

# **MVP Health Care®**

## **2024 MVP DualAccess (HMO D-SNP)**

### **Plans Formulary**

#### **(List of Covered Drugs)**

**Please Read:** This document contains information about the drugs we cover in this plan. This Formulary was updated on December 1, 2024. For more recent information or questions, please contact the MVP Member Services/Customer Care Center.

**Important Message About What You Pay for Vaccines:** Our plan covers most Part D vaccines at no cost to you, even if you haven't paid your deductible.

**Getting Help from Medicare:** If you chose this plan because you were looking for insulin coverage at \$35 a month or less, it is important to know that you may have other options available to you for 2024 at even lower costs because of changes to the Medicare Part D program. Contact Medicare at **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, seven days a week for help comparing your options. TTY users should call 1-877-486-2048.

**Additional Resources to Help:** Please contact the MVP Member Services/Customer Care Center at **1-866-954-1872**.

TTY users should call 711. Hours are seven days a week, 8 am-8 pm Eastern Time. April 1-September 30, call Monday-Friday, 8 am-8 pm.

Visit [mvphealthcare.com/partdformulary](http://mvphealthcare.com/partdformulary) for the most up-to-date Formulary listing.

**Note to existing members:** This Formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (Formulary) refers to "we," "us," or "our," it means MVP Health Care (MVP). When it refers to "plan" or "our plan," it means MVP DualAccess (HMO D-SNP).

This document includes a list of the drugs (Formulary) for our plan which is current as of December 1, 2024. For an updated Formulary, please contact us. Our contact information, along with the date we last updated the Formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, Formulary, pharmacy network, and/or co-payments/co-insurance may change on January 1, 2025, and from time to time during the year.

## What is the MVP Health Care Medicare Part D Formulary?

A Formulary is a list of covered drugs selected by MVP Health Care in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. MVP will generally cover the drugs listed in our Formulary as long as the drug is medically necessary, the prescription is filled at an MVP network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

## Can the Formulary (Drug List) Change?

Most changes in drug coverage happen on January 1, but MVP may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes.

### Changes That Can Affect You This Year

In the below cases, you will be affected by coverage changes during the year.

#### New Generic Drugs

We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.

- If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section entitled "How do I request an exception to the MVP DualAccess Plans Formulary?" on page C.

### **Drugs Removed from the Market**

If the Food and Drug Administration deems a drug on our Formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our Formulary and provide notice to members who take the drug.

### **Other Changes**

We may make other changes that affect members currently taking a drug. For instance, we may add a new generic drug to replace a brand name drug currently on the Formulary; or add new restrictions to the brand name drug or move it to a different cost-sharing tier or both. Or we may add a generic drug that is not new to market to replace a brand name drug currently on the Formulary; or add new restrictions to the brand name drug or move it to a different cost-sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our Formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a one month supply of the drug (up to 30 days).

- If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled, "How Do I Request an Exception to the MVP DualAccess Plans Formulary?"

### **Changes That Will Not Affect You If You Are Currently Taking the Drug**

Generally, if you are taking a drug on our 2024 Formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2024 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed Formulary is current as of December 1, 2024. To get updated information about the drugs covered by MVP Health Care, please contact us. Our contact information appears on the front and back cover pages.

In the event of a change or changes to the Formulary during the year, the changes also will be posted at [mvphealthcare.com](http://mvphealthcare.com). The updated version of the comprehensive Formulary will be posted on the MVP website on a monthly basis as needed. To view the list of changes, visit [mvphealthcare.com/partdformulary](http://mvphealthcare.com/partdformulary).

Or you may request an errata sheet (a copy of the 2024 Formulary changes) by calling the MVP Member Services/Customer Care Center at the phone numbers on the back of your Member ID card.

## How Do I Use the Formulary?

There are two ways to find your drug within the Formulary:

### Medical Condition

The Formulary begins on page 1. The drugs in this Formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular". If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

### Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 104. The Index provides an alphabetical list of all the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index.

1. Look in the Index and find your drug.
2. Next to your drug, you will see the page number where you can find coverage information.
3. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

## What are Generic Drugs?

MVP covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

## **Are There Any Restrictions on My Coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

### **Prior Authorization**

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

### **Quantity Limits**

For certain drugs, MVP limits the amount of the drug that MVP will cover. For example, MVP provides 30 tablets per 30 days per prescription for JANUVIA. This may be in addition to a standard one-month or three-month supply.

### **Step Therapy**

In some cases, MVP requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, MVP may not cover Drug B unless you try Drug A first. If Drug A does not work for you, MVP will then cover Drug B. You can find out if your drug has any additional requirements or limits by looking in the Formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization restriction and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the Formulary, appears on the front and back cover pages.

You can ask MVP to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the MVP DualAccess Plans Formulary?" on the next page for information about how to request an exception.

## **What If My Drug is Not on the Formulary?**

If your drug is not included in this Formulary (list of covered drugs), you should first contact the MVP Member Services/Customer Care Center and ask if your drug is covered.

If you learn that MVP Health Care does not cover your drug, you have two options:

1. You can ask the MVP Member Services/Customer Care Center for a list of similar drugs that are covered by MVP. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by MVP.
2. You can ask MVP to make an exception and cover your drug. See next section for information about how to request an exception.

## **How Do I Request an Exception to the MVP Medicare Part D Formulary?**

You can ask MVP to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our Formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a Formulary drug at a lower cost-sharing level. If approved, this would lower the amount you must pay for your drug. **Note:** You may not ask us to cover a Tier 5 (Specialty Tier) Formulary drug at a lower cost-sharing level.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, MVP limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, MVP will only approve your request for an exception if the alternative drugs included on the plan's Formulary, the lower cost-sharing drug, or additional utilization restrictions would not be as effective in treating your condition and/ or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a Formulary, tiering, or utilization restriction exception. **When you request a Formulary, tiering, or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

## **What Do I Do Before I Can Talk to My Doctor About Changing My Drugs or Requesting an Exception?**

As a new or continuing member in our plan, you may be taking drugs that are not on our Formulary. Or, you may be taking a drug that is on our Formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a Formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our Formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our Formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover up to a cumulative 31-day supply of that drug while you pursue a Formulary exception.

Members who are changing levels of care may be eligible for a transition supply of medication outside of their initial 90-day enrollment transition period. Level of care changes may include: entering or leaving a long-term care facility, discharge from hospital to home, and ending a skilled nursing facility stay and reverting to Part D Formulary coverage under your plan.

## For More Information

For more detailed information about your MVP Health Care prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about MVP Health Care, please contact us. Our contact information, along with the date we last updated the Formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at **1-800-MEDICARE (1-800-633-4227)** 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. Or, visit [medicare.gov](http://medicare.gov).

## The MVP Health Care Medicare Part D Formulary

The Formulary that begins on page 1 provides coverage information about most of the drugs covered by MVP Health Care. If you have trouble finding your drug in the list, turn to the Index that begins on page 104.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., JANUVIA) and generic drugs are listed in lower-case italics (e.g., *allopurinol*).

The information in the Requirements/Limits column tells you if MVP has any special requirements for coverage of your drug.

## Abbreviations and Definitions of Formulary Terms

You may find one or more of the following abbreviations in the Formulary under the Requirements/Limits column next to a drug name.

### **Not Available at Mail Order (NM)**

Certain drugs are not allowed through the mail order pharmacy program. These prescriptions can only be filled at a retail pharmacy.

### **Prior Authorization (PA)**

For safety reasons and/or cost savings, MVP Health Care requires you or your doctor to get prior authorization for certain drugs. This means that you will need to get approval from MVP before you fill your prescriptions. If you don't get approval first, MVP may not cover the drug.

### **Quantity Limits (QL)**

For safety reasons and/or cost savings, for certain drugs MVP Health Care limits the amount of the drug that we will cover. For example, MVP provides one capsule per day for JANUVIA. This limit may be applied to a standard one-month or three-month supply.

### **Step Therapy (ST)**

For safety reasons and/or cost savings, in some cases MVP Health Care requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition,

MVP may not cover Drug B unless you try Drug A first. If Drug A does not work for you, MVP will then cover Drug B.

### **Dispensing Limits (DL)**

For safety reasons and/or cost savings, certain drugs are limited to a one-month supply through a retail pharmacy and are not available through the mail order program.

### **Limited Access (LA)**

Some drugs are available only through a designated Specialty Pharmacy because of manufacturer limited distribution.

### **Part B versus Part D drug coverage (B/D)**

Some drugs could be covered under the Part B (medical) or Part D (prescription drug) benefit, depending on certain criteria. This means that you or your doctor will need to submit a request to MVP so we can determine, based on Medicare guidelines, if your drug will be covered as Part B or Part D. Your cost sharing will be based on this determination.

## Your Costs in the Initial Coverage Period

### Note:

1. Not all MVP Medicare Advantage plans are offered in each New York and Vermont county.
2. If you qualify for New York State EPIC (Elderly Pharmaceutical Insurance Coverage), Vermont VPharm, or Low Income Subsidy, the amounts below may be reduced.

### What you Pay for a 30-Day Supply From a Retail Pharmacy:

MVP Medicare Advantage Plan Type	Deductible	Tier 1 Preferred Generic Drugs	Tier 2 Generic Drugs	Tier 3 Preferred Brand Name Drugs	Tier 4 Non-Preferred Drugs	Tier 5 Specialty Drugs
<b>MVP DualAccess Plans</b>					<i>What you pay after deductible is met</i>	
Select Counties <sup>5</sup>	\$0*				Generic: \$0; Brand: \$0*	

<sup>5</sup>MVP DualAccess is offered in the following New York counties: Albany, Columbia, Dutchess, Greene, Monroe, Orange, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Sullivan, Ulster, and Westchester.

\*MVP DualAccess plans subject to \$0 cost shares and \$0 deductibles, regardless of LIS level.

ANALGESICS .....	1
ANESTHETICS .....	4
ANTI-INFECTIVES .....	4
ANTINEOPLASTIC AGENTS .....	15
CARDIOVASCULAR.....	26
CENTRAL NERVOUS SYSTEM .....	39
ENDOCRINE AND METABOLIC.....	60
GASTROINTESTINAL.....	77
GENITOURINARY .....	80
HEMATOLOGIC .....	82
IMMUNOLOGIC AGENTS .....	84
NUTRITIONAL/SUPPLEMENTS .....	89
OPHTHALMIC.....	91
OTIC .....	94
RESPIRATORY.....	94
TOPICAL.....	98
Index .....	104

**MVP DSNP 2024 eff 12/01/2024**

Drug Name	Requirements/Limits
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**ANALGESICS****GOUT**

<i>allopurinol tab 100 mg</i>	
<i>allopurinol tab 300 mg</i>	
<i>colchicine tab 0.6 mg</i>	QL (60 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	
<i>febuxostat tab 40 mg</i>	QL (30 tabs / 30 days)
<i>febuxostat tab 80 mg</i>	QL (30 tabs / 30 days)
<i>probenecid tab 500 mg</i>	

**MISCELLANEOUS**

<i>butilbital-acetaminophen tab 50-325 mg</i>	QL (60 tabs / 30 days)
<i>butilbital-acetaminophen-caffeine cap 50-300-40 mg</i>	QL (60 caps / 30 days)
<i>butilbital-acetaminophen-caffeine cap 50-325-40 mg</i>	QL (60 caps / 30 days)
<i>butilbital-acetaminophen-caffeine tab 50-325-40 mg</i>	QL (60 tabs / 30 days)
<i>butilbital-aspirin-caffeine cap 50-325-40 mg</i>	QL (60 caps / 30 days)
<i>tencon</i>	QL (60 tabs / 30 days)

