox tab 360 mg</i>	81
<i>deferasirox tab 90 mg</i>	81
DELESTROGEN INJ 10MG/ML	87
DELSTRIGO TAB	14
DELSYM SUS 30MG/5ML	138
DEMSER CAP 250MG	46
DEPO-PROVERA INJ 400/ML	26
DESCOVY TAB 200/25	14
<i>desipramine hcl tab 100 mg</i>	58
<i>desipramine hcl tab 10 mg</i>	57
<i>desipramine hcl tab 150 mg</i>	58
<i>desipramine hcl tab 25 mg</i>	58
<i>desipramine hcl tab 50 mg</i>	58
<i>desipramine hcl tab 75 mg</i>	58
<i>desmopressin acetate inj 4 mcg/ml</i> ..	94
<i>desmopressin acetate nasal spray soln</i> <i>0.01%</i>	94
<i>desmopressin acetate nasal spray soln</i> <i>0.01% (refrigerated)</i>	94
<i>desmopressin acetate tab 0.1 mg</i>	94
<i>desmopressin acetate tab 0.2 mg</i>	94
<i>desogest-eth estrad & eth estrad tab</i> <i>0.15-0.02/0.01 mg(21/5)</i>	82
<i>desogest-ethin est tab 0.1-</i> <i>0.025/0.125-0.025/0.15-0.025mg-</i> <i>mg</i>	82
<i>desogestrel & ethinyl estradiol tab 0.15</i> <i>mg-30 mcg</i>	82
<i>desvenlafaxine succinate tab er 24hr</i> <i>100 mg (base equiv)</i>	58
<i>desvenlafaxine succinate tab er 24hr</i> <i>25 mg (base equiv)</i>	58
<i>desvenlafaxine succinate tab er 24hr</i> <i>50 mg (base equiv)</i>	58
DEXAMETHASON CON 1MG/ML	87
<i>dexamethasone elixir 0.5 mg/5ml</i>	87
<i>dexamethasone sodium phosphate inj</i> <i>100 mg/10ml</i>	88
<i>dexamethasone sodium phosphate inj</i> <i>10 mg/ml</i>	88
<i>dexamethasone sodium phosphate inj</i> <i>120 mg/30ml</i>	88
<i>dexamethasone sodium phosphate inj</i> <i>20 mg/5ml</i>	88
<i>dexamethasone sodium phosphate inj</i> <i>4 mg/ml</i>	88
<i>dexamethasone sodium phosphate</i> <i>ophth soln 0.1%</i>	132
<i>dexamethasone sod phosphate</i> <i>preservative free inj 10 mg/ml</i>	88
<i>dexamethasone soln 0.5 mg/5ml</i>	88
<i>dexamethasone tab 0.5 mg</i>	88
<i>dexamethasone tab 0.75 mg</i>	88
<i>dexamethasone tab 1.5 mg</i>	88
<i>dexamethasone tab 1 mg</i>	88
<i>dexamethasone tab 2 mg</i>	88
<i>dexamethasone tab 4 mg</i>	88
<i>dexamethasone tab 6 mg</i>	88
DEXILANT CAP 30MG DR	101
DEXILANT CAP 60MG DR	101
<i>dexmethylphenidate hcl tab 10 mg</i> ...	69
<i>dexmethylphenidate hcl tab 2.5 mg</i> ..	69
<i>dexmethylphenidate hcl tab 5 mg</i>	69
<i>dextromethorphan-guaifenesin syrup</i> <i>10-100 mg/5ml</i>	138
<i>dextromethorphan polistirex extended</i> <i>release susp 30 mg/5ml</i>	138
<i>dextrose 10% w/ sodium chloride</i> <i>0.45%</i>	115
<i>dextrose 2.5% w/ sodium chloride</i> <i>0.45%</i>	114
<i>dextrose 5% in lactated ringers</i>	114
<i>dextrose 5% w/ sodium chloride 0.2%</i>	114
<i>dextrose 5% w/ sodium chloride 0.45%</i>	115
<i>dextrose 5% w/ sodium chloride 0.9%</i>	115
<i>dextrose inj 10%</i>	115
<i>dextrose inj 5%</i>	115
<i>dextrose inj 50%</i>	115
<i>dextrose inj 70%</i>	115
<i>diabetic tus liq 100/5ml</i>	138
<i>diabetic tus liq dm</i>	138
<i>diabetic tus liq max st</i>	138
DIABETISWEET POW	119
DIALYVIT 800 TAB ZINC 15	125
<i>dialyvite d cap 5000unit</i>	125
<i>dialyvite tab 800</i>	125

<i>dialyvite tab 800/d</i>	125	<i>didanosine delayed release capsule 250</i>	250
DIALYVITE TAB 800/ZINC.....	125	<i>mg</i>	12
<i>diarrhea rel sus 262/15ml</i>	95	<i>didanosine delayed release capsule 400</i>	400
DIASCREEN 10 MIS.....	90	<i>mg</i>	12
DIASCREEN 3 MIS.....	90	<i>diethylpropion hcl tab 25 mg</i>	75
DIASCREEN 5 MIS.....	90	<i>diethylpropion hcl tab er 24hr 75 mg</i>	75
DIASCREEN 6 MIS.....	90	DIFICID TAB 200MG.....	18
DIASCREEN 7 MIS.....	90	<i>diflunisal tab 500 mg</i>	3
DIASCREEN 8 MIS.....	90	<i>digitek tab 0.125mg</i>	45
DIASCREEN 9 MIS.....	90	<i>digitek tab 0.25mg</i>	45
DIASCREEN MIS 1G.....	90	<i>digoxin inj 0.25 mg/ml</i>	45
DIASCREEN MIS 2GK.....	90	<i>digoxin oral soln 0.05 mg/ml</i>	45
DIASCREEN MIS 4OBL	90	<i>digoxin tab 125 mcg (0.125 mg)</i>	45
DIASTAT ACDL GEL 12.5-20	50	<i>digoxin tab 250 mcg (0.25 mg)</i>	45
DIASTAT ACDL GEL 5-10MG	50	<i>dihydroergotamine mesylate inj 1</i>	
DIASTAT PED GEL 2.5M GEL.....	50	<i>mg/ml</i>	71
DIASTIX TES STRIPS	90	<i>dihydroergotamine mesylate nasal</i>	
<i>diazepam conc 5 mg/ml</i>	50	<i>spray 4 mg/ml</i>	71
<i>diazepam inj 5 mg/ml</i>	50	DILANTIN-125 SUS 125/5ML	51
<i>diazepam oral soln 1 mg/ml</i>	50	DILANTIN CAP 100MG	51
<i>diazepam rectal gel delivery system 10</i>		DILANTIN CAP 30MG	51
<i>mg</i>	50	DILANTIN CHW 50MG.....	51
<i>diazepam rectal gel delivery system 2.5</i>		<i>diltiazem hcl cap er 12hr 120 mg</i>	43
<i>mg</i>	50	<i>diltiazem hcl cap er 12hr 60 mg</i>	43
<i>diazepam rectal gel delivery system 20</i>		<i>diltiazem hcl cap er 12hr 90 mg</i>	43
<i>mg</i>	51	<i>diltiazem hcl cap er 24hr 120 mg</i>	43
<i>diazepam tab 10 mg</i>	51	<i>diltiazem hcl cap er 24hr 180 mg</i>	43
<i>diazepam tab 2 mg</i>	51	<i>diltiazem hcl cap er 24hr 240 mg</i>	43
<i>diazepam tab 5 mg</i>	51	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diazoxide susp 50 mg/ml</i>	89	<i>120 mg</i>	43
<i>diclofenac potassium tab 50 mg</i>	2	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac sodium gel 1%</i>	150	<i>180 mg</i>	43
<i>diclofenac sodium ophth soln 0.1%</i>	132	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac sodium tab delayed release</i>		<i>240 mg</i>	43
<i>25 mg</i>	2	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac sodium tab delayed release</i>		<i>300 mg</i>	43
<i>50 mg</i>	2	<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>diclofenac sodium tab delayed release</i>		<i>360 mg</i>	43
<i>75 mg</i>	2	<i>diltiazem hcl extended release beads</i>	
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	<i>cap er 24hr 120 mg</i>	43
<i>dicloxacillin sodium cap 250 mg</i>	20	<i>diltiazem hcl extended release beads</i>	
<i>dicloxacillin sodium cap 500 mg</i>	20	<i>cap er 24hr 180 mg</i>	43
<i>dicyclomine hcl cap 10 mg</i>	97	<i>diltiazem hcl extended release beads</i>	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	97	<i>cap er 24hr 240 mg</i>	43
<i>dicyclomine hcl tab 20 mg</i>	97	<i>diltiazem hcl extended release beads</i>	
<i>didanosine delayed release capsule 200</i>		<i>cap er 24hr 300 mg</i>	43
<i>mg</i>	12		

<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	43	<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	43	DOCETAXEL INJ 160/16ML	23
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	43	DOCETAXEL INJ 160/8ML	23
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	43	DOCETAXEL INJ 200/10	23
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	43	DOCETAXEL INJ 20MG/2ML	23
<i>diltiazem hcl tab 120 mg</i>	44	DOCETAXEL INJ 80MG/4ML	23
<i>diltiazem hcl tab 30 mg</i>	44	DOCETAXEL INJ 80MG/8ML	23
<i>diltiazem hcl tab 60 mg</i>	44	<i>docetaxel soln for iv infusion 160 mg/16ml</i>	23
<i>diltiazem hcl tab 90 mg</i>	44	<i>docetaxel soln for iv infusion 20 mg/2ml</i>	23
DIP/TET PED INJ 25-5LFU.....	111	<i>docetaxel soln for iv infusion 80 mg/8ml</i>	23
<i>diphenhist cap 25mg</i>	135	<i>docu liq 50mg/5ml</i>	98
<i>diphenhist liq 12.5/5ml</i>	135	<i>docusate cal cap 240mg</i>	98
<i>diphenhist tab 25mg</i>	135	<i>docusate sod cap 100mg</i>	98
<i>diphenhydramine hcl cap 25 mg</i>	135	<i>docusate sodium cap 100 mg</i>	98
<i>diphenhydramine hcl cap 50 mg</i>	136	<i>docusate sodium liquid 150 mg/15ml</i>	98
<i>diphenhydramine hcl inj 50 mg/ml</i> ..	136	<i>docusate sod liq 50mg/5ml</i>	98
<i>diphenhydramine hcl tab 25 mg</i>	136	<i>docusil cap 100mg</i>	98
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	100	<i>docu soft cap 100mg</i>	98
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	100	DOCUSOL MINI ENE	98
<i>disopyramide phosphate cap 100 mg</i> 38		<i>dofetilide cap 125 mcg (0.125 mg)</i> ...	38
<i>disopyramide phosphate cap 150 mg</i> 38		<i>dofetilide cap 250 mcg (0.25 mg)</i>	38
DISTILLED LIQ WATER.....	119	<i>dofetilide cap 500 mcg (0.5 mg)</i>	38
<i>disulfiram tab 250 mg</i>	75	<i>dok plus tab 8.6-50mg</i>	98
<i>disulfiram tab 500 mg</i>	75	<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	56
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	51	<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	56
<i>divalproex sodium tab delayed release 125 mg</i>	51	<i>donepezil hydrochloride tab 10 mg</i> ...	56
<i>divalproex sodium tab delayed release 250 mg</i>	51	<i>donepezil hydrochloride tab 5 mg</i>	56
<i>divalproex sodium tab delayed release 500 mg</i>	51	<i>dorzolamide hcl ophth soln 2%</i>	133
<i>divalproex sodium tab er 24 hr 250 mg</i>	51	<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	133
<i>divalproex sodium tab er 24 hr 500 mg</i>	51	DOVATO TAB 50-300MG	14
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	23	<i>doxazosin mesylate tab 1 mg</i>	35
<i>docetaxel for inj conc 20 mg/ml</i>	23	<i>doxazosin mesylate tab 2 mg</i>	35
		<i>doxazosin mesylate tab 4 mg</i>	35
		<i>doxazosin mesylate tab 8 mg</i>	35
		<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	70
		<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	70
		<i>doxepin hcl cap 100 mg</i>	58
		<i>doxepin hcl cap 10 mg</i>	58