**NSAIDS**

<i>celecoxib cap 50 mg</i>	
<i>celecoxib cap 100 mg</i>	
<i>celecoxib cap 200 mg</i>	
<i>celecoxib cap 400 mg</i>	
<i>diclofenac sodium tab delayed release 50 mg</i>	
<i>diclofenac sodium tab delayed release 75 mg</i>	
<i>diclofenac sodium tab er 24hr 100 mg</i>	
<i>ibu tab 600mg</i>	
<i>ibu tab 800mg</i>	
<i>ibuprofen tab 400 mg</i>	
<i>ibuprofen tab 600 mg</i>	
<i>ibuprofen tab 800 mg</i>	
<i>meloxicam tab 7.5 mg</i>	
<i>meloxicam tab 15 mg</i>	
<i>nabumetone tab 500 mg</i>	
<i>nabumetone tab 750 mg</i>	
<i>naproxen tab 250 mg</i>	
<i>naproxen tab 375 mg</i>	
<i>naproxen tab 500 mg</i>	
<i>salsalate tab 500 mg</i>	
<i>salsalate tab 750 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b>OPIOID ANALGESICS, LONG-ACTING</b>	
buprenorphine td patch weekly 5 mcg/hr	QL (4 patches / 28 days)
buprenorphine td patch weekly 7.5 mcg/hr	QL (4 patches / 28 days)
buprenorphine td patch weekly 10 mcg/hr	QL (4 patches / 28 days)
buprenorphine td patch weekly 15 mcg/hr	QL (4 patches / 28 days)
buprenorphine td patch weekly 20 mcg/hr	QL (4 patches / 28 days)
fentanyl td patch 72hr 12 mcg/hr	QL (20 patches / 30 days)
fentanyl td patch 72hr 25 mcg/hr	QL (20 patches / 30 days)
fentanyl td patch 72hr 50 mcg/hr	QL (20 patches / 30 days)
fentanyl td patch 72hr 75 mcg/hr	QL (20 patches / 30 days)
fentanyl td patch 72hr 100 mcg/hr	QL (20 patches / 30 days)
morphine sulfate tab er 15 mg	QL (90 tabs / 30 days)
morphine sulfate tab er 30 mg	QL (90 tabs / 30 days)
morphine sulfate tab er 60 mg	QL (60 tabs / 30 days)
morphine sulfate tab er 100 mg	QL (60 tabs / 30 days)
morphine sulfate tab er 200 mg	QL (60 tabs / 30 days)
oxycodone hcl tab er 12hr deter 10 mg	QL (90 tabs / 30 days)
oxycodone hcl tab er 12hr deter 20 mg	QL (90 tabs / 30 days)
oxycodone hcl tab er 12hr deter 40 mg	QL (60 tabs / 30 days)
oxycodone hcl tab er 12hr deter 80 mg	QL (60 tabs / 30 days)
OXYCONTIN TAB 10MG ER	QL (90 tabs / 30 days)
OXYCONTIN TAB 15MG ER	QL (90 tabs / 30 days)
OXYCONTIN TAB 20MG ER	QL (90 tabs / 30 days)
OXYCONTIN TAB 30MG ER	QL (90 tabs / 30 days)
OXYCONTIN TAB 40MG ER	QL (60 tabs / 30 days)
OXYCONTIN TAB 60MG ER	QL (60 tabs / 30 days)
OXYCONTIN TAB 80MG ER	QL (60 tabs / 30 days)
<b>OPIOID ANALGESICS, SHORT-ACTING</b>	
acetaminophen w/ codeine soln 120-12 mg/5ml	
acetaminophen w/ codeine tab 300-15 mg	QL (360 tabs / 30 days)
acetaminophen w/ codeine tab 300-30 mg	QL (360 tabs / 30 days)
acetaminophen w/ codeine tab 300-60 mg	QL (360 tabs / 30 days)
ascomp/codeine	QL (60 caps / 30 days)
buprenorphine hcl inj 0.3 mg/ml (base equiv)	
butalbital-acetaminophen-caff w/ cod cap 50-325- 40-30 mg	QL (60 caps / 30 days)
butalbital-aspirin-caff w/ codeine cap 50-325-40- 30 mg	QL (60 caps / 30 days)
butorphanol tartrate inj 1 mg/ml	
butorphanol tartrate inj 2 mg/ml	
butorphanol tartrate nasal soln 10 mg/ml	QL (4 bottles / 30 days)
endocet tab 2.5-325	QL (360 tabs / 30 days)
endocet tab 5-325mg	QL (360 tabs / 30 days)
endocet tab 7.5-325mg	QL (360 tabs / 30 days)

PA - Prior Authorization   QL - Quantity Limits   NM - Not available at mail-order   B/D -  
 Covered under Medicare B or D   LA - Limited Access   DL - Medication restricted to a 30  
 day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>endocet tab 10-325mg</i>	QL (360 tabs / 30 days)
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	QL (120 lozenges / 30 days), PA; DL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	QL (360 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	
<i>hydromorphone hcl tab 2 mg</i>	QL (250 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	QL (250 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	QL (250 tabs / 30 days)
<i>morphine sulfate oral soln 10 mg/5ml</i>	
<i>morphine sulfate oral soln 20 mg/5ml</i>	
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	
<i>morphine sulfate suppos 10 mg</i>	
<i>morphine sulfate tab 15 mg</i>	QL (300 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	QL (300 tabs / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	QL (120 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	
<i>oxycodone hcl tab 5 mg</i>	QL (240 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	QL (240 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	QL (200 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	QL (200 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	QL (200 tabs / 30 days)

**PA** - Prior Authorization   **QL** - Quantity Limits   **NM** - Not available at mail-order   **B/D** -  
Covered under Medicare B or D   **LA** - Limited Access   **DL** - Medication restricted to a 30  
day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	QL (360 tabs / 30 days)
<i>oxymorphone hcl tab 5 mg</i>	QL (240 tabs / 30 days)
<i>oxymorphone hcl tab 10 mg</i>	QL (200 tabs / 30 days)
<i>tramadol hcl tab 50 mg</i>	
<i>tramadol hcl tab 100 mg</i>	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	

## **ANESTHETICS**

### **LOCAL ANESTHETICS**

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

## **ANTI-INFECTIVES**

### **ANTI-INFECTIVES - MISCELLANEOUS**

<i>albendazole tab 200 mg</i>	
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	
<i>atovaquone susp 750 mg/5ml</i>	QL (300 mL / 30 days); DL
<i>aztreonam for inj 1 gm</i>	
<i>baciim</i>	
<i>CAYSTON INH 75MG</i>	NM, LA, PA; DL
<i>clindamycin hcl cap 75 mg</i>	
<i>clindamycin hcl cap 150 mg</i>	
<i>clindamycin hcl cap 300 mg</i>	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	
<i>clindamycin phosphate inj 900 mg/6ml</i>	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	
<i>dapsone tab 25 mg</i>	
<i>dapsone tab 100 mg</i>	
<i>daptomycin for iv soln 500 mg</i>	DL
<i>DORIBAX INJ 250MG</i>	
<i>EMVERM CHW 100MG</i>	DL
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	
<i>FIRVANQ SOL 25MG/ML</i>	
<i>FIRVANQ SOL 50MG/ML</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	
<i>gentamicin in saline inj 0.8 mg/ml</i>	
<i>gentamicin in saline inj 1 mg/ml</i>	
<i>gentamicin in saline inj 1.2 mg/ml</i>	
<i>gentamicin in saline inj 1.6 mg/ml</i>	
<i>gentamicin sulfate inj 40 mg/ml</i>	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	
IMPAVIDO CAP 50MG	DL
<i>ivermectin tab 3 mg</i>	
<i>linezolid for susp 100 mg/5ml</i>	DL
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	
<i>linezolid tab 600 mg</i>	
<i>meropenem iv for soln 1 gm</i>	
<i>meropenem iv for soln 500 mg</i>	
<i>methenamine hippurate tab 1 gm</i>	
<i>metronidazole in nacl</i>	
<i>metronidazole tab 250 mg</i>	
<i>metronidazole tab 500 mg</i>	
<i>neomycin sulfate tab 500 mg</i>	
<i>nitazoxanide tab 500 mg</i>	DL
<i>nitrofur mac cap 50mg</i>	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	
<i>pentamidine isethionate inh</i>	B/D
<i>pentamidine isethionate inj</i>	DL
<i>praziquantel tab 600 mg</i>	
<i>pyrimethamine tab 25 mg</i>	DL
<i>streptomycin sulfate for inj 1 gm</i>	
<i>sulfadiazine tab 500 mg</i>	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	
SYNERCID INJ 500MG	DL
<i>tinidazole tab 250 mg</i>	
<i>tinidazole tab 500 mg</i>	
TOBI PODHALR CAP 28MG	NM, LA, PA; DL
<i>tobramycin nebu soln 300 mg/4ml</i>	B/D, NM; DL
<i>tobramycin nebu soln 300 mg/5ml</i>	B/D, NM; DL
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	B/D; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	B/D; DL
<i>trimethoprim tab 100 mg</i>	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	DL
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	DL
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	DL
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	DL
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	DL
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	DL
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	DL
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	
XENLETA TAB 600MG	NM; DL
XIFAXAN TAB 200MG	QL (9 tabs / 30 days), PA; DL
ZEMDRI INJ 500MG/10	DL
<b>ANTIFUNGALS</b>	
ABELCET INJ 5MG/ML	B/D
<i>amphotericin b for iv soln 50 mg</i>	B/D; DL
<i>fluconazole for susp 10 mg/ml</i>	
<i>fluconazole for susp 40 mg/ml</i>	
<i>fluconazole in dextrose</i>	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	DL
<i>fluconazole tab 50 mg</i>	
<i>fluconazole tab 100 mg</i>	
<i>fluconazole tab 150 mg</i>	
<i>fluconazole tab 200 mg</i>	
<i>flucytosine cap 250 mg</i>	
<i>flucytosine cap 500 mg</i>	
<i>griseofulvin microsize susp 125 mg/5ml</i>	
<i>griseofulvin microsize tab 500 mg</i>	
<i>griseofulvin ultramicrosize tab 125 mg</i>	
<i>griseofulvin ultramicrosize tab 250 mg</i>	
<i>itraconazole cap 100 mg</i>	PA
<i>ketoconazole tab 200 mg</i>	
<i>micafungin sodium for iv soln 50 mg</i>	DL
<i>micafungin sodium for iv soln 100 mg</i>	DL
NOXAFIL SUS 40MG/ML	PA; DL
<i>nystatin tab 500000 unit</i>	
<i>posaconazole susp 40 mg/ml</i>	PA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>posaconazole tab delayed release 100 mg</i>	PA; DL
<i>terbinafine hcl tab 250 mg</i>	QL (84 tabs / 365 days)
<i>voriconazole for inj 200 mg</i>	PA; DL
<i>voriconazole for susp 40 mg/ml</i>	DL
<i>voriconazole tab 50 mg</i>	DL
<i>voriconazole tab 200 mg</i>	

#### **ANTIMALARIALS**

<i>atovaquone-proguanil hcl tab 250-100 mg</i>	DL
<i>chloroquine phosphate tab 250 mg</i>	DL
<i>chloroquine phosphate tab 500 mg</i>	DL
<i>COARTEM TAB 20-120MG</i>	DL
<i>mefloquine hcl tab 250 mg</i>	DL
<i>PRIMAQUINE TAB 26.3MG</i>	DL
<i>quinine sulfate cap 324 mg</i>	QL (84 caps / 365 days); DL