<i>doxepin hcl cap 150 mg</i>	58	DUREZOL EMU 0.05%	132
<i>doxepin hcl cap 25 mg</i>	58	<i>dutasteride cap 0.5 mg</i>	102
<i>doxepin hcl cap 50 mg</i>	58	<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i>	
<i>doxepin hcl cap 75 mg</i>	58	<i>mg</i>	102
<i>doxepin hcl conc 10 mg/ml</i>	58	D-VITAMIN E POW SUCCINAT	150
<i>doxorubicin hcl inj 2 mg/ml</i>	22	D-XYLOSE POW	90
<i>doxorubicin hcl liposomal inj (for iv</i>		E	
<i>infusion) 2 mg/ml</i>	22	<i>e-400 cap 400unit</i>	125
<i>doxy 100 inj 100mg</i>	21	<i>ecce plus tab</i>	125
<i>doxycycline hyclate cap 100 mg</i>	21	<i>ec-naproxen tab 375mg</i>	3
<i>doxycycline hyclate cap 50 mg</i>	21	<i>ec-naproxen tab 500mg</i>	3
<i>doxycycline hyclate for inj 100 mg</i> ...	21	<i>ecpirin tab 325mg ec</i>	1
<i>doxycycline hyclate tab 100 mg</i>	21	<i>ed-apap liq 80mg/2.5</i>	1
<i>doxycycline hyclate tab 20 mg</i>	21	<i>ed chlorped syp jr</i>	136
<i>doxycycline monohydrate cap 100 mg</i>		EDURANT TAB 25MG	12
.....	21	<i>efavirenz cap 200 mg</i>	12
<i>doxycycline monohydrate cap 50 mg</i> 21		<i>efavirenz cap 50 mg</i>	12
<i>doxycycline monohydrate tab 100 mg</i>		<i>efavirenz-lamivudine-tenofovir df tab</i>	
.....	21	<i>400-300-300 mg</i>	14
<i>doxycycline monohydrate tab 50 mg</i> 21		<i>efavirenz-lamivudine-tenofovir df tab</i>	
<i>doxycycline monohydrate tab 75 mg</i> 21		<i>600-300-300 mg</i>	14
DRIZALMA CAP 20MG DR	58	<i>efavirenz tab 600 mg</i>	12
DRIZALMA CAP 30MG DR	58	<i>eldertonic liq</i>	125
DRIZALMA CAP 40MG DR	58	<i>eletriptan hydrobromide tab 20 mg</i>	
DRIZALMA CAP 60MG DR	58	<i>(base equivalent)</i>	71
<i>dronabinol cap 10 mg</i>	96	<i>eletriptan hydrobromide tab 40 mg</i>	
<i>dronabinol cap 2.5 mg</i>	96	<i>(base equivalent)</i>	71
<i>dronabinol cap 5 mg</i>	96	ELIQUIS ST P TAB 5MG	103
<i>drospirenone-ethinyl estradiol tab 3-</i>		ELIQUIS TAB 2.5MG	103
<i>0.02 mg</i>	83	ELIQUIS TAB 5MG	103
<i>drospirenone-ethinyl estradiol tab 3-</i>		ELLA TAB 30MG	83
<i>0.03 mg</i>	83	<i>eluryng mis</i>	83
<i>drospirenone-ethinyl estrad-</i>		EMCYT CAP 140MG	22
<i>levomefolate tab 3-0.02-0.451 mg</i> 82		EMEND SUS 125MG	96
<i>drospirenone-ethinyl estrad-</i>		EMGALITY INJ 120MG/ML	71
<i>levomefolate tab 3-0.03-0.451 mg</i> 83		<i>emoquette tab</i>	83
DROXIA CAP 200MG	106	EMSAM DIS 12MG/24H	58
DROXIA CAP 300MG	106	EMSAM DIS 6MG/24HR	58
DROXIA CAP 400MG	106	EMSAM DIS 9MG/24HR	58
<i>ducodyl tab 5mg ec</i>	98	<i>emtricitabine caps 200 mg</i>	12
<i>duloxetine hcl enteric coated pellets</i>		EMTRIVA CAP 200MG	12
<i>cap 20 mg (base eq)</i>	58	EMTRIVA SOL 10MG/ML	12
<i>duloxetine hcl enteric coated pellets</i>		EMVERM CHW 100MG	9
<i>cap 30 mg (base eq)</i>	58	<i>enalapril maleate & hydrochlorothiazide</i>	
<i>duloxetine hcl enteric coated pellets</i>		<i>tab 10-25 mg</i>	33
<i>cap 60 mg (base eq)</i>	58	<i>enalapril maleate & hydrochlorothiazide</i>	
DUOFER TAB 28MG	105	<i>tab 5-12.5 mg</i>	33

<i>enalapril maleate tab 10 mg</i>	34	<i>eplerenone tab 25 mg</i>	35
<i>enalapril maleate tab 2.5 mg</i>	34	<i>eplerenone tab 50 mg</i>	35
<i>enalapril maleate tab 20 mg</i>	34	<i>epsom salt gra</i>	98
<i>enalapril maleate tab 5 mg</i>	34	EPSOM SALT POW	98
ENBREL INJ 25/0.5ML	107	<i>eq cough dm sus 30mg/5ml</i>	138
ENBREL INJ 25MG	107	<i>eql coq10 cap 100mg</i>	119
ENBREL INJ 50MG/ML	107	<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	125
ENBREL MINI INJ 50MG/ML	107	<i>ergocalciferol soln 200 mcg/ml (8000</i> <i>unit/ml)</i>	125
ENBREL SRCLK INJ 50MG/ML	107	<i>ergotamine w/ caffeine tab 1-100 mg</i>	71
ENDARI POW 5GM.....	106	ERIVEDGE CAP 150MG.....	24
ENEMEEZ MINI ENE.....	98	ERLEADA TAB 60MG	26
ENEMEEZ PLUS ENE 20-283	98	<i>erlotinib hcl tab 100 mg (base</i> <i>equivalent)</i>	28
ENGERIX-B INJ 10/0.5ML	111	<i>erlotinib hcl tab 150 mg (base</i> <i>equivalent)</i>	28
ENGERIX-B INJ 20MCG/ML	111	<i>erlotinib hcl tab 25 mg (base</i> <i>equivalent)</i>	28
<i>enoxaparin sodium inj 100 mg/ml</i> ..	103	<i>errin tab 0.35mg</i>	83
.....	103	<i>ertapenem sodium for inj 1 gm (base</i> <i>equivalent)</i>	9
<i>enoxaparin sodium inj 150 mg/ml</i> ..	103	<i>ery-tab tab 250mg ec</i>	18
<i>enoxaparin sodium inj 300 mg/3ml</i> .	103	<i>ery-tab tab 333mg ec</i>	18
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	103	<i>ery-tab tab 500mg ec</i>	18
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	103	ERYTHROCIN INJ 500MG.....	18
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	103	<i>erythrocin tab 250mg</i>	18
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	103	<i>erythromycin ethylsuccinate tab 400</i> <i>mg</i>	18
<i>enpresse-28 tab</i>	83	<i>erythromycin gel 2%</i>	144
<i>enskyce tab</i>	83	<i>erythromycin ophth oint 5 mg/gm</i> ..	131
ENSTILAR AER	147	<i>erythromycin pads 2%</i>	144
<i>entacapone tab 200 mg</i>	62	<i>erythromycin soln 2%</i>	144
<i>entecavir tab 0.5 mg</i>	15	<i>erythromycin tab 250 mg</i>	18
<i>entecavir tab 1 mg</i>	15	<i>erythromycin tab 500 mg</i>	18
ENTRESTO TAB 24-26MG	36	<i>erythromycin tab delayed release 250</i> <i>mg</i>	18
ENTRESTO TAB 49-51MG	36	<i>erythromycin tab delayed release 333</i> <i>mg</i>	18
ENTRESTO TAB 97-103MG	36	<i>erythromycin tab delayed release 500</i> <i>mg</i>	18
<i>enulose sol 10gm/15</i>	98	<i>erythromycin w/ delayed release</i> <i>particles cap 250 mg</i>	18
EPCLUSA TAB 400-100	15	ESBRIET CAP 267MG	141
EPIDIOLEX SOL 100MG/ML.....	51	ESBRIET TAB 267MG	141
<i>epinephrine solution auto-injector 0.15</i> <i>mg/0.15ml (1:1000)</i>	141	ESBRIET TAB 801MG	141
<i>epinephrine solution auto-injector 0.15</i> <i>mg/0.3ml (1:2000)</i>	141		
<i>epinephrine solution auto-injector 0.3</i> <i>mg/0.3ml (1:1000)</i>	141		
<i>epirubicin hcl iv soln 200 mg/100ml (2</i> <i>mg/ml)</i>	22		
<i>epirubicin hcl iv soln 50 mg/25ml (2</i> <i>mg/ml)</i>	22		
<i>epitol tab 200mg</i>	51		
EPIVIR HBV SOL 5MG/ML	15		

<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	58	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	83
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	59	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	83
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	59	<i>etodolac cap 200 mg</i>	3
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	59	<i>etodolac cap 300 mg</i>	3
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	101	<i>etodolac tab 400 mg</i>	3
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	101	<i>etodolac tab 500 mg</i>	3
<i>essentl one tab daily</i>	125	<i>etodolac tab er 24hr 400 mg</i>	3
<i>ester-c tab 500mg</i>	125	<i>etodolac tab er 24hr 500 mg</i>	3
<i>estradiol tab 0.5 mg</i>	87	<i>etodolac tab er 24hr 600 mg</i>	3
<i>estradiol tab 1 mg</i>	87	<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	83
<i>estradiol tab 2 mg</i>	87	<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	32
<i>estradiol td patch weekly 0.025 mg/24hr</i>	87	<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	32
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	87	<i>EUGENOL SOL</i>	150
<i>estradiol td patch weekly 0.05 mg/24hr</i>	87	<i>euthyrox tab 100mcg</i>	92
<i>estradiol td patch weekly 0.06 mg/24hr</i>	87	<i>euthyrox tab 112mcg</i>	92
<i>estradiol td patch weekly 0.075 mg/24hr</i>	87	<i>euthyrox tab 125mcg</i>	92
<i>estradiol td patch weekly 0.1 mg/24hr</i>	87	<i>euthyrox tab 137mcg</i>	92
<i>estradiol vaginal cream 0.1 mg/gm</i> ..	87	<i>euthyrox tab 150mcg</i>	92
<i>estradiol vaginal tab 10 mcg</i>	87	<i>euthyrox tab 175mcg</i>	92
<i>estradiol valerate im in oil 20 mg/ml</i> ..	87	<i>euthyrox tab 200mcg</i>	92
<i>estradiol valerate im in oil 40 mg/ml</i> ..	87	<i>euthyrox tab 25mcg</i>	92
<i>eszopiclone tab 1 mg</i>	70	<i>euthyrox tab 50mcg</i>	92
<i>eszopiclone tab 2 mg</i>	70	<i>euthyrox tab 75mcg</i>	92
<i>eszopiclone tab 3 mg</i>	70	<i>euthyrox tab 88mcg</i>	92
<i>ethambutol hcl tab 100 mg</i>	15	<i>everolimus tab 0.25 mg</i>	110
<i>ethambutol hcl tab 400 mg</i>	15	<i>everolimus tab 0.5 mg</i>	110
<i>ethosuximide cap 250 mg</i>	51	<i>everolimus tab 0.75 mg</i>	110
<i>ethosuximide soln 250 mg/5ml</i>	51	<i>everolimus tab 2.5 mg</i>	28
<i>ETHOXY ETHNL LIQ REAGENT</i>	150	<i>everolimus tab 5 mg</i>	28
<i>ETHYL ALCOHO SOL 100%</i>	119	<i>everolimus tab 7.5 mg</i>	28
<i>ETHYL ALCOHO SOL 95%</i>	150	<i>EVOTAZ TAB 300-150</i>	14
<i>ETHYL ALCOHO SOL 95% USP</i>	150	<i>exemestane tab 25 mg</i>	26
<i>ETHYL ALCOHO SOL SDA 95%</i>	150	<i>eye allergy sol relief</i>	133
<i>ETHYL OLEATE LIQ</i>	150	<i>ezetimibe-simvastatin tab 10-10 mg</i> ..	40
		<i>ezetimibe-simvastatin tab 10-20 mg</i> ..	40
		<i>ezetimibe-simvastatin tab 10-40 mg</i> ..	40
		<i>ezetimibe-simvastatin tab 10-80 mg</i> ..	40
		<i>ezetimibe tab 10 mg</i>	40
		<i>EZFE 200 CAP 200MG</i>	105
		<i>EZFE FORTE CAP</i>	125
		F	
		<i>FABRAZYME INJ 35MG</i>	86