#### **ANTIRETROVIRAL AGENTS**

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	NM
<i>abacavir sulfate tab 300 mg (base equiv)</i>	NM
<i>APTVUS CAP 250MG</i>	NM; DL
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	NM
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	NM
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	NM
<i>darunavir tab 600 mg</i>	NM; DL
<i>darunavir tab 800 mg</i>	NM; DL
<i>EDURANT TAB 25MG</i>	NM; DL
<i>efavirenz cap 50 mg</i>	NM
<i>efavirenz cap 200 mg</i>	NM
<i>efavirenz tab 600 mg</i>	NM
<i>emtricitabine caps 200 mg</i>	NM
<i>EMTRIVA SOL 10MG/ML</i>	NM
<i>etravirine tab 100 mg</i>	NM; DL
<i>etravirine tab 200 mg</i>	NM; DL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	NM; DL
<i>FUZEON INJ 90MG</i>	NM, LA
<i>INTELENCE TAB 25MG</i>	NM
<i>INVIRASE TAB 500MG</i>	NM
<i>ISENTRESS CHW 25MG</i>	NM
<i>ISENTRESS CHW 100MG</i>	NM; DL
<i>ISENTRESS HD TAB 600MG</i>	NM; DL
<i>ISENTRESS POW 100MG</i>	NM
<i>ISENTRESS TAB 400MG</i>	NM; DL
<i>lamivudine oral soln 10 mg/ml</i>	NM
<i>lamivudine tab 150 mg</i>	NM
<i>lamivudine tab 300 mg</i>	NM
<i>maraviroc tab 150 mg</i>	NM; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>maraviroc tab 300 mg</i>	NM; DL
<i>nevirapine susp 50 mg/5ml</i>	NM
<i>nevirapine tab 200 mg</i>	NM
<i>nevirapine tab er 24hr 400 mg</i>	NM
NORVIR POW 100MG	NM
NORVIR SOL 80MG/ML	NM
NORVIR TAB 100MG	NM
PIFELTRO TAB 100MG	NM; DL
PREZISTA SUS 100MG/ML	NM
PREZISTA TAB 75MG	NM
PREZISTA TAB 150MG	NM
PREZISTA TAB 600MG	NM; DL
PREZISTA TAB 800MG	NM; DL
RETROVIR INJ 10MG/ML	NM
REYATAZ POW 50MG	NM; DL
<i>ritonavir tab 100 mg</i>	NM
RUKOBIA TAB 600MG ER	NM; DL
SELZENTRY SOL 20MG/ML	NM
SELZENTRY TAB 25MG	QL (120 tabs / 30 days), NM; DL
SELZENTRY TAB 75MG	NM; DL
SUNLENCA INJ	NM, LA; DL
SUNLENCA TAB 300MG	NM, LA; DL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	NM
TIVICAY PD TAB 5MG	NM
TIVICAY TAB 10MG	QL (30 tabs / 30 days), NM
TIVICAY TAB 25MG	NM; DL
TIVICAY TAB 50MG	NM; DL
TYBOST TAB 150MG	NM
VIRACEPT TAB 250MG	NM
VIRACEPT TAB 625MG	NM
VIREAD POW 40MG/GM	NM
VIREAD TAB 150MG	NM
VIREAD TAB 200MG	NM
VIREAD TAB 250MG	NM
<i>zidovudine cap 100 mg</i>	NM
<i>zidovudine syrup 10 mg/ml</i>	NM
<i>zidovudine tab 300 mg</i>	NM
<b>ANTIRETROVIRAL COMBINATION AGENTS</b>	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	NM
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	NM
BIKTARVY TAB	NM; DL
CIMDUO TAB 300-300	NM; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
COMPLERA TAB	NM; DL
DELSTRIGO TAB	NM; DL
DESCOVY TAB 120-15MG	NM; DL
DESCOVY TAB 200/25MG	NM; DL
DOVATO TAB 50-300MG	NM; DL
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	NM; DL
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	NM; DL
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	NM
EVOTAZ TAB 300-150	NM; DL
GENVOYA TAB	NM; DL
JULUCA TAB 50-25MG	NM; DL
<i>lamivudine-zidovudine tab 150-300 mg</i>	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	NM
<i>lopinavir-ritonavir tab 100-25 mg</i>	NM
<i>lopinavir-ritonavir tab 200-50 mg</i>	NM
ODEFSEY TAB	NM; DL
PREZCOBIX TAB 800-150	NM; DL
STRIBILD TAB	NM; DL
SYMTUZA TAB	NM; DL
TEMIXYS TAB 300-300	NM
TRIUMEQ PD TAB	NM; DL
TRIUMEQ TAB	NM; DL

#### **ANTITUBERCULAR AGENTS**

CAPASTAT SUL INJ 1GM
<i>ethambutol hcl tab 100 mg</i>
<i>ethambutol hcl tab 400 mg</i>
<i>isoniazid inj 100 mg/ml</i>
<i>isoniazid syrup 50 mg/5ml</i>
<i>isoniazid tab 100 mg</i>
<i>isoniazid tab 300 mg</i>
PRETOMANID TAB 200MG
PRIFTIN TAB 150MG
<i>pyrazinamide tab 500 mg</i>

<b>Drug Name</b>	<b>Requirements/Limits</b>
rifabutin cap 150 mg	
rifampin cap 150 mg	
rifampin cap 300 mg	
rifampin for inj 600 mg	
SIRTURO TAB 20MG	NM, LA; DL
SIRTURO TAB 100MG	NM, LA; DL
TRECATOR TAB 250MG	
<b>ANTIVIRALS</b>	
acyclovir cap 200 mg	
acyclovir sodium iv soln 50 mg/ml	B/D
acyclovir susp 200 mg/5ml	
acyclovir tab 400 mg	
acyclovir tab 800 mg	
adefovir dipivoxil tab 10 mg	NM
cidofovir iv inj 75 mg/ml	
entecavir tab 0.5 mg	NM
entecavir tab 1 mg	NM
EPCLUSA PAK 150-37.5	NM, PA; DL
EPCLUSA PAK 200-50MG	NM, PA; DL
EPCLUSA TAB 200-50MG	NM, PA; DL
EPCLUSA TAB 400-100	NM, PA; DL
famciclovir tab 125 mg	
famciclovir tab 250 mg	
famciclovir tab 500 mg	
HARVONI PAK 33.75-150MG	NM, PA; DL
HARVONI PAK 45-200MG	NM, PA; DL
HARVONI TAB 90-400MG	NM, PA; DL
LAGEVRIO CAP 200MG	
lamivudine tab 100 mg (hbv)	NM
LIVTENCITY TAB 200MG	NM, LA; DL
MAVYRET PAK 50-20MG	NM, PA; DL
MAVYRET TAB 100-40MG	NM, PA; DL
oseltamivir phosphate cap 30 mg (base equiv)	QL (168 caps / year)
oseltamivir phosphate cap 45 mg (base equiv)	QL (84 caps / year)
oseltamivir phosphate cap 75 mg (base equiv)	QL (84 caps / year)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	QL (720 mL / 180 days)
PAXLOVID TAB 150-100	\$0 cost share
PAXLOVID TAB 300-100	\$0 cost share
PEGASYS INJ	NM; DL
PEGASYS INJ 180MCG/M	NM; DL
PREVYMIS TAB 240MG	DL
PREVYMIS TAB 480MG	DL
RELENZA MIS DISKHALE	QL (3 inhalers / 180 days)

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>ribavirin cap 200 mg</i>	NM, PA; DL
<i>ribavirin tab 200 mg</i>	NM, PA; DL
<i>rimantadine hydrochloride tab 100 mg</i>	
<i>SOVALDI PAK 150MG</i>	NM, PA; DL
<i>SOVALDI PAK 200MG</i>	NM, PA; DL
<i>SOVALDI TAB 200MG</i>	NM, PA; DL
<i>SOVALDI TAB 400MG</i>	NM, PA; DL
<i>valacyclovir hcl tab 1 gm</i>	
<i>valacyclovir hcl tab 500 mg</i>	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	
<i>VOSEVI TAB</i>	NM, PA; DL
<i>XOFLUZA TAB 40MG</i>	QL (4 tabs / 180 days)
<i>XOFLUZA TAB 80MG</i>	QL (2 tabs / 180 days)
<i>ZEPATIER TAB 50-100MG</i>	NM, PA; DL

### ***CEPHALOSPORINS***

<i>cefaclor cap 250 mg</i>
<i>cefaclor cap 500 mg</i>
<i>cefadroxil cap 500 mg</i>
<i>cefadroxil for susp 250 mg/5ml</i>
<i>cefadroxil for susp 500 mg/5ml</i>
<i>cefadroxil tab 1 gm</i>
<i>cefazolin sodium for inj 1 gm</i>
<i>cefazolin sodium for inj 10 gm</i>
<i>cefazolin sodium for inj 500 mg</i>
<i>cefdinir cap 300 mg</i>
<i>cefdinir for susp 125 mg/5ml</i>
<i>cefdinir for susp 250 mg/5ml</i>
<i>cefepime hcl for inj 1 gm</i>
<i>cefepime hcl for iv soln 2 gm</i>
<i>cefixime cap 400 mg</i>
<i>cefixime for susp 100 mg/5ml</i>
<i>cefixime for susp 200 mg/5ml</i>
<i>cefotetan disodium for inj 1 gm</i>
<i>cefotetan disodium for inj 2 gm</i>
<i>cefoxitin sodium for iv soln 1 gm</i>
<i>cefoxitin sodium for iv soln 2 gm</i>
<i>cefoxitin sodium for iv soln 10 gm</i>
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>
<i>cefpodoxime proxetil tab 100 mg</i>
<i>cefpodoxime proxetil tab 200 mg</i>
<i>cefprozil for susp 125 mg/5ml</i>
<i>cefprozil for susp 250 mg/5ml</i>
<i>cefprozil tab 250 mg</i>