FABRAZYME INJ 5MG.....	86	<i>fenofibrate micronized cap 200 mg...</i>	40
<i>falmina tab.....</i>	83	<i>fenofibrate micronized cap 67 mg.....</i>	40
<i>famciclovir tab 125 mg</i>	15	<i>fenofibrate tab 145 mg</i>	40
<i>famciclovir tab 250 mg</i>	15	<i>fenofibrate tab 160 mg</i>	40
<i>famciclovir tab 500 mg</i>	15	<i>fenofibrate tab 48 mg</i>	40
<i>famotidine for susp 40 mg/5ml</i>	97	<i>fenofibrate tab 54 mg</i>	40
<i>famotidine inj 200 mg/20ml</i>	97	<i>fentanyl citrate lozenge on a handle</i>	
<i>famotidine inj 20 mg/2ml</i>	97	1200 mcg	4
<i>famotidine inj 40 mg/4ml</i>	97	<i>fentanyl citrate lozenge on a handle</i>	
<i>famotidine in nacl 0.9% iv soln 20</i>		1600 mcg	4
<i>mg/50ml</i>	97	<i>fentanyl citrate lozenge on a handle</i>	
<i>famotidine tab 20 mg</i>	97	200 mcg	4
<i>famotidine tab 40 mg</i>	97	<i>fentanyl citrate lozenge on a handle</i>	
FANAPT PAK	64	400 mcg	4
FANAPT TAB 10MG	64	<i>fentanyl citrate lozenge on a handle</i>	
FANAPT TAB 12MG	64	600 mcg	4
FANAPT TAB 1MG.....	64	<i>fentanyl citrate lozenge on a handle</i>	
FANAPT TAB 2MG	64	800 mcg	4
FANAPT TAB 4MG.....	64	<i>fentanyl td patch 72hr 100 mcg/hr.....</i>	5
FANAPT TAB 6MG	64	<i>fentanyl td patch 72hr 12 mcg/hr.....</i>	4
FANAPT TAB 8MG.....	64	<i>fentanyl td patch 72hr 25 mcg/hr.....</i>	4
FARXIGA TAB 10MG	78	<i>fentanyl td patch 72hr 50 mcg/hr.....</i>	4
FARXIGA TAB 5MG	78	<i>fentanyl td patch 72hr 75 mcg/hr.....</i>	4
FARYDAK CAP 10MG.....	24	FERAHEME INJ 510/17ML	105
FARYDAK CAP 20MG.....	24	<i>ferate tab 27mg</i>	105
FASENRA INJ 30MG/ML	141	FERGON TAB 27MG	105
FASENRA PEN INJ 30MG/ML.....	141	<i>ferosul elx 220/5ml</i>	105
FATTYBLEND MIS	119	<i>ferosul tab 325mg</i>	105
<i>fayosim tab</i>	83	FERRETTS IPS SOL	105
FDC BLUE 1 POW	119	FERRETTS TAB 325MG	105
FDC BLUE 1 POW AL LAKE	119	<i>ferrex 150 cap 150mg.....</i>	105
FDC BLUE 2 POW	119	FERRIC POW SUBSULFA	150
FDC GREEN #3 POW.....	120	FERRIC SUBSU SOL	150
FDC RED #3 POW.....	120	FERRIMIN 150 TAB.....	105
FDC RED #40 POW AL LAKE	120	FERRLECIT INJ 12.5MG/M.....	105
FDC RED 40 POW	120	<i>ferrous fumarate tab 324 mg (106 mg</i>	
FDC YELLOW 5 POW	120	<i>elemental fe)</i>	105
FDC YELLOW 5 POW AL LAKE.....	120	<i>ferrous gluconate tab 240 mg (27 mg</i>	
FDC YELLOW 6 POW	120	<i>elemental fe)</i>	105
<i>felbamate susp 600 mg/5ml</i>	51	<i>ferrous gluconate tab 324 mg (37.5 mg</i>	
<i>felbamate tab 400 mg</i>	51	<i>elemental iron)</i>	105
<i>felbamate tab 600 mg</i>	51	FERROUS GLUC TAB 324MG.....	105
<i>felodipine tab er 24hr 10 mg</i>	44	<i>ferrous sulfate elixir 220 mg/5ml (44</i>	
<i>felodipine tab er 24hr 2.5 mg</i>	44	<i>mg/5ml elemental fe)</i>	105
<i>felodipine tab er 24hr 5 mg</i>	44	<i>ferrous sulfate soln 75 mg/ml (15</i>	
<i>femynor tab 0.25-35</i>	83	<i>mg/ml elemental fe)</i>	105
<i>fenofibrate micronized cap 134 mg...40</i>			

FERROUS SULFATE SYRUP 300 MG/5ML (60 MG/5ML ELEMENTAL FE)	105	fluconazole in nacl 0.9% inj 200 mg/100ml	11
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	<i>105</i>	<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	<i>11</i>
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	<i>105</i>	<i>fluconazole tab 100 mg</i>	<i>11</i>
FERROUS SULF TAB 324MG EC	105	<i>fluconazole tab 150 mg</i>	<i>11</i>
<i>ferrousul tab 325mg</i>	<i>105</i>	<i>fluconazole tab 200 mg</i>	<i>11</i>
FE SULFATE POW	105	<i>fluconazole tab 50 mg</i>	<i>11</i>
FETZIMA CAP 120MG	59	<i>flucytosine cap 250 mg</i>	<i>11</i>
FETZIMA CAP 20MG	59	<i>flucytosine cap 500 mg</i>	<i>11</i>
FETZIMA CAP 40MG	59	<i>fludrocortisone acetate tab 0.1 mg ...</i>	<i>88</i>
FETZIMA CAP 80MG	59	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	<i>142</i>
FETZIMA CAP TITRATIO	59	<i>fluocinolone acetonide (otic) oil 0.01%</i>	<i>154</i>
FEVERALL INF SUP 80MG	1	<i>fluocinolone acetonide cream 0.01%</i>	<i>147</i>
<i>feverall sup 120mg</i>	<i>1</i>	<i>fluocinolone acetonide cream 0.025%</i>	<i>147</i>
<i>feverall sup 325mg</i>	<i>1</i>	<i>fluocinolone acetonide oil 0.01% (body oil)</i>	<i>147</i>
<i>feverall sup 650mg</i>	<i>1</i>	<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	<i>147</i>
<i>fexofenadine hcl tab 180 mg</i>	<i>136</i>	<i>fluocinolone acetonide oint 0.025%</i>	<i>147</i>
<i>fexofenadine hcl tab 60 mg</i>	<i>136</i>	<i>fluocinolone acetonide soln 0.01%</i>	<i>147</i>
<i>fexofenadine tab 180mg</i>	<i>136</i>	<i>fluocinonide cream 0.05%</i>	<i>147</i>
<i>fexofenadine tab 60mg</i>	<i>136</i>	<i>fluocinonide emulsified base cream 0.05%</i>	<i>147</i>
FIASP FLEX INJ TOUCH	77	<i>fluocinonide gel 0.05%</i>	<i>147</i>
FIASP INJ 100/ML	77	<i>fluocinonide oint 0.05%</i>	<i>148</i>
FIASP PENFIL INJ U-100	77	<i>fluocinonide soln 0.05%</i>	<i>148</i>
<i>finasteride tab 5 mg</i>	<i>102</i>	<i>fluorometholone ophth susp 0.1%</i>	<i>132</i>
FINTEPLA SOL 2.2MG/ML	51	<i>fluorouracil cream 5%</i>	<i>150</i>
<i>flac oil 0.01%</i>	<i>154</i>	<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	<i>22</i>
FLAREX SUS 0.1% OP	132	<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	<i>22</i>
FLAVORX LIQ	120	<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	<i>22</i>
FLEBOGAMMA INJ 10/100ML	109	<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	<i>22</i>
FLEBOGAMMA INJ 10/200ML	109	<i>fluorouracil soln 2%</i>	<i>150</i>
FLEBOGAMMA INJ 20/200ML	109	<i>fluorouracil soln 5%</i>	<i>150</i>
FLEBOGAMMA INJ 20/400ML	109	<i>fluoxetine hcl cap 10 mg</i>	<i>59</i>
FLEBOGAMMA INJ 5GM/50ML	109	<i>fluoxetine hcl cap 20 mg</i>	<i>59</i>
FLEBOGAMMA INJ DIF 5%	109	<i>fluoxetine hcl cap 40 mg</i>	<i>59</i>
<i>flecainide acetate tab 100 mg</i>	<i>38</i>	<i>fluoxetine hcl solution 20 mg/5ml</i>	<i>59</i>
<i>flecainide acetate tab 150 mg</i>	<i>38</i>		
<i>flecainide acetate tab 50 mg</i>	<i>38</i>		
FLOVENT DISK AER 100MCG	143		
FLOVENT DISK AER 250MCG	143		
FLOVENT DISK AER 50MCG	143		
FLOVENT HFA AER 110MCG	143		
FLOVENT HFA AER 220MCG	143		
FLOVENT HFA AER 44MCG	143		
<i>fluconazole for susp 10 mg/ml</i>	<i>10</i>		
<i>fluconazole for susp 40 mg/ml</i>	<i>11</i>		

<i>fluphenazine decanoate inj 25 mg/ml</i>	64	<i>FREAMINE HBC INJ 6.9%</i>	114
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	64	<i>FREAMINE III INJ 10%</i>	114
<i>fluphenazine hcl inj 2.5 mg/ml</i>	64	<i>FREE & CLEAR SHA</i>	150
<i>fluphenazine hcl oral conc 5 mg/ml</i>	64	<i>FRUCTOSE GRA</i>	120
<i>fluphenazine hcl tab 10 mg</i>	64	<i>FULLERS POW EARTH</i>	150
<i>fluphenazine hcl tab 1 mg</i>	64	<i>fulvestrant inj 250 mg/5ml</i>	26
<i>fluphenazine hcl tab 2.5 mg</i>	64	<i>fungoid-d cre 1%</i>	146
<i>fluphenazine hcl tab 5 mg</i>	64	<i>furosemide inj 10 mg/ml</i>	45
<i>flurbiprofen sodium ophth soln 0.03%</i>		<i>furosemide oral soln 10 mg/ml</i>	45
	132	<i>furosemide oral soln 8 mg/ml</i>	45
<i>flurbiprofen tab 100 mg</i>	3	<i>furosemide tab 20 mg</i>	45
<i>flutamide cap 125 mg</i>	26	<i>furosemide tab 40 mg</i>	45
<i>fluticasone propionate cream 0.05%</i>		<i>furosemide tab 80 mg</i>	45
	148	<i>FUSION CAP</i>	106
<i>fluticasone propionate nasal susp 50 mcg/act</i>	142	<i>FUZEON INJ 90MG</i>	12
<i>fluticasone propionate oint 0.005%</i>	148	<i>fyavolv tab 0.5-2.5</i>	87
<i>fluvoxamine maleate tab 100 mg</i>	49	<i>FYCOMPA SUS 0.5MG/ML</i>	51
<i>fluvoxamine maleate tab 25 mg</i>	49	<i>FYCOMPA TAB 10MG</i>	52
<i>fluvoxamine maleate tab 50 mg</i>	49	<i>FYCOMPA TAB 12MG</i>	52
<i>FOLGARD TAB</i>	125	<i>FYCOMPA TAB 2MG</i>	51
<i>folic acid inj 5 mg/ml</i>	125	<i>FYCOMPA TAB 4MG</i>	51
<i>folic acid tab 1 mg</i>	125	<i>FYCOMPA TAB 6MG</i>	52
<i>folic acid tab 400mcg</i>	125	<i>FYCOMPA TAB 8MG</i>	52
<i>folic acid tab 400 mcg</i>	125	G	
<i>folic acid tab 800 mcg</i>	125	<i>gabapentin cap 100 mg</i>	52
<i>FOLITAB 500 TAB</i>	105	<i>gabapentin cap 300 mg</i>	52
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	103	<i>gabapentin cap 400 mg</i>	52
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	103	<i>gabapentin oral soln 250 mg/5ml</i>	52
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	103	<i>gabapentin tab 600 mg</i>	52
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	103	<i>gabapentin tab 800 mg</i>	52
<i>FORMALDEHYDE SOL 37%</i>	150	<i>galantamine hydrobromide cap er 24hr 16 mg</i>	56
<i>FORTEO SOL 600/2.4</i>	90	<i>galantamine hydrobromide cap er 24hr 24 mg</i>	56
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	12	<i>galantamine hydrobromide cap er 24hr 8 mg</i>	56
<i>FOSFREE TAB</i>	125	<i>galantamine hydrobromide oral soln 4 mg/ml</i>	56
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	33	<i>galantamine hydrobromide tab 12 mg</i>	56
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	33		56
<i>fosinopril sodium tab 10 mg</i>	34	<i>galantamine hydrobromide tab 4 mg</i>	56
<i>fosinopril sodium tab 20 mg</i>	34	<i>galantamine hydrobromide tab 8 mg</i>	56
<i>fosinopril sodium tab 40 mg</i>	34	<i>GAMASTAN INJ</i>	109
		<i>GAMMAGARD INJ 10GM/100</i>	109
		<i>GAMMAGARD INJ 1GM/10ML</i>	109
		<i>GAMMAGARD INJ 2.5GM/25</i>	109
		<i>GAMMAGARD INJ 20GM/200</i>	109