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>cefprozil tab 500 mg</i>	
<i>ceftazidime for inj 1 gm</i>	
<i>ceftazidime for inj 6 gm</i>	
<i>ceftazidime for iv soln 2 gm</i>	
<i>ceftriaxone sodium for inj 1 gm</i>	
<i>ceftriaxone sodium for inj 2 gm</i>	
<i>ceftriaxone sodium for inj 10 gm</i>	
<i>ceftriaxone sodium for inj 250 mg</i>	
<i>ceftriaxone sodium for inj 500 mg</i>	
<i>cefuroxime axetil tab 250 mg</i>	
<i>cefuroxime axetil tab 500 mg</i>	
<i>cefuroxime sodium for inj 750 mg</i>	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	
<i>cephalexin cap 250 mg</i>	
<i>cephalexin cap 500 mg</i>	
<i>cephalexin for susp 125 mg/5ml</i>	
<i>cephalexin for susp 250 mg/5ml</i>	
<i>tazicef</i>	
<i>TEFLARO INJ 400MG</i>	
<i>TEFLARO INJ 600MG</i>	
<b>ERYTHROMYCINS/MACROLIDES</b>	
<i>azithromycin for susp 100 mg/5ml</i>	
<i>azithromycin for susp 200 mg/5ml</i>	
<i>azithromycin iv for soln 500 mg</i>	
<i>azithromycin tab 250 mg</i>	
<i>azithromycin tab 500 mg</i>	
<i>azithromycin tab 600 mg</i>	
<i>clarithromycin for susp 125 mg/5ml</i>	
<i>clarithromycin for susp 250 mg/5ml</i>	
<i>clarithromycin tab 250 mg</i>	
<i>clarithromycin tab 500 mg</i>	
<i>clarithromycin tab er 24hr 500 mg</i>	
<i>DIFICID SUS</i>	PA; DL
<i>DIFICID TAB 200MG</i>	PA; DL
<i>e.e.s. 400</i>	
<i>ery-tab</i>	
<i>ERYTHROCIN INJ 500MG</i>	
<i>erythromycin ethylsuccinate tab 400 mg</i>	
<i>erythromycin tab 250 mg</i>	
<i>erythromycin tab 500 mg</i>	
<i>erythromycin tab delayed release 250 mg</i>	
<i>erythromycin tab delayed release 333 mg</i>	
<i>erythromycin tab delayed release 500 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
erythromycin w/ delayed release particles cap 250 mg	
<b>FLUOROQUINOLONES</b>	
ciprofloxacin 200 mg/100ml in d5w	
ciprofloxacin 400 mg/200ml in d5w	
ciprofloxacin hcl tab 250 mg (base equiv)	
ciprofloxacin hcl tab 500 mg (base equiv)	
ciprofloxacin hcl tab 750 mg (base equiv)	
ciprofloxacin iv soln 400 mg/40ml (1%)	
levofloxacin in d5w iv soln 250 mg/50ml	DL
levofloxacin in d5w iv soln 500 mg/100ml	
levofloxacin in d5w iv soln 750 mg/150ml	DL
levofloxacin oral soln 25 mg/ml	
levofloxacin tab 250 mg	
levofloxacin tab 500 mg	
levofloxacin tab 750 mg	
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj	
moxifloxacin hcl tab 400 mg (base equiv)	
ofloxacin tab 300 mg	
ofloxacin tab 400 mg	
<b>PENICILLINS</b>	
amoxicillin & k clavulanate chew tab 400-57 mg	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	
amoxicillin & k clavulanate tab 250-125 mg	
amoxicillin & k clavulanate tab 500-125 mg	
amoxicillin & k clavulanate tab 875-125 mg	
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	
amoxicillin (trihydrate) cap 250 mg	
amoxicillin (trihydrate) cap 500 mg	
amoxicillin (trihydrate) chew tab 125 mg	
amoxicillin (trihydrate) chew tab 250 mg	
amoxicillin (trihydrate) for susp 125 mg/5ml	
amoxicillin (trihydrate) for susp 200 mg/5ml	
amoxicillin (trihydrate) for susp 250 mg/5ml	
amoxicillin (trihydrate) for susp 400 mg/5ml	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>amoxicillin (trihydrate) tab 500 mg</i>	
<i>amoxicillin (trihydrate) tab 875 mg</i>	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>	
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>	
<i>ampicillin cap 250 mg</i>	
<i>ampicillin cap 500 mg</i>	
<i>ampicillin for susp 250 mg/5ml</i>	
<i>ampicillin sodium for inj 1 gm</i>	
<i>ampicillin sodium for inj 2 gm</i>	
<i>ampicillin sodium for inj 125 mg</i>	
<i>ampicillin sodium for iv soln 10 gm</i>	
<i>BICILLIN C-R INJ 900/300</i>	
<i>BICILLIN C-R INJ 1200000</i>	
<i>BICILLIN L-A INJ 600000</i>	
<i>BICILLIN L-A INJ 1200000</i>	
<i>BICILLIN L-A INJ 2400000</i>	
<i>dicloxacillin sodium cap 250 mg</i>	
<i>dicloxacillin sodium cap 500 mg</i>	
<i>nafcillin sodium for inj 1 gm</i>	
<i>nafcillin sodium for inj 2 gm</i>	
<i>nafcillin sodium for iv soln 10 gm</i>	
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	
<i>PEN GK/DEXTR INJ 20000/ML</i>	
<i>PEN GK/DEXTR INJ 40000/ML</i>	
<i>PEN GK/DEXTR INJ 60000/ML</i>	
<i>penicillin g potassium for inj 20000000 unit</i>	
<i>penicillin g sodium for inj 5000000 unit</i>	
<i>penicillin v potassium for soln 125 mg/5ml</i>	
<i>penicillin v potassium for soln 250 mg/5ml</i>	
<i>penicillin v potassium tab 250 mg</i>	
<i>penicillin v potassium tab 500 mg</i>	
<i>pfizerpen</i>	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b>TETRACYCLINES</b>	
doxy 100	
doxycycline hyclate cap 50 mg	
doxycycline hyclate cap 100 mg	
doxycycline hyclate tab 20 mg	
doxycycline hyclate tab 100 mg	
doxycycline monohydrate cap 50 mg	
doxycycline monohydrate cap 75 mg	
doxycycline monohydrate cap 100 mg	
doxycycline monohydrate for susp 25 mg/5ml	
doxycycline monohydrate tab 50 mg	
doxycycline monohydrate tab 75 mg	
doxycycline monohydrate tab 100 mg	
doxycycline monohydrate tab 150 mg	
minocycline hcl cap 50 mg	
minocycline hcl cap 75 mg	
minocycline hcl cap 100 mg	
minocycline hcl tab 50 mg	
minocycline hcl tab 75 mg	
minocycline hcl tab 100 mg	
NUZYRA INJ 100MG	NM, LA; DL
NUZYRA TAB 150MG	NM, LA; DL
tetracycline hcl cap 250 mg	
tetracycline hcl cap 500 mg	
tigecycline for iv soln 50 mg	DL

## **ANTINEOPLASTIC AGENTS**

### **ALKYLATING AGENTS**

bendamustine hcl for iv soln 25 mg	NM; DL
bendamustine hcl for iv soln 100 mg	NM; DL
BICNU INJ 100MG	
busulfan inj 6 mg/ml	DL
carboplatin iv soln 50 mg/5ml	DL
carboplatin iv soln 150 mg/15ml	
carboplatin iv soln 450 mg/45ml	DL
carboplatin iv soln 600 mg/60ml	DL
cisplatin inj 50 mg/50ml (1 mg/ml)	
cisplatin inj 200 mg/200ml (1 mg/ml)	DL
CYCLOPHOSPH TAB 25MG	B/D
CYCLOPHOSPH TAB 50MG	B/D
cyclophosphamide cap 25 mg	B/D
cyclophosphamide cap 50 mg	B/D
GLEOSTINE CAP 10MG	NM
GLEOSTINE CAP 40MG	NM
GLEOSTINE CAP 100MG	NM

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>ifosfamide for inj 1 gm</i>	
<i>LEUKERAN TAB 2MG</i>	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	
<i>oxaliplatin for iv inj 100 mg</i>	
<i>oxaliplatin iv soln 50 mg/10ml</i>	
<i>oxaliplatin iv soln 100 mg/20ml</i>	
<i>thiotepa for inj 15 mg</i>	NM; DL
<i>TREANDA INJ 25MG</i>	NM, LA; DL
<i>TREANDA INJ 100MG</i>	NM, LA; DL
<i>YONDELIS INJ 1MG</i>	NM, LA; DL
<i>ZANOSAR INJ 1GM</i>	

### **ANTIBIOTICS**

<i>bleomycin sulfate for inj 15 unit</i>	
<i>bleomycin sulfate for inj 30 unit</i>	B/D
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	
<i>doxorubicin hcl inj 2 mg/ml</i>	
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	DL
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	DL
<i>mitomycin for iv soln 5 mg</i>	
<i>mitomycin for iv soln 20 mg</i>	DL
<i>mitomycin for iv soln 40 mg</i>	DL

### **ANTIMETABOLITES**

<i>ARRANON INJ 5MG/ML</i>	DL
<i>azacitidine for inj 100 mg</i>	NM; DL
<i>clofarabine iv soln 1 mg/ml</i>	DL
<i>cytarabine inj 20 mg/ml</i>	B/D
<i>cytarabine inj pf 20 mg/ml</i>	DL
<i>cytarabine inj pf 100 mg/ml</i>	B/D
<i>decitabine for inj 50 mg</i>	NM; DL
<i>fludarabine phosphate for inj 50 mg</i>	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	B/D; DL
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	B/D
<i>gemcitabine hcl for inj 1 gm</i>	
<i>gemcitabine hcl for inj 2 gm</i>	
<i>gemcitabine hcl for inj 200 mg</i>	
<i>INQOVI TAB 35-100MG</i>	NM, LA, PA; DL
<i>LONSURF TAB 15-6.14</i>	NM, LA, PA; DL
<i>LONSURF TAB 20-8.19</i>	NM, LA, PA; DL
<i>mercaptopurine tab 50 mg</i>	
<i>methotrexate sodium for inj 1 gm</i>	

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	
ONUREG TAB 200MG	NM, LA, PA; DL
ONUREG TAB 300MG	NM, LA, PA; DL
PURIXAN SUS 20MG/ML	NM, LA
TABLOID TAB 40MG	
<b>HORMONAL ANTINEOPLASTIC AGENTS</b>	
<i>abiraterone acetate tab 250 mg</i>	NM; DL
<i>abiraterone acetate tab 500 mg</i>	NM; DL
<i>anastrozole tab 1 mg</i>	
<i>bicalutamide tab 50 mg</i>	
ELIGARD INJ 7.5MG	NM; DL
ELIGARD INJ 22.5MG	NM
ELIGARD INJ 30MG	NM
ELIGARD INJ 45MG	NM; DL
EMCYT CAP 140MG	
ERLEADA TAB 60MG	NM, LA; DL
ERLEADA TAB 240MG	NM, LA; DL
EULEXIN CAP 125MG	
<i>exemestane tab 25 mg</i>	
FASLODEX INJ 250/5ML	DL
FIRMAGON INJ 80MG	QL (4 vials / 28 days), NM; DL
FIRMAGON INJ 120MG	NM; DL
<i>flutamide cap 125 mg</i>	
<i>letrozole tab 2.5 mg</i>	
<i>leuprolide inj 1mg/0.2</i>	NM
LEUPROLIDE INJ 22.5MG	NM
LUPRON DEPOT INJ 3.75MG	NM; DL
LUPRON DEPOT INJ 7.5MG	NM; DL
LUPRON DEPOT INJ 11.25MG	NM; DL
LUPRON DEPOT INJ 22.5MG	NM; DL
LUPRON DEPOT INJ 30MG	NM; DL
LUPRON DEPOT INJ 45MG	NM; DL
LYSODREN TAB 500MG	NM, LA
<i>megestrol acetate tab 20 mg</i>	PA; DL
<i>megestrol acetate tab 40 mg</i>	PA; DL
<i>nilutamide tab 150 mg</i>	
NUBEQA TAB 300MG	NM, LA; DL
ORGOVYX TAB 120MG	NM, LA; DL
ORSERDU TAB 86MG	NM, LA; DL
ORSERDU TAB 345MG	NM, LA; DL
SOLTAMOX SOL 10MG/5ML	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	DL
TRELSTAR MIX INJ 3.75MG	NM
TRELSTAR MIX INJ 11.25MG	NM
TRELSTAR MIX INJ 22.5MG	NM
XTANDI CAP 40MG	NM, LA; DL
XTANDI TAB 40MG	NM, LA; DL
XTANDI TAB 80MG	NM, LA; DL
YONSA TAB 125MG	NM, LA; DL
<b>IMMUNOMODULATORS</b>	
<i>lenalidomide cap 5 mg</i>	NM, LA; DL
<i>lenalidomide cap 10 mg</i>	NM, LA; DL
<i>lenalidomide cap 15 mg</i>	NM, LA; DL
<i>lenalidomide cap 20 mg</i>	NM, LA; DL
<i>lenalidomide cap 25 mg</i>	NM, LA; DL
<i>lenalidomide caps 2.5 mg</i>	NM, LA; DL
POMALYST CAP 1MG	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 2MG	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 3MG	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 4MG	QL (30 caps / 30 days), NM, LA; DL
REVLIMID CAP 2.5MG	NM, LA; DL
REVLIMID CAP 5MG	NM, LA; DL
REVLIMID CAP 10MG	NM, LA; DL
REVLIMID CAP 15MG	NM, LA; DL
REVLIMID CAP 20MG	NM, LA; DL
REVLIMID CAP 25MG	NM, LA; DL
THALOMID CAP 50MG	NM, LA; DL
THALOMID CAP 100MG	NM, LA; DL
THALOMID CAP 150MG	NM, LA; DL
THALOMID CAP 200MG	NM, LA; DL
<b>MISCELLANEOUS</b>	
BESREMI SOL 500MCG	NM, LA; DL
<i>bexarotene cap 75 mg</i>	NM; DL
<i>dacarbazine for inj 100 mg</i>	
<i>dacarbazine for inj 200 mg</i>	
ERWINAZE INJ 10000UNT	LA; DL
<i>hydroxyurea cap 500 mg</i>	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	

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<b>Drug Name</b>	<b>Requirements/Limits</b>
IWILFIN TAB 192MG	NM, LA, PA; DL
KISQALI 200 PAK FEMARA	NM, PA; DL
KISQALI 400 PAK FEMARA	NM, PA; DL
KISQALI 600 PAK FEMARA	NM, PA; DL
MATULANE CAP 50MG	NM, LA; DL
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	NM; DL
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	NM
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	NM; DL
NIPENT INJ 10MG	DL
PROLEUKIN INJ 22MU	NM; DL
<i>topotecan hcl for inj 4 mg (base equiv)</i>	DL
<i>tretinoin cap 10 mg</i>	DL
WELIREG TAB 40MG	NM, LA; DL

### **MITOTIC INHIBITORS**

ABRAXANE INJ 100MG	NM, LA; DL
DOCETAXEL INJ 80MG/4ML	
DOCETAXEL INJ 160/16ML	
ETOPOPHOS INJ 100MG	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	
HALAVEN INJ 1MG/2ML	NM; DL
IXEMPRA KIT INJ 15MG	NM; DL
JEVTANA INJ 60/1.5ML	NM, LA; DL
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	DL
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	DL
<i>toposar</i>	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml)</i>	
<i>(base equiv)</i>	

### **MOLECULAR TARGET AGENTS**

AFINITOR DIS TAB 2MG	NM, PA; DL
AFINITOR DIS TAB 3MG	NM, PA; DL
AFINITOR DIS TAB 5MG	NM, PA; DL
AKEEGA TAB 50/500MG	NM, LA, PA; DL
AKEEGA TAB 100/500	NM, LA, PA; DL
ALECensa CAP 150MG	NM, LA, PA; DL
ALUNBRIG PAK	NM, LA, PA; DL
ALUNBRIG TAB 30MG	NM, LA, PA; DL
ALUNBRIG TAB 90MG	NM, LA, PA; DL
ALUNBRIG TAB 180MG	NM, LA, PA; DL
ARZERRA CON 100/5ML	NM, LA; DL
AUGTYRO CAP 40MG	NM, LA, PA; DL
AVASTIN INJ	NM, LA; DL
AVASTIN INJ 400/16ML	NM, LA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
AYVAKIT TAB 25MG	NM, LA, PA; DL
AYVAKIT TAB 50MG	NM, LA, PA; DL
AYVAKIT TAB 100MG	NM, LA, PA; DL
AYVAKIT TAB 200MG	NM, LA, PA; DL
AYVAKIT TAB 300MG	NM, LA, PA; DL
BALVERSA TAB 3MG	NM, LA, PA; DL
BALVERSA TAB 4MG	NM, LA, PA; DL
BALVERSA TAB 5MG	NM, LA, PA; DL
BELEODAQ INJ 500MG	NM, LA; DL
BOSULIF CAP 50MG	NM, PA; DL
BOSULIF CAP 100MG	NM, PA; DL
BOSULIF TAB 100MG	NM, PA; DL
BOSULIF TAB 400MG	NM, PA; DL
BOSULIF TAB 500MG	NM, PA; DL
BRAFTOVI CAP 75MG	NM, LA, PA; DL
BRUKINSA CAP 80MG	NM, LA, PA; DL
CABOMETYX TAB 20MG	NM, LA, PA; DL
CABOMETYX TAB 40MG	NM, LA, PA; DL
CABOMETYX TAB 60MG	NM, LA, PA; DL
CALQUENCE CAP 100MG	NM, LA, PA; DL
CALQUENCE TAB 100MG	NM, LA, PA; DL
CAPRELSA TAB 100MG	QL (60 tabs / 30 days), NM, LA, PA; DL
CAPRELSA TAB 300MG	QL (30 tabs / 30 days), NM, LA, PA; DL
COMETRIQ (60MG DOSE)	NM, LA, PA; DL
COMETRIQ KIT 100MG	NM, LA, PA; DL
COMETRIQ KIT 140MG	NM, LA, PA; DL
COPIKTRA CAP 15MG	NM, LA, PA; DL
COPIKTRA CAP 25MG	NM, LA, PA; DL
COTELLIC TAB 20MG	NM, LA, PA; DL
CYRAMZA INJ 100/10ML	NM, LA; DL
CYRAMZA INJ 500/50ML	NM, LA; DL
DARZALEX SOL 100MG/5M	NM, LA; DL
DARZALEX SOL 400MG/20	NM, LA; DL
<i>dasatinib tab 20 mg</i>	NM, PA; DL
<i>dasatinib tab 50 mg</i>	NM, PA; DL
<i>dasatinib tab 70 mg</i>	NM, PA; DL
<i>dasatinib tab 80 mg</i>	NM, PA; DL
<i>dasatinib tab 100 mg</i>	NM, PA; DL
<i>dasatinib tab 140 mg</i>	NM, PA; DL
DAURISMO TAB 25MG	NM, LA, PA; DL
DAURISMO TAB 100MG	NM, LA, PA; DL
EMPLICITI INJ 300MG	NM, LA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
EMPLICITI INJ 400MG	NM, LA; DL
ERBITUX INJ 100MG	NM; DL
ERBITUX INJ 200MG	NM; DL
ERIVEDGE CAP 150MG	NM, LA; DL
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	NM; DL
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	NM; DL
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	NM; DL
<i>everolimus tab 2.5 mg</i>	NM, PA; DL
<i>everolimus tab 5 mg</i>	NM, PA; DL
<i>everolimus tab 7.5 mg</i>	NM, PA; DL
<i>everolimus tab 10 mg</i>	NM, PA; DL
<i>everolimus tab for oral susp 2 mg</i>	NM, PA; DL
<i>everolimus tab for oral susp 3 mg</i>	NM, PA; DL
<i>everolimus tab for oral susp 5 mg</i>	NM, PA; DL
FARYDAK CAP 10MG	NM, LA, PA; DL
FARYDAK CAP 15MG	NM, LA, PA; DL
FARYDAK CAP 20MG	NM, LA, PA; DL
FOTIVDA CAP 0.89MG	NM, LA, PA; DL
FOTIVDA CAP 1.34MG	NM, LA, PA; DL
FRUZAQLA CAP 1MG	NM, LA, PA; DL
FRUZAQLA CAP 5MG	NM, LA, PA; DL
GAVRETO CAP 100MG	NM, LA, PA; DL
<i>gefitinib tab 250 mg</i>	NM, PA; DL
GILOTrif TAB 20MG	NM, LA; DL
GILOTrif TAB 30MG	NM, LA; DL
GILOTrif TAB 40MG	NM, LA; DL
HERCEPTIN INJ 150MG	NM, LA; DL
HERCEPTIN INJ 440MG	DL
IBRANCE CAP 75MG	NM, LA, PA; DL
IBRANCE CAP 100MG	NM, LA, PA; DL
IBRANCE CAP 125MG	NM, LA, PA; DL
IBRANCE TAB 75MG	NM, LA, PA; DL
IBRANCE TAB 100MG	NM, LA, PA; DL
IBRANCE TAB 125MG	NM, LA, PA; DL
ICLUSIG TAB 10MG	NM, LA, PA; DL
ICLUSIG TAB 15MG	NM, LA, PA; DL
ICLUSIG TAB 30MG	NM, LA, PA; DL
ICLUSIG TAB 45MG	NM, LA, PA; DL
IDHIFA TAB 50MG	NM, LA, PA; DL
IDHIFA TAB 100MG	NM, LA, PA; DL
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	QL (90 tabs / 30 days), NM, PA; DL
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	QL (60 tabs / 30 days), NM, PA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
IMBRUICA CAP 70MG	NM, LA, PA; DL
IMBRUICA CAP 140MG	NM, LA, PA; DL
IMBRUICA SUS 70MG/ML	NM, LA, PA; DL
IMBRUICA TAB 140MG	NM, LA, PA; DL
IMBRUICA TAB 280MG	NM, LA, PA; DL
IMBRUICA TAB 420MG	NM, LA, PA; DL
IMBRUICA TAB 560MG	NM, LA, PA; DL
IMDELLTRA INJ 1MG	NM, LA, PA; DL
IMDELLTRA INJ 10MG	NM, LA, PA; DL
INLYTA TAB 1MG	NM, LA, PA; DL
INLYTA TAB 5MG	NM, LA, PA; DL
INREBIC CAP 100MG	QL (120 caps / 30 days), NM, LA, PA; DL
IRESSA TAB 250MG	NM, LA, PA; DL
ISTODAX INJ 10MG	NM; DL
JAKAFI TAB 5MG	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 10MG	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 15MG	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 20MG	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 25MG	QL (60 tabs / 30 days), NM, LA, PA; DL
JAYPIRCA TAB 50MG	NM, LA, PA; DL
JAYPIRCA TAB 100MG	NM, LA, PA; DL
KADCYLA INJ 100MG	NM, LA; DL
KADCYLA INJ 160MG	NM, LA; DL
KEYTRUDA INJ 100MG/4M	NM, LA; DL
KISQALI 200 DOSE	NM, PA; DL
KISQALI 400 DOSE	NM, PA; DL
KISQALI 600 DOSE	NM, PA; DL
KOSELUGO CAP 10MG	NM, LA, PA; DL
KOSELUGO CAP 25MG	NM, LA, PA; DL
KRAZATI TAB 200MG	NM, LA, PA; DL
KYPROLIS SOL 30MG	NM, LA; DL
KYPROLIS SOL 60MG	NM, LA; DL
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	NM; DL
LARTRUVO INJ 10MG/ML	LA; DL
LARTRUVO INJ 190/19ML	LA; DL
LAZCLUZE TAB 80MG	NM, LA, PA; DL
LAZCLUZE TAB 240MG	NM, LA, PA; DL
LENVIMA CAP 4MG	NM, LA, PA; DL
LENVIMA CAP 8 MG	NM, LA, PA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
LENVIMA CAP 10 MG	NM, LA, PA; DL
LENVIMA CAP 12MG	NM, LA, PA; DL
LENVIMA CAP 14 MG	NM, LA, PA; DL
LENVIMA CAP 18 MG	NM, LA, PA; DL
LENVIMA CAP 20 MG	NM, LA, PA; DL
LENVIMA CAP 24 MG	NM, LA, PA; DL
LORBRENA TAB 25MG	NM, LA, PA; DL
LORBRENA TAB 100MG	NM, LA, PA; DL
LUMAKRAS TAB 120MG	NM, LA, PA; DL
LUMAKRAS TAB 320MG	NM, LA, PA; DL
LYNPARZA TAB 100MG	NM, LA, PA; DL
LYNPARZA TAB 150MG	NM, LA, PA; DL
LYTGOBI TAB 4MG	NM, LA, PA; DL
MEKINIST SOL 0.05/ML	NM, LA, PA; DL
MEKINIST TAB 0.5MG	NM, LA, PA; DL
MEKINIST TAB 2MG	NM, LA, PA; DL
MEKTOVI TAB 15MG	NM, LA, PA; DL
NERLYNX TAB 40MG	NM, LA, PA; DL
NEXAVAR TAB 200MG	NM, LA, PA; DL
NINLARO CAP 2.3MG	NM, PA; DL
NINLARO CAP 3MG	NM, PA; DL
NINLARO CAP 4MG	NM, PA; DL
ODOMZO CAP 200MG	NM, LA, PA; DL
OGSIVEO TAB 50MG	NM, LA, PA; DL
OGSIVEO TAB 100MG	NM, LA, PA; DL
OGSIVEO TAB 150MG	NM, LA, PA; DL
OJEMDA SUS 25MG/ML	NM, LA, PA; DL
OJEMDA TAB 100MG	NM, LA, PA; DL
OJJAARA TAB 100MG	NM, LA, PA; DL
OJJAARA TAB 150MG	NM, LA, PA; DL
OJJAARA TAB 200MG	NM, LA, PA; DL
<i>pazopanib hcl tab 200 mg (base equiv)</i>	NM; DL
PEMAZYRE TAB 4.5MG	NM, LA, PA; DL
PEMAZYRE TAB 9MG	NM, LA, PA; DL
PEMAZYRE TAB 13.5MG	NM, LA, PA; DL
PERJETA INJ 420/14ML	NM, LA; DL
PIQRAY 200MG TAB DOSE	NM, PA; DL
PIQRAY 250MG TAB DOSE	NM, PA; DL
PIQRAY 300MG TAB DOSE	NM, PA; DL
QINLOCK TAB 50MG	NM, LA, PA; DL
RETEVMO CAP 40MG	NM, LA, PA; DL
RETEVMO CAP 80MG	NM, LA, PA; DL
RETEVMO TAB 40MG	NM, LA, PA; DL
RETEVMO TAB 80MG	NM, LA, PA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
RETEVMO TAB 120MG	NM, LA, PA; DL
RETEVMO TAB 160MG	NM, LA, PA; DL
REZLIDHIA CAP 150MG	NM, LA; DL
RITUXAN INJ 100MG	NM, LA; DL
RITUXAN INJ 500MG	NM, LA; DL
ROZLYTREK CAP 100MG	NM, LA, PA; DL
ROZLYTREK CAP 200MG	NM, LA, PA; DL
ROZLYTREK PAK 50MG	NM, LA, PA; DL
RUBRACA TAB 200MG	NM, LA, PA; DL
RUBRACA TAB 250MG	NM, LA, PA; DL
RUBRACA TAB 300MG	NM, LA, PA; DL
RYDAPT CAP 25MG	NM, PA; DL
SCEMBLIX TAB 20MG	NM, PA; DL
SCEMBLIX TAB 40MG	NM, PA; DL
SCEMBLIX TAB 100MG	NM, PA; DL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	NM, PA; DL
SPRYCEL TAB 20MG	NM, PA; DL
SPRYCEL TAB 50MG	NM, PA; DL
SPRYCEL TAB 70MG	NM, PA; DL
SPRYCEL TAB 80MG	NM, PA; DL
SPRYCEL TAB 100MG	NM, PA; DL
SPRYCEL TAB 140MG	NM, PA; DL
STIVARGA TAB 40MG	NM, LA, PA; DL
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	NM, PA; DL
<i>sunitinib malate cap 25 mg (base equivalent)</i>	NM, PA; DL
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	NM, PA; DL
<i>sunitinib malate cap 50 mg (base equivalent)</i>	NM, PA; DL
TABRECTA TAB 150MG	NM, PA; DL
TABRECTA TAB 200MG	NM, PA; DL
TAFINLAR CAP 50MG	NM, LA; DL
TAFINLAR CAP 75MG	NM, LA; DL
TAFINLAR TAB 10MG	NM, LA; DL
TAGRISSO TAB 40MG	NM, LA, PA; DL
TAGRISSO TAB 80MG	NM, LA, PA; DL
TALZENNA CAP 0.1MG	NM, LA, PA; DL
TALZENNA CAP 0.5MG	NM, LA, PA; DL
TALZENNA CAP 0.25MG	NM, LA, PA; DL
TALZENNA CAP 0.35MG	NM, LA, PA; DL
TALZENNA CAP 0.75MG	NM, LA, PA; DL
TALZENNA CAP 1MG	NM, LA, PA; DL
TASIGNA CAP 50MG	NM; DL
TASIGNA CAP 150MG	NM; DL
TASIGNA CAP 200MG	NM; DL
TAZVERIK TAB 200MG	NM, LA, PA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
TECENTRIQ INJ 1200/20	NM, LA; DL
TECVAYLI INJ 30MG/3ML	NM, LA, PA; DL
TECVAYLI INJ 153/1.7	NM, LA, PA; DL
TEPMETKO TAB 225MG	NM, LA, PA; DL
TIBSOVO TAB 250MG	NM, LA; DL
TORISEL INJ 25MG/ML	NM; DL
<i>torpenz tab 2.5mg</i>	NM, LA, PA; DL
<i>torpenz tab 5mg</i>	NM, LA, PA; DL
<i>torpenz tab 7.5mg</i>	NM, LA, PA; DL
<i>torpenz tab 10mg</i>	NM, LA, PA; DL
TRUQAP PAK 160MG	NM, LA, PA; DL
TRUQAP PAK 200MG	NM, LA, PA; DL
TRUQAP TAB 160MG	NM, LA, PA; DL
TRUQAP TAB 200MG	NM, LA, PA; DL
TRUSELTIQ CAP 50MG	LA, PA; DL
TRUSELTIQ CAP 75MG	LA, PA; DL
TRUSELTIQ CAP 100MG	LA, PA; DL
TRUSELTIQ CAP 125MG	LA, PA; DL
TUKYSA TAB 50MG	NM, LA, PA; DL
TUKYSA TAB 150MG	NM, LA, PA; DL
TURALIO CAP 125MG	NM, LA, PA; DL
TURALIO CAP 200MG	NM, LA, PA; DL
UKONIQ TAB 200MG	LA, PA; DL
VANFLYTA TAB 17.7MG	NM, LA, PA; DL
VANFLYTA TAB 26.5MG	NM, LA, PA; DL
VECTIBIX INJ 100MG	NM, LA; DL
VECTIBIX INJ 400MG	NM, LA; DL
VENCLEXTA TAB 10MG	NM, LA, PA; DL
VENCLEXTA TAB 50MG	NM, LA, PA; DL
VENCLEXTA TAB 100MG	NM, LA, PA; DL
VENCLEXTA TAB START PK	NM, LA, PA; DL
VERZENIO TAB 50MG	NM, LA, PA; DL
VERZENIO TAB 100MG	NM, LA, PA; DL
VERZENIO TAB 150MG	NM, LA, PA; DL
VERZENIO TAB 200MG	NM, LA, PA; DL
VITRAKVI CAP 25MG	NM, LA, PA; DL
VITRAKVI CAP 100MG	NM, LA, PA; DL
VITRAKVI SOL 20MG/ML	NM, LA, PA; DL
VIZIMPRO TAB 15MG	NM, LA, PA; DL
VIZIMPRO TAB 30MG	NM, LA, PA; DL
VIZIMPRO TAB 45MG	NM, LA, PA; DL
VONJO CAP 100MG	QL (120 caps / 30 days), NM, LA, PA; DL
VORANIGO TAB 10MG	NM, LA, PA; DL