GAMMAGARD INJ 30GM/300	109	GENOTROPIN INJ 12MG	90
GAMMAGARD INJ 5GM/50ML	109	GENOTROPIN INJ 1MG	90
GAMMAGARD SD INJ 10GM HU	109	GENOTROPIN INJ 2MG	90
GAMMAGARD SD INJ 5GM HU	109	GENOTROPIN INJ 5MG	90
GAMMAKED INJ 10GM/100	109	<i>gentak oin 0.3% op</i>	132
GAMMAKED INJ 1GM/10ML	109	<i>gentamicin in saline inj 0.8 mg/ml</i>	7
GAMMAKED INJ 20GM/200	109	<i>gentamicin in saline inj 1.2 mg/ml</i>	8
GAMMAKED INJ 5GM/50ML	109	<i>gentamicin in saline inj 1.6 mg/ml</i>	8
GAMMAPLEX INJ 10%	109	<i>gentamicin in saline inj 1 mg/ml</i>	8
GAMMAPLEX INJ 5%	109	<i>gentamicin in saline inj 2 mg/ml</i>	8
GAMUNEX-C INJ 10GM/100	109	<i>gentamicin sulfate cream 0.1%</i>	145
GAMUNEX-C INJ 1GM/10ML	109	<i>gentamicin sulfate inj 10 mg/ml</i>	8
GAMUNEX-C INJ 2.5GM/25	109	<i>gentamicin sulfate inj 40 mg/ml</i>	8
GAMUNEX-C INJ 20GM/200	109	<i>gentamicin sulfate oint 0.1%</i>	145
GAMUNEX-C INJ 40/400ML	109	<i>gentamicin sulfate ophth soln 0.3%</i>	132
GAMUNEX-C INJ 5GM/50ML	109	<i>gentle laxat sup 10mg</i>	98
<i>ganciclovir sodium for inj 500 mg</i>	15	<i>gentle laxat tab 5mg ec</i>	98
GARDASIL 9 INJ	111	GENVOYA TAB	14
<i>gatifloxacin ophth soln 0.5%</i>	132	GEODON INJ 20MG	64
GATTEX KIT 5MG	100	<i>geriaton liq</i>	126
GAUZE PADS 2	77	GERIATRIC LIQ VITAMIN	126
<i>gavilyte-c sol</i>	98	GILENYA CAP 0.5MG	73
<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>	22	<i>glatiramer acetate soln prefilled syringe</i> <i>20 mg/ml</i>	73
<i>gemcitabine hcl for inj 200 mg</i>	22	<i>glatiramer acetate soln prefilled syringe</i> <i>40 mg/ml</i>	73
<i>gemcitabine hcl for inj 2 gm</i>	22	<i>glatopa inj 20mg/ml</i>	73
<i>gemcitabine hcl inj 1 gm/26.3ml (38</i> <i>mg/ml) (base equiv)</i>	22	<i>glatopa inj 40mg/ml</i>	73
<i>gemcitabine hcl inj 200 mg/5.26ml (38</i> <i>mg/ml) (base equiv)</i>	22	GLEOSTINE CAP 100MG	22
<i>gemcitabine hcl inj 2 gm/52.6ml (38</i> <i>mg/ml) (base equiv)</i>	22	GLEOSTINE CAP 10MG	22
<i>gemfibrozil tab 600 mg</i>	40	GLEOSTINE CAP 40MG	22
<i>generlac sol 10gm/15</i>	98	<i>glimepiride tab 1 mg</i>	78
<i>gengraf cap 100mg</i>	110	<i>glimepiride tab 2 mg</i>	78
<i>gengraf cap 25mg</i>	110	<i>glimepiride tab 4 mg</i>	78
<i>gengraf sol 100mg/ml</i>	111	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	79
GENOTROPIN INJ 0.2MG	90	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	79
GENOTROPIN INJ 0.4MG	90	<i>glipizide-metformin hcl tab 5-500 mg</i>	79
GENOTROPIN INJ 0.6MG	90	<i>glipizide tab 10 mg</i>	78
GENOTROPIN INJ 0.8MG	90	<i>glipizide tab 5 mg</i>	78
GENOTROPIN INJ 1.2MG	90	<i>glipizide tab er 24hr 10 mg</i>	78
GENOTROPIN INJ 1.4MG	90	<i>glipizide tab er 24hr 2.5 mg</i>	78
GENOTROPIN INJ 1.6MG	90	<i>glipizide tab er 24hr 5 mg</i>	78
GENOTROPIN INJ 1.8MG	90		

<i>glipizide xl tab 10mg</i>	79	<i>gnp century tab ultimate</i>	126
<i>glipizide xl tab 2.5mg</i>	78	<i>gnp co q10 cap 100mg</i>	120
<i>glipizide xl tab 5mg</i>	78	<i>gnp co q10 cap 60mg</i>	120
GLUCAGEN INJ HYPOKIT	89	<i>gnp cough dm sus 30mg/5ml</i>	138
GLUCAGON KIT 1MG	89	<i>gnp dayhist tab 1.34mg</i>	136
GLUCOSAMINE POW HCL.....	150	<i>gnp glycerin sup 1.2gm</i>	98
GLUCOSAMINE POW SULFATE.....	150	<i>gnp healthy tab eyes</i>	126
<i>glyburide-metformin tab 1.25-250 mg</i>	79	<i>gnp iron tab 45mg</i>	106
<i>glyburide-metformin tab 2.5-500 mg</i>	79	<i>gnp iron tab 65mg</i>	106
<i>glyburide-metformin tab 5-500 mg</i> ...	79	<i>gnp k-pec sus 262/15ml</i>	95
<i>glyburide micronized tab 1.5 mg</i>	79	<i>gnp laxative sup 10mg</i>	98
<i>glyburide micronized tab 3 mg</i>	79	<i>gnp laxative tab 25mg</i>	98
<i>glyburide micronized tab 6 mg</i>	79	<i>gnp laxative tab 5mg ec</i>	98
<i>glyburide tab 1.25 mg</i>	79	<i>gnp lice kit</i>	153
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<i>olanzapine orally disintegrating tab 15</i>		<i>once daily tab iron</i>	128
<i>mg</i>	65	ONCOVITE TAB	128
<i>olanzapine orally disintegrating tab 20</i>		<i>ondansetron hcl inj 40 mg/20ml (2</i>	
<i>mg</i>	65	<i>mg/ml)</i>	96
<i>olanzapine orally disintegrating tab 5</i>		<i>ondansetron hcl inj 4 mg/2ml (2</i>	
<i>mg</i>	65	<i>mg/ml)</i>	96
<i>olanzapine tab 10 mg</i>	65	<i>ondansetron hcl oral soln 4 mg/5ml..</i>	96
<i>olanzapine tab 15 mg</i>	65	<i>ondansetron hcl tab 24 mg</i>	96
<i>olanzapine tab 2.5 mg</i>	65	<i>ondansetron hcl tab 4 mg</i>	96
<i>olanzapine tab 20 mg</i>	66	<i>ondansetron hcl tab 8 mg</i>	96
<i>olanzapine tab 5 mg</i>	65	<i>ondansetron orally disintegrating tab 4</i>	
<i>olanzapine tab 7.5 mg</i>	65	<i>mg</i>	96

<i>ondansetron orally disintegrating tab 8 mg</i>	96	<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	20
<i>one daily tab</i>	128	<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	20
<i>one daily tab maximum</i>	128	<i>OXALIC ACID CRY</i>	151
<i>one daily tab men 50+</i>	128	<i>oxaliplatin for iv inj 100 mg</i>	32
<i>one daily tab mens</i>	128	<i>oxaliplatin for iv inj 50 mg</i>	32
<i>one daily tab mens 50+</i>	128	<i>oxaliplatin iv soln 100 mg/20ml</i>	32
<i>one daily tab pls iron</i>	128	<i>oxaliplatin iv soln 50 mg/10ml</i>	32
<i>one daily tab wom 50+</i>	128	<i>oxandrolone tab 10 mg</i>	77
<i>one daily tab womens</i>	128	<i>oxandrolone tab 2.5 mg</i>	77
<i>ONTRUZANT INJ 150MG</i>	25	<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	53
<i>ONTRUZANT INJ 420MG</i>	25	<i>oxcarbazepine tab 150 mg</i>	53
<i>OPCON-A SOL OP</i>	128	<i>oxcarbazepine tab 300 mg</i>	53
<i>OPSUMIT TAB 10MG</i>	48	<i>oxcarbazepine tab 600 mg</i>	53
<i>ORA-BLEND SF SUS</i>	121	<i>oxybutynin chloride syrup 5 mg/5ml</i>	102
<i>ORA-BLEND SUS</i>	121	<i>oxybutynin chloride tab 5 mg</i>	102
<i>ORA-HESIVE PST BASE</i>	121	<i>oxybutynin chloride tab er 24hr 10 mg</i>	102
<i>oral electrolyte solution</i>	113	<i>oxybutynin chloride tab er 24hr 15 mg</i>	102
<i>oralyte sol</i>	113	<i>oxybutynin chloride tab er 24hr 5 mg</i>	102
<i>oralyte sol freeze</i>	113	<i>oxycodone hcl cap 5 mg</i>	6
<i>ORANGE CONC LIQ</i>	121	<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	6
<i>ORA-PLUS LIQ</i>	121	<i>oxycodone hcl soln 5 mg/5ml</i>	6
<i>ORASEP SPR</i>	154	<i>oxycodone hcl tab 10 mg</i>	6
<i>ORA-SWEET SF SYP</i>	121	<i>oxycodone hcl tab 15 mg</i>	6
<i>ORA-SWEET SYP</i>	121	<i>oxycodone hcl tab 20 mg</i>	7
<i>ORFADIN CAP 10MG</i>	87	<i>oxycodone hcl tab 30 mg</i>	7
<i>ORFADIN CAP 20MG</i>	87	<i>oxycodone hcl tab 5 mg</i>	6
<i>ORFADIN CAP 2MG</i>	87	<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	7
<i>ORFADIN CAP 5MG</i>	87	<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	7
<i>ORFADIN SUS 4MG/ML</i>	87	<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	7
<i>ORKAMBI GRA 100-125</i>	142	<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	7
<i>ORKAMBI GRA 150-188</i>	142	<i>OXYCONTIN TAB 10MG CR</i>	7
<i>ORKAMBI TAB 100-125</i>	142	<i>OXYCONTIN TAB 15MG CR</i>	7
<i>ORKAMBI TAB 200-125</i>	142	<i>OXYCONTIN TAB 20MG CR</i>	7
<i>ORNITHINE POW HCL</i>	151	<i>OXYCONTIN TAB 30MG CR</i>	7
<i>orsythia tab</i>	85	<i>OXYCONTIN TAB 40MG CR</i>	7
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	16		
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	16		
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	16		
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	16		
<i>OSPHERA TAB 60MG</i>	91		
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	20		

OXYCONTIN TAB 60MG CR	7
OXYCONTIN TAB 80MG CR	7
oysco 500+d chw	118
oysco 500+d tab	118
oysco 500 tab 500mg	118
oyst cal/d tab 500mg	118
oyster shell calcium tab 500 mg	118
oyster shell tab 500mg	118
oyst shell/d tab 500mg	118
OZEMPIC INJ 2/1.5ML	78

P

<i>pacerone tab 100mg</i>	38
<i>pacerone tab 200mg</i>	38
<i>pacerone tab 400mg</i>	38
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	23
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	23
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	23
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	23
<i>pain & fever sol 160/5ml</i>	2
<i>pain & fever sus 160/5ml</i>	2
<i>pain & fever tab 325mg</i>	2
<i>pain & fever tab 500mg</i>	2
<i>pain relief sus 160/5ml</i>	2
<i>pain relief tab 500mg</i>	2
<i>pain relief tab 500mg/rr</i>	2
<i>pain relief tab 650mg</i>	2
<i>pain relieve sus 160/5ml</i>	2
<i>pain relieve tab 325mg</i>	2
<i>pain relieve tab 500mg</i>	2
<i>pain relieve tab 500mg/rr</i>	2
<i>paliperidone tab er 24hr 1.5 mg</i>	66
<i>paliperidone tab er 24hr 3 mg</i>	66
<i>paliperidone tab er 24hr 6 mg</i>	66
<i>paliperidone tab er 24hr 9 mg</i>	66
<i>pamidronate disodium for inj 30 mg</i>	81
<i>pamidronate disodium for inj 90 mg</i>	81
<i>pamidronate disodium iv soln 3 mg/ml</i>	81
<i>pamidronate disodium iv soln 9 mg/ml</i>	81
<i>PAMIDRONATE INJ 6MG/ML</i>	81
<i>PANRETIN GEL 0.1%</i>	151
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	101
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	101
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	101
<i>PANZYGA SOL 10/100ML</i>	110
<i>PANZYGA SOL 1GM/10ML</i>	110
<i>PANZYGA SOL 2.5/25ML</i>	110
<i>PANZYGA SOL 20/200ML</i>	110
<i>PANZYGA SOL 30/300ML</i>	110
<i>PANZYGA SOL 5GM/50ML</i>	110
<i>paricalcitol cap 1 mcg</i>	128
<i>paricalcitol cap 2 mcg</i>	128
<i>paricalcitol cap 4 mcg</i>	128
<i>paromomycin sulfate cap 250 mg</i>	8
<i>paroxetine hcl tab 10 mg</i>	60
<i>paroxetine hcl tab 20 mg</i>	60
<i>paroxetine hcl tab 30 mg</i>	60
<i>paroxetine hcl tab 40 mg</i>	60
<i>PASER GRA 4GM</i>	15
<i>PAXIL SUS 10MG/5ML</i>	60
<i>PAZEO DRO 0.7%</i>	133
<i>PCCA BASE CRE 7542</i>	121
<i>PCCA MBK MIS FAT ACID</i>	121
<i>PECTIN POW</i>	95
<i>ped elctrlt sol freezer</i>	113
<i>ped elctrlt sol fruit</i>	113
<i>ped elctrlt sol grape</i>	113
<i>ped elctrlt sol unflavrd</i>	113
<i>PEDIA-LAX LIQ 50MG</i>	99
<i>PEDIA-LAX SUP 1GM</i>	99
<i>PEDIARIX INJ 0.5ML</i>	112
<i>PEDVAX HIB INJ</i>	112
<i>PEG 1000 LIQ</i>	121
<i>PEG 300 LIQ</i>	121
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	99
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	99
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	99
<i>PEG 3350 POW</i>	121
<i>PEGANONE TAB 250MG</i>	53
<i>PEGASYS INJ</i>	16
<i>PEGASYS INJ 180MCG/M</i>	16
<i>PEGASYS INJ PROCLICK</i>	16

PEG BLEND OIN	121	<i>pharbetol tab 325mg</i>	2
PEMAZYRE TAB 13.5MG	30	<i>pharbetol tab 500mg</i>	2
PEMAZYRE TAB 4.5MG	30	PHARMABASE CRE ANTIOXID.....	121
PEMAZYRE TAB 9MG.....	30	PHARMABASE CRE COSMETIC	121
PEN GK/DEXTR INJ 40000/ML.....	20	PHARMABASE CRE LIGHT	121
PEN GK/DEXTR INJ 60000/ML.....	21	PHARMABASE CRE VAGINAL	121
PEN G PROC INJ 600000	20	<i>phendimetrazine tartrate tab 35 mg</i> .	76
<i>penicillamine tab 250 mg</i>	82	<i>phenelzine sulfate tab 15 mg</i>	60
<i>penicillin g potassium for inj 20000000</i>		<i>phenobarbital elixir 20 mg/5ml</i>	53
<i>unit</i>	21	<i>phenobarbital sodium inj 130 mg/ml</i> .	53
<i>penicillin g potassium for inj 5000000</i>		<i>phenobarbital sodium inj 65 mg/ml</i> ..	53
<i>unit</i>	21	<i>phenobarbital tab 100 mg</i>	53
<i>penicillin g sodium for inj 5000000 unit</i>		<i>phenobarbital tab 15 mg</i>	53
.....	21	<i>phenobarbital tab 16.2 mg</i>	53
<i>penicillin v potassium for soln 125</i>		<i>phenobarbital tab 30 mg</i>	53
<i>mg/5ml</i>	21	<i>phenobarbital tab 32.4 mg</i>	53
<i>penicillin v potassium for soln 250</i>		<i>phenobarbital tab 60 mg</i>	53
<i>mg/5ml</i>	21	<i>phenobarbital tab 64.8 mg</i>	53
<i>penicillin v potassium tab 250 mg</i>	21	<i>phenobarbital tab 97.2 mg</i>	53
<i>penicillin v potassium tab 500 mg</i>	21	PHENOL LIQ	151
PENTACEL INJ.....	112	<i>phentermine hcl cap 15 mg</i>	76
<i>pentamidine isethionate for</i>		<i>phentermine hcl cap 30 mg</i>	76
<i>nebulization soln 300 mg</i>	9	<i>phentermine hcl cap 37.5 mg</i>	76
<i>pentamidine isethionate for soln 300</i>		<i>phentermine hcl tab 37.5 mg</i>	76
<i>mg</i>	9	PHENYTEK CAP 200MG	53
<i>pentoxifylline tab er 400 mg</i>	107	PHENYTEK CAP 300MG	53
PENTRAVAN CRE	151	<i>phenytoin chew tab 50 mg</i>	53
PENTRAVAN CRE PLUS	151	<i>phenytoin sodium extended cap 100</i>	
PEPPERMINT OIL FLAVOR	121	<i>mg</i>	53
<i>peptic relf chw 262mg</i>	95	<i>phenytoin sodium extended cap 200</i>	
<i>perindopril erbumine tab 2 mg</i>	34	<i>mg</i>	53
<i>perindopril erbumine tab 4 mg</i>	34	<i>phenytoin sodium extended cap 300</i>	
<i>perindopril erbumine tab 8 mg</i>	34	<i>mg</i>	53
<i>periogard sol 0.12%</i>	154	<i>phenytoin sodium inj 50 mg/ml</i>	53
<i>periomed con 0.63%</i>	154	<i>phenytoin susp 125 mg/5ml</i>	53
<i>permethrin cream 5%</i>	153	PHESGO SOL.....	25
<i>perphenazine tab 16 mg</i>	66	<i>philith tab 0.4-35</i>	85
<i>perphenazine tab 2 mg</i>	66	PHOS-NAK POW CONCENTR.....	118
<i>perphenazine tab 4 mg</i>	66	PHOSPHATIDYL POW 20%	151
<i>perphenazine tab 8 mg</i>	66	PHOSPHOLINE SOL 0.125%OP	133
PERSERIS INJ 120MG	66	PHYTOBASE CRE	121
PERSERIS INJ 90MG	66	<i>phytonadione inj 10 mg/ml</i>	128
PERUVIAN LIQ BALSAM	151	<i>phytonadione inj 1 mg/0.5ml (2</i>	
PFCB CRE	121	<i>mg/ml)</i>	128
<i>pharbechlor tab 4mg</i>	137	<i>phytonadione tab 5 mg</i>	128
<i>pharbedryl cap 25mg</i>	137	PICATO GEL 0.015%.....	151
<i>pharbedryl cap 50mg</i>	137	PICATO GEL 0.05%	151

PIFELTRO TAB 100MG.....	13	POLOX GEL 20%	121
<i>pilocarpine hcl ophth soln 1%</i>	133	POLOX GEL 30%	121
<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.....	121
<i>pilocarpine hcl tab 5 mg</i>	154	POLY GLYCOL POW 8000	122
<i>pilocarpine hcl tab 7.5 mg</i>	154	<i>poly-iron cap 150mg.....</i>	106
<i>pimozide tab 1 mg</i>	66	<i>polymyxin b-trimethoprim ophth soln</i>	
<i>pimozide tab 2 mg</i>	66	10000 unit/ml-0.1%	132
<i>pimtrea tab</i>	85	POLYOXYL 40 POW STEARATE.....	122
<i>pindolol tab 10 mg</i>	42	POLYSORBATE SOL 20	151
<i>pindolol tab 5 mg</i>	42	POLY-TUSSIN LIQ 10-4-10	139
<i>pink bismuth chw 262mg</i>	95	POLY-VI-SOL SOL IRON	128
<i>pink bismuth tab 262mg</i>	95	<i>poly vitamin chw</i>	128
PINWORM TAB MEDICINE.....	10	<i>polyvitamin chw /iron</i>	128
<i>pioglitazone hcl tab 15 mg (base equiv)</i>		<i>poly-vite sol /iron</i>	128
.....	80	POMALYST CAP 1MG.....	26
<i>pioglitazone hcl tab 30 mg (base equiv)</i>		POMALYST CAP 2MG.....	27
.....	80	POMALYST CAP 3MG.....	27
<i>pioglitazone hcl tab 45 mg (base equiv)</i>		POMALYST CAP 4MG.....	27
.....	80	<i>portia-28 tab</i>	85
<i>piperacillin sod-tazobactam na for inj</i>		<i>posaconazole tab delayed release 100</i>	
3.375 gm (3-0.375 gm)	21	mg	11
<i>piperacillin sod-tazobactam sod for inj</i>		<i>potassium & sodium phosphates</i>	
13.5 gm (12-1.5 gm).....	21	powder pack 280-160-250 mg....	118
<i>piperacillin sod-tazobactam sod for inj</i>		<i>potassium chloride 20 meq/l (0.15%)</i>	
2.25 gm (2-0.25 gm).....	21	in dextrose 5% inj	115
<i>piperacillin sod-tazobactam sod for inj</i>		<i>potassium chloride cap er 10 meq ..</i>	113
4.5 gm (4-0.5 gm)	21	<i>potassium chloride cap er 8 meq</i>	113
<i>piperacillin sod-tazobactam sod for inj</i>		<i>potassium chloride inj 2 meq/ml....</i>	115
40.5 gm (36-4.5 gm).....	21	<i>potassium chloride microencapsulated</i>	
PIQRAY 200MG TAB DOSE.....	30	crys er tab 10 meq	113
PIQRAY 250MG TAB DOSE.....	30	<i>potassium chloride microencapsulated</i>	
PIQRAY 300MG TAB DOSE.....	30	crys er tab 15 meq	113
<i>pirmella tab 1/35</i>	85	<i>potassium chloride microencapsulated</i>	
<i>piroxicam cap 10 mg</i>	3	crys er tab 20 meq	113
<i>piroxicam cap 20 mg</i>	3	<i>potassium chloride oral soln 10% (20</i>	
PLASMA-LYTE INJ -148	115	meq/15ml)	113
PLASMA-LYTE INJ -A.....	115	<i>potassium chloride oral soln 20% (40</i>	
<i>plenamine inj 15%</i>	114	meq/15ml)	113
PLENVU SOL.....	99	<i>potassium chloride powder packet 20</i>	
PLO20 GEL FLOWABLE	121	meq.....	113
PLO LECITHIN GEL BASE	121	<i>potassium chloride tab er 10 meq...</i>	113
PNA-HRT BASE CRE	121	<i>potassium chloride tab er 20 meq</i>	
PNV FOLIC AC TAB + IRON	128	(1500 mg).....	113
<i>podactin pow 1%</i>	146	<i>potassium chloride tab er 8 meq (600</i>	
<i>podofilox soln 0.5%.....</i>	151	mg)	113
POLOXAMER POW 407	121		

<i>potassium citrate tab er 10 meq (1080 mg)</i>	102	<i>prazosin hcl cap 5 mg</i>	35
<i>potassium citrate tab er 15 meq (1620 mg)</i>	102	<i>prednisolone acetate ophth susp 1%</i>	133
<i>potassium citrate tab er 5 meq (540 mg)</i>	102	<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	89
POTASSIUM CRY BROMIDE	152	<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	89
POTASSIUM CRY IODIDE	152	<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	89
POTASSIUM MIS HYDROXID	152	<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	89
POT CHLORIDE INJ 10MEQ	115	PREDNISONE CON 5MG/ML	89
POT CHLORIDE INJ 20MEQ	115	<i>prednisone oral soln 5 mg/5ml</i>	89
POT CHLORIDE INJ 40MEQ	115	<i>prednisone tab 10 mg</i>	89
POT CITRATE GRA	102	<i>prednisone tab 1 mg</i>	89
POT GLUCONAT POW ANHYDROU ...	151	<i>prednisone tab 2.5 mg</i>	89
POT HYDROXID SOL 10%	152	<i>prednisone tab 20 mg</i>	89
POT HYDROXID SOL 20%	152	<i>prednisone tab 50 mg</i>	89
POT NITRATE GRA	152	<i>prednisone tab 5 mg</i>	89
POT NITRATE GRA PURIFIED	152	<i>prednisone tab therapy pack 10 mg (21)</i>	89
POT SORBATE CRY	122	<i>prednisone tab therapy pack 10 mg (48)</i>	89
PRADAXA CAP 110MG	104	<i>prednisone tab therapy pack 5 mg (21)</i>	89
PRADAXA CAP 150MG	104	<i>prednisone tab therapy pack 5 mg (48)</i>	89
PRADAXA CAP 75MG	104	PRED SOD PHO SOL 1% OP	132
PRALUENT INJ 150MG/ML	40	<i>pregabalin cap 100 mg</i>	54
PRALUENT INJ 75MG/ML	40	<i>pregabalin cap 150 mg</i>	54
<i>pramipexole dihydrochloride tab 0.125 mg</i>	62	<i>pregabalin cap 200 mg</i>	54
<i>pramipexole dihydrochloride tab 0.25 mg</i>	62	<i>pregabalin cap 225 mg</i>	54
<i>pramipexole dihydrochloride tab 0.5 mg</i>	62	<i>pregabalin cap 25 mg</i>	53
<i>pramipexole dihydrochloride tab 0.75 mg</i>	62	<i>pregabalin cap 300 mg</i>	54
<i>pramipexole dihydrochloride tab 1.5 mg</i>	62	<i>pregabalin cap 50 mg</i>	54
<i>pramipexole dihydrochloride tab 1 mg</i>	62	<i>pregabalin cap 75 mg</i>	54
<i>prasterone (dhea) cap 25 mg</i>	122	<i>pregabalin soln 20 mg/ml</i>	54
<i>prasugrel hcl tab 10 mg (base equiv)</i>	107	PREMASOL SOL 10%	114
<i>prasugrel hcl tab 5 mg (base equiv)</i>	107	PRENATAL PLUS	128
<i>pravastatin sodium tab 10 mg</i>	39	PRENATAL TAB	128
<i>pravastatin sodium tab 20 mg</i>	39	PRENATAL TAB 27-0.8MG	128
<i>pravastatin sodium tab 40 mg</i>	39	PRENATAL TAB 27-1MG	128
<i>pravastatin sodium tab 80 mg</i>	39	PRENATAL TAB 28-0.8MG	128
<i>praziquantel tab 600 mg</i>	10	PRENATAL TAB LOW IRON	128
<i>prazosin hcl cap 1 mg</i>	35	PRENATAL TAB PLUS	128
<i>prazosin hcl cap 2 mg</i>	35	PRENATAL VIT TAB LOW IRON	128
		PRESERVISION CAP AREDS	129