**PA** - Prior Authorization   **QL** - Quantity Limits   **NM** - Not available at mail-order   **B/D** -  
 Covered under Medicare B or D   **LA** - Limited Access   **DL** - Medication restricted to a 30  
 day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
VORANIGO TAB 40MG	NM, LA, PA; DL
VOTRIENT TAB 200MG	NM, LA; DL
XALKORI CAP 20MG	NM, LA, PA; DL
XALKORI CAP 50MG	NM, LA, PA; DL
XALKORI CAP 150MG	NM, LA, PA; DL
XALKORI CAP 200MG	NM, LA, PA; DL
XALKORI CAP 250MG	NM, LA, PA; DL
XOSPATA TAB 40MG	NM, LA, PA; DL
XPOVIO 40 MG TWICE WEEKLY	NM, LA, PA; DL
XPOVIO PAK 40MG	NM, LA, PA; DL
XPOVIO PAK 50MG	NM, LA, PA; DL
XPOVIO PAK 60MG	NM, LA, PA; DL
XPOVIO PAK 80MG	NM, LA, PA; DL
ZEJULA TAB 100MG	NM, LA, PA; DL
ZEJULA TAB 200MG	NM, LA, PA; DL
ZEJULA TAB 300MG	NM, LA, PA; DL
ZELBORAF TAB 240MG	NM, LA, PA; DL
ZOLINZA CAP 100MG	NM; DL
ZYDELIG TAB 100MG	NM, LA, PA; DL
ZYDELIG TAB 150MG	NM, LA, PA; DL
ZYKADIA TAB 150MG	NM, LA, PA; DL

### **PROTECTIVE AGENTS**

*dexrazoxane hcl for inj 250 mg (base equivalent)*

*ELITEK INJ 1.5MG* DL

*ELITEK INJ 7.5MG* DL

*leucovorin calcium for inj 50 mg*

*leucovorin calcium for inj 100 mg*

*leucovorin calcium for inj 200 mg*

*leucovorin calcium for inj 350 mg*

*leucovorin calcium tab 5 mg*

*leucovorin calcium tab 10 mg*

*leucovorin calcium tab 15 mg*

*leucovorin calcium tab 25 mg*

*levoleucovorin calcium iv soln pf 175 mg/17.5ml* NM; DL  
(base equiv)

*mesna inj 100 mg/ml*

*MESNEX TAB 400MG*

### **CARDIOVASCULAR**

#### **ACE INHIBITOR COMBINATIONS**

*amlodipine besylate-benazepril hcl cap 2.5-10 mg*

*amlodipine besylate-benazepril hcl cap 5-10 mg*

*amlodipine besylate-benazepril hcl cap 5-20 mg*

*amlodipine besylate-benazepril hcl cap 5-40 mg*

*amlodipine besylate-benazepril hcl cap 10-20 mg*

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</i>	
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	
<b>ACE INHIBITORS</b>	
<i>benazepril hcl tab 5 mg</i>	
<i>benazepril hcl tab 10 mg</i>	
<i>benazepril hcl tab 20 mg</i>	
<i>benazepril hcl tab 40 mg</i>	
<i>captopril tab 12.5 mg</i>	
<i>captopril tab 25 mg</i>	
<i>captopril tab 50 mg</i>	
<i>captopril tab 100 mg</i>	
<i>enalapril maleate tab 2.5 mg</i>	
<i>enalapril maleate tab 5 mg</i>	
<i>enalapril maleate tab 10 mg</i>	
<i>enalapril maleate tab 20 mg</i>	
<i>fosinopril sodium tab 10 mg</i>	
<i>fosinopril sodium tab 20 mg</i>	
<i>fosinopril sodium tab 40 mg</i>	
<i>lisinopril tab 2.5 mg</i>	
<i>lisinopril tab 5 mg</i>	
<i>lisinopril tab 10 mg</i>	
<i>lisinopril tab 20 mg</i>	
<i>lisinopril tab 30 mg</i>	
<i>lisinopril tab 40 mg</i>	
<i>moexipril hcl tab 7.5 mg</i>	
<i>moexipril hcl tab 15 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>perindopril erbumine tab 2 mg</i>	
<i>perindopril erbumine tab 4 mg</i>	
<i>perindopril erbumine tab 8 mg</i>	
<i>quinapril hcl tab 5 mg</i>	
<i>quinapril hcl tab 10 mg</i>	
<i>quinapril hcl tab 20 mg</i>	
<i>quinapril hcl tab 40 mg</i>	
<i>ramipril cap 1.25 mg</i>	
<i>ramipril cap 2.5 mg</i>	
<i>ramipril cap 5 mg</i>	
<i>ramipril cap 10 mg</i>	
<i>trandolapril tab 1 mg</i>	
<i>trandolapril tab 2 mg</i>	
<i>trandolapril tab 4 mg</i>	
<b>ALDOSTERONE RECEPTOR ANTAGONISTS</b>	
<i>eplerenone tab 25 mg</i>	
<i>eplerenone tab 50 mg</i>	
<i>KERENDIA TAB 10MG</i>	
<i>KERENDIA TAB 20MG</i>	
<i>spironolactone tab 25 mg</i>	
<i>spironolactone tab 50 mg</i>	
<i>spironolactone tab 100 mg</i>	
<b>ALPHA BLOCKERS</b>	
<i>doxazosin mesylate tab 1 mg</i>	
<i>doxazosin mesylate tab 2 mg</i>	
<i>doxazosin mesylate tab 4 mg</i>	
<i>doxazosin mesylate tab 8 mg</i>	
<i>prazosin hcl cap 1 mg</i>	
<i>prazosin hcl cap 2 mg</i>	
<i>prazosin hcl cap 5 mg</i>	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	
<b>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS</b>	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	
<i>amlodipine besylateValsartan tab 5-160 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	
<i>ENTRESTO CAP 6-6MG</i>	
<i>ENTRESTO CAP 15-16MG</i>	
<i>ENTRESTO TAB 24-26MG</i>	
<i>ENTRESTO TAB 49-51MG</i>	
<i>ENTRESTO TAB 97-103MG</i>	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i>	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	
<i>telmisartan-amlodipine tab 40-5 mg</i>	
<i>telmisartan-amlodipine tab 40-10 mg</i>	
<i>telmisartan-amlodipine tab 80-5 mg</i>	
<i>telmisartan-amlodipine tab 80-10 mg</i>	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
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<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	