PRESERVISION CAP AREDS 2.....	129	PROMACTA PAK 25MG.....	107
PRESERVISION CAP LUTEIN.....	129	PROMACTA POW 12.5MG.....	107
PRESERVISION TAB AREDS	129	PROMACTA TAB 12.5MG.....	107
<i>prevalite pow 4gm</i>	<i>41</i>	PROMACTA TAB 25MG.....	107
<i>prevalite pow 4gm pk</i>	<i>41</i>	PROMACTA TAB 50MG.....	107
<i>previfem tab.....</i>	<i>85</i>	PROMACTA TAB 75MG.....	107
PREZCOBIX TAB 800-150	14	<i>promethazine-dm syrup 6.25-15</i>	
PREZISTA SUS 100MG/ML.....	13	<i>mg/5ml.....</i>	<i>139</i>
PREZISTA TAB 150MG	13	<i>promethazine hcl inj 25 mg/ml</i>	<i>96</i>
PREZISTA TAB 600MG	13	<i>promethazine hcl inj 50 mg/ml</i>	<i>97</i>
PREZISTA TAB 75MG	13	<i>promethazine hcl syrup 6.25 mg/5ml</i>	<i>97</i>
PREZISTA TAB 800MG	13	<i>promethazine hcl tab 12.5 mg</i>	<i>97</i>
PRIFTIN TAB 150MG.....	15	<i>promethazine hcl tab 25 mg</i>	<i>97</i>
<i>primaquine phosphate tab 26.3 mg (15</i>		<i>promethazine hcl tab 50 mg</i>	<i>97</i>
<i>mg base)</i>	<i>11</i>	<i>promethazine w/ codeine syrup 6.25-</i>	
PRIMAQUINE TAB 26.3MG	11	<i>10 mg/5ml</i>	<i>139</i>
<i>primidone tab 250 mg</i>	<i>54</i>	<i>propafenone hcl cap er 12hr 225 mg</i>	<i>38</i>
<i>primidone tab 50 mg</i>	<i>54</i>	<i>propafenone hcl cap er 12hr 325 mg</i>	<i>38</i>
PRIVIGEN INJ 10GRAMS.....	110	<i>propafenone hcl cap er 12hr 425 mg</i>	<i>38</i>
PRIVIGEN INJ 20GRAMS.....	110	<i>propafenone hcl tab 150 mg</i>	<i>39</i>
PRIVIGEN INJ 40GRAMS.....	110	<i>propafenone hcl tab 225 mg</i>	<i>39</i>
PRIVIGEN INJ 5 GRAMS	110	<i>propafenone hcl tab 300 mg</i>	<i>39</i>
<i>probenecid tab 500 mg.....</i>	<i>1</i>	<i>proparacaine hcl ophth soln 0.5%...134</i>	
PROCALAMINE INJ 3%	114	<i>propranolol & hydrochlorothiazide tab</i>	
<i>prochlorperazine edisylate inj 10</i>		<i>40-25 mg.....</i>	<i>41</i>
<i>mg/2ml.....</i>	<i>96</i>	<i>propranolol & hydrochlorothiazide tab</i>	
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PROCRIT INJ 4000/ML	105	<i>propranolol hcl tab 40 mg</i>	<i>42</i>
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<i>rosuvastatin calcium tab 40 mg</i>	39	<i>sb fib lax pow 33%</i>	99
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		<i>senna-time s tab 8.6-50mg</i>	100
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		<i>sennosides-docusate sodium tab 8.6-50 mg</i>	100
		<i>sennosides syrup 8.8 mg/5ml</i>	100

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<i>sm fiber pow 58.6%</i>	100
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<i>sm vit b-6 tab 100mg</i>	129	SOMATULINE INJ 120/.5ML	91
<i>sm vit c/rh tab 1000mg</i>	129	SOMATULINE INJ 60/0.2ML	91
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(14.6%)	113	<i>sorine tab 160mg</i>	39
<i>sodium chloride irrigation soln 0.9%</i>		<i>sorine tab 240mg</i>	39
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<i>sodium chloride iv soln 0.45%</i>	115	<i>sotalol hcl (afib/afl) tab 120 mg</i>	39
<i>sodium chloride iv soln 0.9%</i>	115	<i>sotalol hcl (afib/afl) tab 160 mg</i>	39
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<i>sodium phosphates inj 45 mm/15ml</i>		<i>spironolactone tab 25 mg</i>	35
(phos) 60 meq/15ml (na)	114	<i>spironolactone tab 50 mg</i>	35
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SPRYCEL TAB 20MG	30	<i>sulfamethoxazole-trimethoprim susp</i>	
SPRYCEL TAB 50MG	30	<i>200-40 mg/5ml.....</i>	10
SPRYCEL TAB 70MG	30	<i>sulfamethoxazole-trimethoprim tab</i>	
SPRYCEL TAB 80MG	30	<i>400-80 mg</i>	10
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<i>stim laxat tab 5mg ec</i>	100	<i>sumatriptan nasal spray 5 mg/act</i>	72
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<i>stomach relf chw 262mg</i>	95	<i>.....</i>	72
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<i>stomach relf tab 262mg</i>	95	<i>injector 4 mg/0.5ml.....</i>	72
<i>stool softnr cap 100mg</i>	100	<i>sumatriptan succinate solution auto-</i>	
<i>stool softnr cap 250mg</i>	100	<i>injector 6 mg/0.5ml.....</i>	72
<i>stool softnr syp 60/15ml</i>	100	<i>sumatriptan succinate solution</i>	
<i>stool softnr tab 8.6-50mg.....</i>	100	<i>cartridge 4 mg/0.5ml.....</i>	72
STRAWBERRY LIQ FLAVOR	122	<i>sumatriptan succinate solution</i>	
<i>streptomycin sulfate for inj 1 gm</i>	8	<i>cartridge 6 mg/0.5ml.....</i>	72
<i>stress form/ tab zinc.....</i>	130	<i>sumatriptan succinate solution prefilled</i>	
<i>stress formu tab.....</i>	130	<i>syringe 6 mg/0.5ml</i>	72
<i>stress formu tab w/iron.....</i>	130	<i>sumatriptan succinate tab 100 mg....</i>	72
STRIBILD TAB	14	<i>sumatriptan succinate tab 25 mg</i>	72
STUART ONE CAP	130	<i>sumatriptan succinate tab 50 mg</i>	72
<i>sucralfate tab 1 gm</i>	101	<i>super b comp tab vit c</i>	130
<i>sudogest pe tab 10mg</i>	140	<i>super liq nu-thera.....</i>	130
<i>sudogest tab 120mg er</i>	140	<i>superplex-t tab</i>	130
<i>sudogest tab 30mg.....</i>	140	SUPER POW NU-THERA	130
<i>sudogest tab 60mg.....</i>	140	<i>super tab nu-thera</i>	130
<i>sulfacetamide sodium lotion 10%</i>		<i>super vikaps tab.....</i>	130
<i>(acne).....</i>	144	SUPPOSIBLEND MIS	122
<i>sulfacetamide sodium ophth oint 10%</i>		SUPREP BOWEL SOL PREP KIT	100
<i>.....</i>	132	SUSPENDIT GEL.....	122
<i>sulfacetamide sodium ophth soln 10%</i>		SUTENT CAP 12.5MG	30
<i>.....</i>	132	SUTENT CAP 25MG.....	30
<i>sulfacetamide sodium-prednisolone</i>		SUTENT CAP 37.5MG	30
<i>ophth soln 10-0.23(0.25)%</i>	131	SUTENT CAP 50MG.....	30

SYLATRON KIT 200MCG	31
SYLATRON KIT 300MCG	31
SYMBICORT AER 160-4.5	143
SYMBICORT AER 80-4.5	143
SYMDEKO TAB 100-150	142
SYMDEKO TAB 50-75MG	142
SYMFI LO TAB	14
SYMFI TAB	14
SYMJEPI INJ 0.15MG.....	142
SYMJEPI INJ 0.3MG	142
SYMPAZAN MIS 10MG.....	54
SYMPAZAN MIS 20MG.....	54
SYMPAZAN MIS 5MG	54
SYMTUZA TAB	14
SYNAREL SOL 2MG/ML.....	86
SYNERCID INJ 500MG.....	10
SYNJARDY TAB	80
SYNJARDY TAB 12.5-500.....	80
SYNJARDY TAB 5-1000MG.....	80
SYNJARDY TAB 5-500MG.....	80
SYNJARDY XR TAB	80
SYNJARDY XR TAB 10-1000.....	80
SYNJARDY XR TAB 25-1000.....	80
SYNJARDY XR TAB 5-1000MG	80
SYNRIBO INJ 3.5MG	31
SYNTHROID TAB 100MCG	93
SYNTHROID TAB 112MCG	93
SYNTHROID TAB 125MCG	93
SYNTHROID TAB 137MCG	93
SYNTHROID TAB 150MCG	93
SYNTHROID TAB 175MCG	93
SYNTHROID TAB 200MCG	93
SYNTHROID TAB 25MCG	93
SYNTHROID TAB 300MCG	93
SYNTHROID TAB 50MCG	93
SYNTHROID TAB 75MCG	93
SYNTHROID TAB 88MCG	93
SYRSPEND SF SUS ALKA	122

T

<i>tab-a-vite tab</i>	130
<i>tab-a-vite tab /iron</i>	130
<i>tab-a-vite tab beta car</i>	130
TABLOID TAB 40MG	23
TABRECTA TAB 150MG	30
TABRECTA TAB 200MG	30
<i>tacrolimus cap 0.5 mg</i>	111
<i>tacrolimus cap 1 mg</i>	111

<i>tacrolimus cap 5 mg</i>	111
<i>tacrolimus oint 0.03%</i>	152
<i>tacrolimus oint 0.1%</i>	152
<i>tactinal chw children</i>	2
<i>tactinal tab 325mg</i>	2
<i>tactinal tab 500mg</i>	2
TAFINLAR CAP 50MG	30
TAFINLAR CAP 75MG	30
TAGRISSO TAB 40MG	30
TAGRISSO TAB 80MG	31
TALC POW	153
TALZENNA CAP 0.25MG	25
TALZENNA CAP 1MG	25
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	26
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	26
<i>tamsulosin hcl cap 0.4 mg</i>	102
TANGERINE POW FLAVOR.....	122
TANNIC ACID POW	153
TARGRETIN GEL 1%	153
<i>tarina 24 fe tab</i>	85
<i>tarina fe tab 1/20</i>	85
TARTARIC ACD GRA.....	153
TASIGNA CAP 150MG	31
TASIGNA CAP 200MG	31
TASIGNA CAP 50MG	31
TAXOTERE INJ 80MG/4ML	23
<i>tazarotene cream 0.1%</i>	146
<i>tazicef inj 1gm</i>	18
<i>tazicef inj 2gm</i>	18
<i>tazicef inj 6gm</i>	18
TAZORAC CRE 0.05%	147
<i>taztia xt cap 120mg/24</i>	44
<i>taztia xt cap 180mg/24</i>	44
<i>taztia xt cap 240mg/24</i>	44
<i>taztia xt cap 300mg er</i>	44
<i>taztia xt cap 360mg/24</i>	44
TAZVERIK TAB 200MG	31
TDVAX INJ 2-2 LF.....	112
TECENTRIQ INJ 1200/20	25
TECENTRIQ INJ 840/14.....	25
TEFLARO INJ 400MG.....	18
TEFLARO INJ 600MG.....	18
<i>telmisartan-amlodipine tab 40-10 mg</i>	37
<i>telmisartan-amlodipine tab 40-5 mg</i>	37

<i>telmisartan-amlodipine tab 80-10 mg</i>	73
.....	37
<i>telmisartan-amlodipine tab 80-5 mg</i>	37
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	37
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	37
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	37
<i>telmisartan tab 20 mg</i>	38
<i>telmisartan tab 40 mg</i>	38
<i>telmisartan tab 80 mg</i>	38
<i>temazepam cap 15 mg</i>	70
<i>temazepam cap 7.5 mg</i>	70
TEMIXYS TAB 300-300	14
TENIVAC INJ 5-2LF	112
<i>tenofovir disoproxil fumarate tab 300 mg</i>	13
<i>terazosin hcl cap 10 mg (base equivalent)</i>	35
<i>terazosin hcl cap 1 mg (base equivalent)</i>	35
<i>terazosin hcl cap 2 mg (base equivalent)</i>	35
<i>terazosin hcl cap 5 mg (base equivalent)</i>	35
<i>terbinafine cre 1%</i>	146
<i>terbinafine hcl cream 1%</i>	146
<i>terbinafine hcl tab 250 mg</i>	11
<i>terbutaline sulfate tab 2.5 mg</i>	137
<i>terbutaline sulfate tab 5 mg</i>	138
<i>terconazole vaginal cream 0.4%</i>	103
<i>terconazole vaginal cream 0.8%</i>	103
<i>terconazole vaginal suppos 80 mg</i>	103
TESSALON PER CAP 100MG	140
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	77
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	77
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	77
<i>testosterone td gel 12.5 mg/act (1%)</i>	77
.....	77
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	77
.....	77
<i>testosterone td gel 50 mg/5gm (1%)</i>	77
<i>tetrabenazine tab 12.5 mg</i>	73
<i>tetrabenazine tab 25 mg</i>	73
<i>tetracycline hcl cap 250 mg</i>	21
<i>tetracycline hcl cap 500 mg</i>	21
TEXACORT SOL 2.5%	148
THALOMID CAP 100MG	27
THALOMID CAP 150MG	27
THALOMID CAP 200MG	27
THALOMID CAP 50MG	27
THEO-24 CAP 100MG CR	142
THEO-24 CAP 200MG CR	142
THEO-24 CAP 300MG CR	142
THEO-24 CAP 400MG ER	142
<i>theophylline soln 80 mg/15ml</i>	142
<i>theophylline tab er 12hr 300 mg</i>	142
<i>theophylline tab er 12hr 450 mg</i>	142
<i>theophylline tab er 24hr 400 mg</i>	142
<i>theophylline tab er 24hr 600 mg</i>	142
THERA M PLUS TAB	130
<i>thera-m tab</i>	130
THERA-M TAB	130
THERAPEUTIC SOL	130
<i>therapeutic- tab m</i>	130
<i>thera tab</i>	130
THERA TAB	130
THEREMS-H TAB	130
THEREMS-M TAB	130
<i>therems tab</i>	130
<i>thiamine hcl inj 100 mg/ml</i>	130
THIAMINE HCL POW	130
<i>thiamine hcl tab 100 mg</i>	130
<i>thiamine hcl tab 50 mg</i>	130
<i>thioridazine hcl tab 100 mg</i>	67
<i>thioridazine hcl tab 10 mg</i>	67
<i>thioridazine hcl tab 25 mg</i>	67
<i>thioridazine hcl tab 50 mg</i>	67
<i>thiothixene cap 10 mg</i>	68
<i>thiothixene cap 1 mg</i>	67
<i>thiothixene cap 2 mg</i>	67
<i>thiothixene cap 5 mg</i>	67
THREONINE POW	122
<i>thrive gum 2mg mint</i>	76
THYMOL CRY	153
<i>tiadylt cap 120mg/24</i>	44
<i>tiadylt cap 180mg/24</i>	44
<i>tiadylt cap 240mg/24</i>	44
<i>tiadylt cap 300mg/24</i>	44
<i>tiadylt cap 360mg/24</i>	44

<i>tiadylt cap 420mg/24</i>	44	<i>tolterodine tartrate cap er 24hr 4 mg</i>	102
<i>tiagabine hcl tab 12 mg</i>	54	<i>tolterodine tartrate tab 1 mg</i>	102
<i>tiagabine hcl tab 16 mg</i>	54	<i>tolterodine tartrate tab 2 mg</i>	102
<i>tiagabine hcl tab 2 mg</i>	54	<i>topiramate sprinkle cap 15 mg</i>	54
<i>tiagabine hcl tab 4 mg</i>	54	<i>topiramate sprinkle cap 25 mg</i>	54
<i>TIBSOVO TAB 250MG</i>	25	<i>topiramate tab 100 mg</i>	54
<i>tigecycline for iv soln 50 mg</i>	10	<i>topiramate tab 200 mg</i>	54
<i>timolol maleate ophth gel forming soln</i> <i>0.25%</i>	133	<i>topiramate tab 25 mg</i>	54
<i>timolol maleate ophth gel forming soln</i> <i>0.5%</i>	133	<i>topiramate tab 50 mg</i>	54
<i>timolol maleate ophth soln 0.25%</i> ..	134	<i>toposar inj 100/5ml</i>	32
<i>timolol maleate ophth soln 0.5%</i>	133	<i>toposar inj 1gm/50ml</i>	32
<i>timolol maleate ophth soln 0.5%</i> <i>(once-daily)</i>	134	<i>toremifene citrate tab 60 mg (base</i> <i>equivalent)</i>	26
<i>timolol maleate tab 10 mg</i>	42	<i>torsemide tab 100 mg</i>	46
<i>timolol maleate tab 20 mg</i>	42	<i>torsemide tab 10 mg</i>	46
<i>timolol maleate tab 5 mg</i>	42	<i>torsemide tab 20 mg</i>	46
<i>TIVICAY PD TAB 5MG</i>	13	<i>torsemide tab 5 mg</i>	46
<i>TIVICAY TAB 10MG</i>	13	<i>total b/c tab</i>	130
<i>TIVICAY TAB 25MG</i>	13	<i>TOVIAZ TAB 4MG</i>	102
<i>TIVICAY TAB 50MG</i>	13	<i>TOVIAZ TAB 8MG</i>	102
<i>tizanidine hcl tab 2 mg (base</i> <i>equivalent)</i>	74	<i>TPN ELECTROL INJ</i>	114
<i>tizanidine hcl tab 4 mg (base</i> <i>equivalent)</i>	74	<i>TRADJENTA TAB 5MG</i>	80
<i>TOBRADEX OIN 0.3-0.1%</i>	131	<i>tramadol-acetaminophen tab 37.5-325</i> <i>mg</i>	4
<i>TOBRADEX ST SUS 0.3-0.05</i>	131	<i>tramadol hcl tab 50 mg</i>	4
<i>tobramycin-dexamethasone ophth susp</i> <i>0.3-0.1%</i>	131	<i>trandolapril tab 1 mg</i>	35
<i>tobramycin nebu soln 300 mg/5ml</i>	8	<i>trandolapril tab 2 mg</i>	35
<i>tobramycin ophth soln 0.3%</i>	132	<i>trandolapril tab 4 mg</i>	35
<i>tobramycin sulfate for inj 1.2 gm</i>	8	<i>tranexamic acid iv soln 1000 mg/10ml</i> <i>(100 mg/ml)</i>	107
<i>tobramycin sulfate inj 1.2 gm/30ml (40</i> <i>mg/ml) (base equiv)</i>	8	<i>tranexamic acid tab 650 mg</i>	107
<i>tobramycin sulfate inj 10 mg/ml (base</i> <i>equivalent)</i>	8	<i>tranylcypromine sulfate tab 10 mg</i> ...	60
<i>tobramycin sulfate inj 2 gm/50ml (40</i> <i>mg/ml) (base equiv)</i>	8	<i>TRAVASOL INJ 10%</i>	114
<i>tobramycin sulfate inj 80 mg/2ml (40</i> <i>mg/ml) (base equiv)</i>	8	<i>travoprost ophth soln 0.004%</i> <i>(benzalkonium free) (bak free)</i>	134
<i>tolnaftate cre 1%</i>	146	<i>TRAZIMERA INJ 420MG</i>	25
<i>tolnaftate cream 1%</i>	146	<i>trazodone hcl tab 100 mg</i>	60
<i>tolnaftate powder 1%</i>	146	<i>trazodone hcl tab 150 mg</i>	60
<i>tolterodine tartrate cap er 24hr 2 mg</i>	102	<i>trazodone hcl tab 50 mg</i>	60
		<i>TRECATOR TAB 250MG</i>	15
		<i>TRELEGY AER ELLIPTA</i>	134
		<i>TRELSTAR MIX INJ 11.25MG</i>	26
		<i>TRELSTAR MIX INJ 3.75MG</i>	26
		<i>treprostinil inj soln 100 mg/20ml (5</i> <i>mg/ml)</i>	48

<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	48	<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	68
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	48	<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	68
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	48	<i>trifluridine ophth soln 1%</i>	132
TRESIBA FLEX INJ 100UNIT	78	<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	62
TRESIBA FLEX INJ 200UNIT	78	<i>trihexyphenidyl hcl tab 2 mg</i>	62
TRESIBA INJ 100UNIT	78	<i>trihexyphenidyl hcl tab 5 mg</i>	62
<i>tretinoin cap 10 mg</i>	31	TRIJARDY XR TAB	80
<i>tretinoin cream 0.025%</i>	144	TRIKAFTA TAB	142
<i>tretinoin cream 0.05%</i>	144	<i>tri-legest tab fe</i>	85
<i>tretinoin cream 0.1%</i>	144	<i>tri-lo- tab sprintec</i>	85
<i>tretinoin gel 0.01%</i>	144	<i>trilyte sol</i>	100
<i>tretinoin gel 0.025%</i>	144	<i>trimethoprim tab 100 mg</i>	10
<i>triamcinolone acetonide cream 0.025%</i>	148	<i>tri-mili tab</i>	86
<i>triamcinolone acetonide cream 0.1%</i>	148	<i>trimipramine maleate cap 100 mg</i>	60
<i>triamcinolone acetonide cream 0.5%</i>	148	<i>trimipramine maleate cap 25 mg</i>	60
<i>triamcinolone acetonide dental paste 0.1%</i>	154	<i>trimipramine maleate cap 50 mg</i>	60
<i>triamcinolone acetonide lotion 0.025%</i>	148	TRINTELLIX TAB 10MG	60
<i>triamcinolone acetonide lotion 0.1%</i>	148	TRINTELLIX TAB 20MG	60
<i>triamcinolone acetonide oint 0.025%</i>	148	TRINTELLIX TAB 5MG	60
<i>triamcinolone acetonide oint 0.1%</i>	148	<i>triple antib oin</i>	145
<i>triamcinolone acetonide oint 0.5%</i>	148	<i>triple antib oin max st</i>	145
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	46	<i>triple antib oin plus</i>	145
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	46	<i>tri-previfem tab</i>	86
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	46	<i>tri-sprintec tab</i>	86
<i>tri-biozene oin</i>	145	TRIUMEQ TAB	14
<i>tri-buff asa tab 325mg</i>	2	<i>trivora-28 tab</i>	86
TRICARE TAB PRENATAL	130	<i>tri-vylibra tab</i>	86
<i>trientine hcl cap 250 mg</i>	82	<i>tri-vylibra tab lo</i>	86
<i>tri-estaryll tab</i>	85	TROCHIBASE MIS	122
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	68	TROCHIBASE S MIS	122
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	68	TROCHIBASE S MIS CLASSIC	122
		TROGARZO INJ 150MG/ML	13
		TROLAMINE LIQ	122
		TROPHAMINE INJ 10%	114
		<i>tropium chloride tab 20 mg</i>	102
		TRULICITY INJ	78
		TRULICITY INJ 0.75/0.5	78
		TRULICITY INJ 1.5/0.5	78
		TRUMENBA INJ	112
		TRUVADA TAB 100-150	14
		TRUVADA TAB 133-200	14
		TRUVADA TAB 167-250	15
		TRUVADA TAB 200-300	15
		TRUXIMA INJ 100/10ML	25

TRUXIMA INJ 500/50ML	25
<i>trymine cg liq 225-7.5</i>	140
TUKYSA TAB 150MG	31
TUKYSA TAB 50MG	31
<i>tulana tab 0.35mg</i>	86
TURALIO CAP 200MG	31
TURPENTINE LIQ SPIRITS	153
TUSNEL C SYP	140
<i>tusnel diabt liq 10-100/5</i>	140
TUSSICAPS CAP 10-8MG	140
<i>tussin adult liq 100/5ml</i>	140
<i>tussin adult liq cgh/cong</i>	140
<i>tussin adult liq cold</i>	140
<i>tussin cf liq</i>	140
<i>tussin cf liq cgh/cold</i>	140
<i>tussin chest syp 100/5ml</i>	140
<i>tussin dm liq</i>	141
<i>tussin dm liq 100-10/5</i>	141
<i>tussin dm liq max</i>	141
<i>tussin dm syp 100-10/5</i>	141
TUTTI FRUTTI CON	122
TWINRIX INJ	112
TYBOST TAB 150MG	13
<i>tydemy tab</i>	86
TYKERB TAB 250MG	31
TYMLOS INJ	91
TYPHIM VI INJ	112
U	
U-BASE CRE	123
UNDECYLENIC LIQ ACID	153
UNIBASE CRE	123
UNICOMPLEX-M TAB	130
<i>unithroid tab 100mcg</i>	93
<i>unithroid tab 112mcg</i>	93
<i>unithroid tab 125mcg</i>	93
<i>unithroid tab 137mcg</i>	93
<i>unithroid tab 150mcg</i>	94
<i>unithroid tab 175mcg</i>	94
<i>unithroid tab 200mcg</i>	94
<i>unithroid tab 25mcg</i>	93
<i>unithroid tab 300mcg</i>	94
<i>unithroid tab 50mcg</i>	93
<i>unithroid tab 75mcg</i>	93
<i>unithroid tab 88mcg</i>	93
UREA BEA	153
UREA POW PEROXIDE	153
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>	16
<i>valacyclovir hcl tab 500 mg</i>	16
VALCHLOR GEL 0.016%	153
<i>valganciclovir hcl for soln 50 mg/ml</i> <i>(base equiv)</i>	16
<i>valganciclovir hcl tab 450 mg (base</i> <i>equivalent)</i>	16
<i>valproate sodium inj 100 mg/ml</i>	55
<i>valproate sodium oral soln 250 mg/5ml</i> <i>(base equiv)</i>	55
<i>valproic acid cap 250 mg</i>	55
<i>valsartan-hydrochlorothiazide tab 160-</i> <i>12.5 mg</i>	37
<i>valsartan-hydrochlorothiazide tab 160-</i> <i>25 mg</i>	37
<i>valsartan-hydrochlorothiazide tab 320-</i> <i>12.5 mg</i>	37
<i>valsartan-hydrochlorothiazide tab 320-</i> <i>25 mg</i>	37
<i>valsartan-hydrochlorothiazide tab 80-</i> <i>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
VALTOCO LIQ 15MG	55
VALTOCO LIQ 20MG	55
VALTOCO SPR 10MG	55
VALTOCO SPR 5MG	55
<i>vanadom tab 350mg</i>	74
<i>vancomycin hcl cap 125 mg (base</i> <i>equivalent)</i>	10
<i>vancomycin hcl cap 250 mg (base</i> <i>equivalent)</i>	10
<i>vancomycin hcl for iv soln 10 gm (base</i> <i>equivalent)</i>	10
<i>vancomycin hcl for iv soln 1 gm (base</i> <i>equivalent)</i>	10
<i>vancomycin hcl for iv soln 500 mg</i> <i>(base equivalent)</i>	10
<i>vancomycin hcl for iv soln 5 gm (base</i> <i>equivalent)</i>	10