### **ANGIOTENSIN II RECEPTOR ANTAGONISTS**

<i>candesartan cilexetil tab 4 mg</i>	
<i>candesartan cilexetil tab 8 mg</i>	
<i>candesartan cilexetil tab 16 mg</i>	
<i>candesartan cilexetil tab 32 mg</i>	
<i>irbesartan tab 75 mg</i>	
<i>irbesartan tab 150 mg</i>	
<i>irbesartan tab 300 mg</i>	
<i>losartan potassium tab 25 mg</i>	
<i>losartan potassium tab 50 mg</i>	
<i>losartan potassium tab 100 mg</i>	
<i>olmesartan medoxomil tab 5 mg</i>	
<i>olmesartan medoxomil tab 20 mg</i>	
<i>olmesartan medoxomil tab 40 mg</i>	
<i>telmisartan tab 20 mg</i>	
<i>telmisartan tab 40 mg</i>	
<i>telmisartan tab 80 mg</i>	
<i>valsartan tab 40 mg</i>	
<i>valsartan tab 80 mg</i>	
<i>valsartan tab 160 mg</i>	
<i>valsartan tab 320 mg</i>	

### **ANTIARRHYTHMICS**

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

<b>Drug Name</b>	<b>Requirements/Limits</b>
NORPACE CAP 150MG CR	
pacerone	
procainamide hcl inj 100 mg/ml	
propafenone hcl cap er 12hr 225 mg	
propafenone hcl cap er 12hr 325 mg	
propafenone hcl cap er 12hr 425 mg	
propafenone hcl tab 150 mg	
propafenone hcl tab 225 mg	
propafenone hcl tab 300 mg	
quinidine gluconate tab er 324 mg	
quinidine sulfate tab 200 mg	
quinidine sulfate tab 300 mg	
sorine	
sotalol hcl (afib/afl) tab 80 mg	
sotalol hcl (afib/afl) tab 120 mg	
sotalol hcl (afib/afl) tab 160 mg	
sotalol hcl tab 80 mg	
sotalol hcl tab 120 mg	
sotalol hcl tab 160 mg	
sotalol hcl tab 240 mg	
<b>ANTILIPEMICS, FIBRATES</b>	
fenofibrate micronized cap 43 mg	
fenofibrate micronized cap 67 mg	
fenofibrate micronized cap 134 mg	
fenofibrate micronized cap 200 mg	
fenofibrate tab 48 mg	
fenofibrate tab 54 mg	
fenofibrate tab 145 mg	
fenofibrate tab 160 mg	
gemfibrozil tab 600 mg	
<b>ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS</b>	
atorvastatin calcium tab 10 mg (base equivalent)	
atorvastatin calcium tab 20 mg (base equivalent)	
atorvastatin calcium tab 40 mg (base equivalent)	
atorvastatin calcium tab 80 mg (base equivalent)	
fluvastatin sodium cap 20 mg (base equivalent)	
fluvastatin sodium cap 40 mg (base equivalent)	
LIVALO TAB 1MG	
LIVALO TAB 2MG	
LIVALO TAB 4MG	
lovastatin tab 10 mg	
lovastatin tab 20 mg	
lovastatin tab 40 mg	
pitavastatin calcium tab 1 mg	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>pitavastatin calcium tab 2 mg</i>	
<i>pitavastatin calcium tab 4 mg</i>	
<i>pravastatin sodium tab 10 mg</i>	
<i>pravastatin sodium tab 20 mg</i>	
<i>pravastatin sodium tab 40 mg</i>	
<i>pravastatin sodium tab 80 mg</i>	
<i>rosuvastatin calcium tab 5 mg</i>	
<i>rosuvastatin calcium tab 10 mg</i>	
<i>rosuvastatin calcium tab 20 mg</i>	
<i>rosuvastatin calcium tab 40 mg</i>	
<i>simvastatin tab 5 mg</i>	
<i>simvastatin tab 10 mg</i>	
<i>simvastatin tab 20 mg</i>	
<i>simvastatin tab 40 mg</i>	
<i>simvastatin tab 80 mg</i>	
<b>ANTILIPEMICS, MISCELLANEOUS</b>	
<i>cholestyramine light powder 4 gm/dose</i>	
<i>cholestyramine powder packets 4 gm</i>	
<i>colesevelam hcl tab 625 mg</i>	
<i>colestipol hcl granule packets 5 gm</i>	
<i>colestipol hcl tab 1 gm</i>	
<i>ezetimibe tab 10 mg</i>	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	
<i>icosapent ethyl cap 0.5 gm</i>	
<i>icosapent ethyl cap 1 gm</i>	
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	
<i>niacor</i>	
<i>omega-3-acid ethyl esters cap 1 gm</i>	
PRALUENT INJ 75MG/ML	QL (2 injections / 28 days), NM, PA; DL
PRALUENT INJ 150MG/ML	QL (2 injections / 28 days), NM, PA; DL
<i>prevalite</i>	
<i>VASCEPA CAP 0.5GM</i>	
<i>VASCEPA CAP 1GM</i>	
<b>BETA-BLOCKER/DIURETIC COMBINATIONS</b>	
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
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*bisoprolol & hydrochlorothiazide tab 5-6.25 mg*

*bisoprolol & hydrochlorothiazide tab 10-6.25 mg*

*metoprolol & hydrochlorothiazide tab 50-25 mg*

*metoprolol & hydrochlorothiazide tab 100-25 mg*

*metoprolol & hydrochlorothiazide tab 100-50 mg*

### **BETA-BLOCKERS**

*acebutolol hcl cap 200 mg*

*acebutolol hcl cap 400 mg*

*atenolol tab 25 mg*

*atenolol tab 50 mg*

*atenolol tab 100 mg*

*betaxolol hcl tab 10 mg*

*betaxolol hcl tab 20 mg*

*bisoprolol fumarate tab 5 mg*

*bisoprolol fumarate tab 10 mg*

*carvedilol phosphate cap er 24hr 10 mg*

*carvedilol phosphate cap er 24hr 20 mg*

*carvedilol phosphate cap er 24hr 40 mg*

*carvedilol phosphate cap er 24hr 80 mg*

*carvedilol tab 3.125 mg*

*carvedilol tab 6.25 mg*

*carvedilol tab 12.5 mg*

*carvedilol tab 25 mg*

*labetalol hcl iv soln 5 mg/ml*

*labetalol hcl tab 100 mg*

*labetalol hcl tab 200 mg*

*labetalol hcl tab 300 mg*

*metoprolol succinate tab er 24hr 25 mg (tartrate equiv)*

*metoprolol succinate tab er 24hr 50 mg (tartrate equiv)*

*metoprolol succinate tab er 24hr 100 mg (tartrate equiv)*

*metoprolol succinate tab er 24hr 200 mg (tartrate equiv)*

*metoprolol tartrate tab 25 mg*

*metoprolol tartrate tab 37.5 mg*

*metoprolol tartrate tab 50 mg*

*metoprolol tartrate tab 75 mg*

*metoprolol tartrate tab 100 mg*

*nadolol tab 20 mg*

*nadolol tab 40 mg*

*nadolol tab 80 mg*

*nebivolol hcl tab 2.5 mg (base equivalent)*

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	
<i>pindolol tab 5 mg</i>	
<i>pindolol tab 10 mg</i>	
<i>propranolol hcl cap er 24hr 60 mg</i>	
<i>propranolol hcl cap er 24hr 80 mg</i>	
<i>propranolol hcl cap er 24hr 120 mg</i>	
<i>propranolol hcl cap er 24hr 160 mg</i>	
<i>propranolol hcl tab 10 mg</i>	
<i>propranolol hcl tab 20 mg</i>	
<i>propranolol hcl tab 40 mg</i>	
<i>propranolol hcl tab 60 mg</i>	
<i>propranolol hcl tab 80 mg</i>	
<i>timolol maleate tab 5 mg</i>	
<i>timolol maleate tab 10 mg</i>	
<i>timolol maleate tab 20 mg</i>	
<b>CALCIUM CHANNEL BLOCKERS</b>	
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	
<i>cartia xt</i>	
<i>dilt-xr</i>	
<i>diltiazem hcl cap er 12hr 60 mg</i>	
<i>diltiazem hcl cap er 12hr 90 mg</i>	
<i>diltiazem hcl cap er 12hr 120 mg</i>	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	
<i>diltiazem hcl tab 30 mg</i>	
<i>diltiazem hcl tab 60 mg</i>	
<i>diltiazem hcl tab 90 mg</i>	
<i>diltiazem hcl tab 120 mg</i>	
<i>diltiazem hcl tab er 24hr 120 mg</i>	
<i>diltiazem hcl tab er 24hr 180 mg</i>	
<i>diltiazem hcl tab er 24hr 240 mg</i>	
<i>diltiazem hcl tab er 24hr 300 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>diltiazem hcl tab er 24hr 360 mg</i>	
<i>diltiazem hcl tab er 24hr 420 mg</i>	
<i>felodipine tab er 24hr 2.5 mg</i>	
<i>felodipine tab er 24hr 5 mg</i>	
<i>felodipine tab er 24hr 10 mg</i>	
<i>isradipine cap 2.5 mg</i>	
<i>isradipine cap 5 mg</i>	
<i>matzim la tab 180mg/24</i>	
<i>matzim la tab 240mg/24</i>	
<i>matzim la tab 300mg/24</i>	
<i>matzim la tab 360mg/24</i>	
<i>matzim la tab 420mg/24</i>	
<i>nicardipine hcl cap 20 mg</i>	
<i>nicardipine hcl cap 30 mg</i>	
<i>nifedipine tab er 24hr 30 mg</i>	
<i>nifedipine tab er 24hr 60 mg</i>	
<i>nifedipine tab er 24hr 90 mg</i>	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	
<i>nimodipine cap 30 mg</i>	
<i>nisoldipine tab er 24hr 8.5 mg</i>	
<i>nisoldipine tab er 24hr 17 mg</i>	
<i>nisoldipine tab er 24hr 20 mg</i>	
<i>nisoldipine tab er 24hr 25.5 mg</i>	
<i>nisoldipine tab er 24hr 30 mg</i>	
<i>nisoldipine tab er 24hr 34 mg</i>	
<i>nisoldipine tab er 24hr 40 mg</i>	
<i>tiadylt er</i>	
<i>verapamil hcl cap er 24hr 100 mg</i>	
<i>verapamil hcl cap er 24hr 120 mg</i>	
<i>verapamil hcl cap er 24hr 180 mg</i>	
<i>verapamil hcl cap er 24hr 200 mg</i>	
<i>verapamil hcl cap er 24hr 240 mg</i>	
<i>verapamil hcl cap er 24hr 300 mg</i>	
<i>verapamil hcl cap er 24hr 360 mg</i>	
<i>verapamil hcl tab 40 mg</i>	
<i>verapamil hcl tab 80 mg</i>	
<i>verapamil hcl tab 120 mg</i>	
<i>verapamil hcl tab er 120 mg</i>	
<i>verapamil hcl tab er 180 mg</i>	
<i>verapamil hcl tab er 240 mg</i>	
<b>DIURETICS</b>	
<i>acetazolamide cap er 12hr 500 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
acetazolamide tab 125 mg	
acetazolamide tab 250 mg	
amiloride & hydrochlorothiazide tab 5-50 mg	
amiloride hcl tab 5 mg	
bumetanide tab 0.5 mg	
bumetanide tab 1 mg	
bumetanide tab 2 mg	
chlorthalidone tab 25 mg	
chlorthalidone tab 50 mg	
furosemide inj 10 mg/ml	
furosemide oral soln 10 mg/ml	
furosemide tab 20 mg	
furosemide tab 40 mg	
furosemide tab 80 mg	
hydrochlorothiazide cap 12.5 mg	
hydrochlorothiazide tab 12.5 mg	
hydrochlorothiazide tab 25 mg	
hydrochlorothiazide tab 50 mg	
indapamide tab 1.25 mg	
indapamide tab 2.5 mg	
methazolamide tab 25 mg	
methazolamide tab 50 mg	
metolazone tab 2.5 mg	
metolazone tab 5 mg	
metolazone tab 10 mg	
spironolactone & hydrochlorothiazide tab 25-25 mg	
torsemide tab 5 mg	
torsemide tab 10 mg	
torsemide tab 20 mg	
torsemide tab 100 mg	
triamterene & hydrochlorothiazide cap 37.5-25 mg	
triamterene & hydrochlorothiazide tab 37.5-25 mg	
triamterene & hydrochlorothiazide tab 75-50 mg	
triamterene cap 50 mg	
triamterene cap 100 mg	
<b>MISCELLANEOUS</b>	
ADRENALIN INJ 1MG/ML	
aliskiren fumarate tab 150 mg (base equivalent)	
aliskiren fumarate tab 300 mg (base equivalent)	
clonidine hcl tab 0.1 mg	
clonidine hcl tab 0.2 mg	
clonidine hcl tab 0.3 mg	
CORLANOR TAB 5MG	
CORLANOR TAB 7.5MG	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>digoxin inj 0.25 mg/ml</i>	
<i>digoxin oral soln 0.05 mg/ml</i>	
<i>digoxin tab 125 mcg (0.125 mg)</i>	QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	
<i>droxidopa cap 100 mg</i>	QL (90 caps / 30 days), NM; DL
<i>droxidopa cap 200 mg</i>	QL (180 caps / 30 days), NM; DL
<i>droxidopa cap 300 mg</i>	QL (180 caps / 30 days), NM; DL
<i>hydralazine hcl tab 10 mg</i>	
<i>hydralazine hcl tab 25 mg</i>	
<i>hydralazine hcl tab 50 mg</i>	
<i>hydralazine hcl tab 100 mg</i>	
<i>metyrosine cap 250 mg</i>	NM; DL
<i>midodrine hcl tab 2.5 mg</i>	
<i>midodrine hcl tab 5 mg</i>	
<i>midodrine hcl tab 10 mg</i>	
<i>minoxidil tab 2.5 mg</i>	
<i>minoxidil tab 10 mg</i>	
<i>ranolazine tab er 12hr 500 mg</i>	
<i>ranolazine tab er 12hr 1000 mg</i>	
<i>VERQUVO TAB 2.5MG</i>	
<i>VERQUVO TAB 5MG</i>	
<i>VERQUVO TAB 10MG</i>	
<i>VYNDAMAX CAP 61MG</i>	NM, LA, PA; DL