<i>vancomycin hcl for iv soln 750 mg</i>		<i>verapamil hcl cap er 24hr 240 mg</i> ...	44
<i>(base equivalent)</i>	10	<i>verapamil hcl cap er 24hr 300 mg</i> ...	44
VANCOMYCIN INJ 1 GM.....	10	<i>verapamil hcl cap er 24hr 360 mg</i> ...	45
VANCOMYCIN INJ 500MG	10	<i>verapamil hcl iv soln 2.5 mg/ml</i>	45
VANCOMYCIN INJ 750MG	10	<i>verapamil hcl tab 120 mg</i>	45
<i>vandazole gel 0.75%</i>	103	<i>verapamil hcl tab 40 mg</i>	45
VANIBASE CRE	123	<i>verapamil hcl tab 80 mg</i>	45
VAQTA INJ 25/0.5ML	112	<i>verapamil hcl tab er 120 mg</i>	45
VAQTA INJ 50UNT/ML	112	<i>verapamil hcl tab er 180 mg</i>	45
VARIVAX INJ	112	<i>verapamil hcl tab er 240 mg</i>	45
VASCEPA CAP 0.5GM	41	VERSACLOZ SUS 50MG/ML.....	68
VASCEPA CAP 1GM.....	41	VERSATILE CRE BASE	123
VEEGUM MIS LUMP.....	153	VERSIGEL CRE.....	123
VELCADE INJ 3.5MG	25	VERZENIO TAB 100MG.....	25
<i>velivet pak</i>	86	VERZENIO TAB 150MG.....	26
VELTASSA POW 16.8GM.....	82	VERZENIO TAB 200MG.....	26
VELTASSA POW 25.2GM.....	82	VERZENIO TAB 50MG	25
VELTASSA POW 8.4GM	82	VICTOZA INJ 18MG/3ML	78
VEMLIDY TAB 25MG	16	<i>vienva tab 0.1-20</i>	86
VENCLEXTA TAB 100MG.....	25	<i>vigabatrin powd pack 500 mg</i>	55
VENCLEXTA TAB 10MG	25	<i>vigabatrin tab 500 mg</i>	55
VENCLEXTA TAB 50MG	25	<i>vigadrone pow 500mg</i>	55
VENCLEXTA TAB START PK.....	25	VIIBRYD KIT STARTER.....	61
<i>venlafaxine hcl cap er 24hr 150 mg</i>		VIIBRYD TAB 10MG	61
<i>(base equivalent)</i>	60	VIIBRYD TAB 20MG	61
<i>venlafaxine hcl cap er 24hr 37.5 mg</i>		VIIBRYD TAB 40MG	61
<i>(base equivalent)</i>	60	VIMPAT INJ 200MG/20.....	55
<i>venlafaxine hcl cap er 24hr 75 mg</i>		VIMPAT SOL 10MG/ML	55
<i>(base equivalent)</i>	60	VIMPAT TAB 100MG	55
<i>venlafaxine hcl tab 100 mg (base</i>		VIMPAT TAB 150MG	55
<i>equivalent)</i>	61	VIMPAT TAB 200MG	55
<i>venlafaxine hcl tab 25 mg (base</i>		VIMPAT TAB 50MG	55
<i>equivalent)</i>	60	<i>vincristine sulfate iv soln 1 mg/ml</i>	23
<i>venlafaxine hcl tab 37.5 mg (base</i>		<i>vinorelbine tartrate inj 10 mg/ml (base</i>	
<i>equivalent)</i>	60	<i>equiv)</i>	23
<i>venlafaxine hcl tab 50 mg (base</i>		<i>vinorelbine tartrate inj 50 mg/5ml (10</i>	
<i>equivalent)</i>	60	<i>mg/ml) (base equiv)</i>	24
<i>venlafaxine hcl tab 75 mg (base</i>		<i>viorele tab</i>	86
<i>equivalent)</i>	60	VIRACEPT TAB 250MG	13
VENOFER INJ 20MG/ML.....	106	VIRACEPT TAB 625MG	13
VENTAVIS SOL 10MCG/ML	48	VIREAD POW 40MG/GM	13
VENTAVIS SOL 20MCG/ML	48	VIREAD TAB 150MG	13
VENTOLIN HFA AER	138	VIREAD TAB 200MG	13
<i>verapamil hcl cap er 24hr 100 mg</i> ...	44	VIREAD TAB 250MG	13
<i>verapamil hcl cap er 24hr 120 mg</i> ...	44	<i>vita-bee/c tab</i>	130
<i>verapamil hcl cap er 24hr 180 mg</i> ...	44	<i>vitamin a cap 3 mg (10000 unit)</i> ...	130
<i>verapamil hcl cap er 24hr 200 mg</i> ...	44	<i>vitamin a cap 8000unit</i>	130

<i>vitamin b12 tab 1000mcg</i>	130
<i>vitamin c tab 500mg</i>	130
<i>vitamin c tab 500mg tr</i>	130
<i>vitamin d3 dro 400unit</i>	130
<i>vitamin d3 tab 1000unit</i>	130
<i>vitamin d3 tab 50000unt</i>	130
<i>vitamin d-3 tab 5000unit</i>	131
<i>vitamin d tab 1000unit</i>	131
<i>vitamin d tab 400unit</i>	131
<i>vitamin e cap 1000 unit</i>	131
<i>vitamin e cap 100 unit</i>	131
<i>vitamin e cap 200 unit</i>	131
<i>vitamin e cap 400 unit</i>	131
VITAMIN K-1 POW	153
<i>vite/iron chw children</i>	131
VITRAKVI CAP 100MG	31
VITRAKVI CAP 25MG	31
VITRAKVI SOL 20MG/ML	31
VIVITROL INJ 380MG	76
VIZIMPRO TAB 15MG	31
VIZIMPRO TAB 30MG	31
VIZIMPRO TAB 45MG	31
V-MAX CRE	123
<i>voriconazole for inj 200 mg</i>	11
<i>voriconazole for susp 40 mg/ml</i>	11
<i>voriconazole tab 200 mg</i>	11
<i>voriconazole tab 50 mg</i>	11
VOSEVI TAB	16
VOTRIENT TAB 200MG	31
VRAYLAR CAP 1.5-3MG	68
VRAYLAR CAP 1.5MG	68
VRAYLAR CAP 3MG	68
VRAYLAR CAP 4.5MG	68
VRAYLAR CAP 6MG	68
V-R FATIGUE TAB COMPLEX	123
<i>vyfemla tab 0.4-35</i>	86
<i>vylibra tab 0.25-35</i>	86

W

<i>warfarin sodium tab 10 mg</i>	104
<i>warfarin sodium tab 1 mg</i>	104
<i>warfarin sodium tab 2.5 mg</i>	104
<i>warfarin sodium tab 2 mg</i>	104
<i>warfarin sodium tab 3 mg</i>	104
<i>warfarin sodium tab 4 mg</i>	104
<i>warfarin sodium tab 5 mg</i>	104
<i>warfarin sodium tab 6 mg</i>	104
<i>warfarin sodium tab 7.5 mg</i>	104

<i>water for irrigation, sterile irrigation soln</i>	154
WATERMELON LIQ FLAVOR	123
<i>wee care sus 15/1.25</i>	106
<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	104
XARELTO TAB 10MG	104
XARELTO TAB 15MG	104
XARELTO TAB 2.5MG	104
XARELTO TAB 20MG	104
XATMEP SOL 2.5MG/ML	108
XCOPRI PAK 12.5-25	55
XCOPRI PAK 150-200	55
XCOPRI PAK 50-100MG	55
XCOPRI TAB 100MG	55
XCOPRI TAB 150MG	55
XCOPRI TAB 200MG	55
XCOPRI TAB 50-200MG	55
XCOPRI TAB 50MG	55
XELJANZ TAB 10MG	109
XELJANZ TAB 5MG	108
XELJANZ XR TAB 11MG	109
XELJANZ XR TAB 22MG	109
XGEVA INJ	91
XIFAXAN TAB 550MG	101
XIGDUO XR TAB 10-1000	81
XIGDUO XR TAB 10-500MG	81
XIGDUO XR TAB 2.5-1000	80
XIGDUO XR TAB 5-1000MG	81
XIGDUO XR TAB 5-500MG	80
XOLAIR INJ 150MG/ML	142
XOLAIR INJ 75/0.5	142
XOLAIR SOL 150MG	142
XOSPATA TAB 40MG	31
XPOVIO PAK 100MG	31
XPOVIO PAK 40MG	31
XPOVIO PAK 60MG	31
XPOVIO PAK 80MG	31
XTANDI CAP 40MG	26

XULTOPHY INJ 100/3.6	78
XYLITOL POW	153
XYREM SOL 500MG/ML	74
Y	
YF-VAX INJ	112
Z	
zafirlukast tab 10 mg	141
zafirlukast tab 20 mg	141
zaleplon cap 10 mg	71
zaleplon cap 5 mg	71
zarah tab 3-0.03mg	86
ZARXIO INJ 300/0.5	105
ZARXIO INJ 480/0.8	105
ZEJULA CAP 100MG	26
ZELBORAF TAB 240MG	31
ZEMAIRA INJ 1000MG	142
zenatane cap 10mg	144
zenatane cap 20mg	145
zenatane cap 30mg	145
zenatane cap 40mg	145
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
ZERVIAE DRO 0.24%	133
zidovudine cap 100 mg	14
zidovudine syrup 10 mg/ml	14
zidovudine tab 300 mg	14
zinc chloride inj 1 mg/ml	114
ZINC CHLORID GRA	153
zinc gluconate tab 50 mg (elemental zn)	118
ZINC OXIDE POW	153
ZINC SULFATE CAP 50MG	118
ZINC SULFATE POW GRANULAR	118
ZINC SULFATE POW MONOHD	118
zinc sulfate tab 220 mg (50 mg zinc equivalent)	118
zinc tab 50 mg	118
ziprasidone hcl cap 20 mg	68
ziprasidone hcl cap 40 mg	68

ziprasidone hcl cap 60 mg	68
ziprasidone hcl cap 80 mg	68
ziprasidone mesylate for inj 20 mg (base equivalent)	68
ZIRABEV INJ 100/4ML	26
ZIRABEV INJ 400/16ML	26
ZIRGAN GEL 0.15%	132
zoledronic acid inj conc for iv infusion 4 mg/5ml	81
zoledronic acid iv soln 4 mg/100ml	81
zoledronic acid iv soln 5 mg/100ml	81
ZOLINZA CAP 100MG	26
zolmitriptan orally disintegrating tab 2.5 mg	72
zolmitriptan orally disintegrating tab 5 mg	72
zolmitriptan tab 2.5 mg	72
zolmitriptan tab 5 mg	72
zolpidem tartrate tab 10 mg	71
zolpidem tartrate tab 5 mg	71
zonisamide cap 100 mg	56
zonisamide cap 25 mg	56
zonisamide cap 50 mg	56
zoo friends chw	131
ZOO FRIENDS CHW COMPLETE	131
zoo friends chw extra c	131
zoo friends chw gummies	131
ZORTRESS TAB 0.25MG	111
ZORTRESS TAB 0.5MG	111
ZORTRESS TAB 0.75MG	111
ZORTRESS TAB 1MG	111
ZOSTAVAX INJ	112
zostrix hp cre 0.1%	153
ZOSTRIX NAT CRE 0.033%	153
zovia 1/35e tab	86
ZYDELIG TAB 100MG	31
ZYDELIG TAB 150MG	31
ZYKADIA TAB 150MG	31
ZYLET SUS 0.5-0.3%	131
ZYPREXA RELP INJ 210MG	68
ZYPREXA RELP INJ 300MG	68
ZYPREXA RELP INJ 405MG	68
ZYTIGA TAB 500MG	26