## **NITRATES**

<i>isosorbide dinitrate tab 5 mg</i>
<i>isosorbide dinitrate tab 10 mg</i>
<i>isosorbide dinitrate tab 20 mg</i>
<i>isosorbide dinitrate tab 30 mg</i>
<i>isosorbide mononitrate tab 10 mg</i>
<i>isosorbide mononitrate tab 20 mg</i>
<i>isosorbide mononitrate tab er 24hr 30 mg</i>
<i>isosorbide mononitrate tab er 24hr 60 mg</i>
<i>isosorbide mononitrate tab er 24hr 120 mg</i>
<i>NITRO-BID OIN 2%</i>
<i>NITROGLYCER INJ 5MG/ML</i>
<i>nitroglycerin sl tab 0.3 mg</i>
<i>nitroglycerin sl tab 0.4 mg</i>
<i>nitroglycerin sl tab 0.6 mg</i>
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	
NITROSTAT SUB 0.3MG	
NITROSTAT SUB 0.4MG	
NITROSTAT SUB 0.6MG	
<b>PULMONARY ARTERIAL HYPERTENSION</b>	
ADEMPAS TAB 0.5MG	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 1.5MG	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 1MG	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 2.5MG	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 2MG	QL (90 tabs / 30 days), NM, LA, PA; DL
<i>alyq</i>	NM, PA; DL
<i>ambrisentan tab 5 mg</i>	NM, LA, PA; DL
<i>ambrisentan tab 10 mg</i>	NM, LA, PA; DL
OPSUMIT TAB 10MG	NM, LA, PA; DL
<i>sildenafil citrate for suspension 10 mg/ml</i>	QL (180 mL / 30 days), NM, PA; DL
<i>sildenafil citrate tab 20 mg</i>	QL (90 tabs / 30 days), NM, PA; DL
<i>tadalafil tab 20 mg (pah)</i>	NM, PA; DL
TYVASO DPI POW 16-32-48	NM, LA, PA; DL
TYVASO DPI POW 16-32MCG	NM, LA, PA; DL
TYVASO DPI POW 16MCG	NM, LA, PA; DL
TYVASO DPI POW 32-48MCG	NM, LA, PA; DL
TYVASO DPI POW 32MCG	NM, LA, PA; DL
TYVASO DPI POW 48MCG	NM, LA, PA; DL
TYVASO DPI POW 64MCG	NM, LA, PA; DL
UPTRAVI TAB 200MCG	NM, LA, PA; DL
UPTRAVI TAB 400MCG	NM, LA, PA; DL
UPTRAVI TAB 600MCG	NM, LA, PA; DL
UPTRAVI TAB 800MCG	NM, LA, PA; DL
UPTRAVI TAB 1000MCG	NM, LA, PA; DL
UPTRAVI TAB 1200MCG	NM, LA, PA; DL
UPTRAVI TAB 1400MCG	NM, LA, PA; DL
UPTRAVI TAB 1600MCG	NM, LA, PA; DL
VENTAVIS SOL 10MCG/ML	NM, LA, PA; DL
VENTAVIS SOL 20MCG/ML	NM, LA, PA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b>CENTRAL NERVOUS SYSTEM</b>	
<b>ANTIANXIETY</b>	
ALPRAZOLAM CON 1 MG/ML	DL
<i>alprazolam tab 0.5 mg</i>	QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	QL (150 tabs / 30 days)
<i>buspirone hcl tab 5 mg</i>	
<i>buspirone hcl tab 7.5 mg</i>	
<i>buspirone hcl tab 10 mg</i>	
<i>buspirone hcl tab 15 mg</i>	
<i>buspirone hcl tab 30 mg</i>	
<i>chlordiazepoxide hcl cap 5 mg</i>	
<i>chlordiazepoxide hcl cap 10 mg</i>	
<i>chlordiazepoxide hcl cap 25 mg</i>	
<i>fluvoxamine maleate tab 25 mg</i>	
<i>fluvoxamine maleate tab 50 mg</i>	
<i>fluvoxamine maleate tab 100 mg</i>	
<i>lorazepam intensol</i>	DL
<i>lorazepam tab 0.5 mg</i>	
<i>lorazepam tab 1 mg</i>	
<i>lorazepam tab 2 mg</i>	
LOREEV XR CAP 1.5MG	
LOREEV XR CAP 1MG	
LOREEV XR CAP 2MG	
LOREEV XR CAP 3MG	
<i>oxazepam cap 10 mg</i>	
<i>oxazepam cap 15 mg</i>	
<i>oxazepam cap 30 mg</i>	
<b>ANTIDEMENTIA</b>	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	
<i>donepezil hydrochloride tab 5 mg</i>	
<i>donepezil hydrochloride tab 10 mg</i>	
<i>donepezil hydrochloride tab 23 mg</i>	
<i>ergoloid mesylates tab 1 mg</i>	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	
<i>galantamine hydrobromide tab 4 mg</i>	
<i>galantamine hydrobromide tab 8 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
galantamine hydrobromide tab 12 mg	
memantine hcl cap er 24hr 7 mg	
memantine hcl cap er 24hr 14 mg	
memantine hcl cap er 24hr 21 mg	
memantine hcl cap er 24hr 28 mg	
memantine hcl oral solution 2 mg/ml	
memantine hcl tab 5 mg	
memantine hcl tab 10 mg	
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	
NAMZARIC CAP 7-10MG	
NAMZARIC CAP 14-10MG	
NAMZARIC CAP 21-10MG	
NAMZARIC CAP 28-10MG	
NAMZARIC CAP PACK	
rivastigmine tartrate cap 1.5 mg (base equivalent)	
rivastigmine tartrate cap 3 mg (base equivalent)	
rivastigmine tartrate cap 4.5 mg (base equivalent)	
rivastigmine tartrate cap 6 mg (base equivalent)	
rivastigmine transdermal	
<b>ANTIDEPRESSANTS</b>	
amitriptyline hcl tab 10 mg	
amitriptyline hcl tab 25 mg	
amitriptyline hcl tab 50 mg	
amitriptyline hcl tab 75 mg	
amitriptyline hcl tab 100 mg	
amitriptyline hcl tab 150 mg	
amoxapine tab 25 mg	
amoxapine tab 50 mg	
amoxapine tab 100 mg	
amoxapine tab 150 mg	
AUVELITY TAB 45-105MG	
bupropion hcl tab 75 mg	
bupropion hcl tab 100 mg	
bupropion hcl tab er 12hr 100 mg	
bupropion hcl tab er 12hr 150 mg	
bupropion hcl tab er 12hr 200 mg	
bupropion hcl tab er 24hr 150 mg	
bupropion hcl tab er 24hr 300 mg	
citalopram hydrobromide oral soln 10 mg/5ml	
citalopram hydrobromide tab 10 mg (base equiv)	
citalopram hydrobromide tab 20 mg (base equiv)	
citalopram hydrobromide tab 40 mg (base equiv)	
clomipramine hcl cap 25 mg	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>clomipramine hcl cap 50 mg</i>	
<i>desipramine hcl tab 10 mg</i>	
<i>desipramine hcl tab 25 mg</i>	
<i>desipramine hcl tab 50 mg</i>	
<i>desipramine hcl tab 75 mg</i>	
<i>desipramine hcl tab 100 mg</i>	
<i>desipramine hcl tab 150 mg</i>	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	
<i>doxepin hcl cap 10 mg</i>	
<i>doxepin hcl cap 25 mg</i>	
<i>doxepin hcl cap 50 mg</i>	
<i>doxepin hcl cap 75 mg</i>	
<i>doxepin hcl cap 100 mg</i>	
<i>doxepin hcl cap 150 mg</i>	
<i>doxepin hcl conc 10 mg/ml</i>	
DRIZALMA CAP 20MG DR	PA
DRIZALMA CAP 30MG DR	PA
DRIZALMA CAP 40MG DR	PA
DRIZALMA CAP 60MG DR	PA
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	
EMSAM DIS 6MG/24HR	DL
EMSAM DIS 9MG/24HR	DL
EMSAM DIS 12MG/24H	DL
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	
FETZIMA CAP 20MG	
FETZIMA CAP 40MG	
FETZIMA CAP 80MG	
FETZIMA CAP 120MG	
FETZIMA CAP TITRATIO	
<i>fluoxetine hcl cap 10 mg</i>	

**PA** - Prior Authorization   **QL** - Quantity Limits   **NM** - Not available at mail-order   **B/D** -  
 Covered under Medicare B or D   **LA** - Limited Access   **DL** - Medication restricted to a 30  
 day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>fluoxetine hcl cap 20 mg</i>	
<i>fluoxetine hcl cap 40 mg</i>	
<i>fluoxetine hcl solution 20 mg/5ml</i>	
<i>imipramine hcl tab 10 mg</i>	
<i>imipramine hcl tab 25 mg</i>	
<i>imipramine hcl tab 50 mg</i>	
<i>MARPLAN TAB 10MG</i>	
<i>mirtazapine orally disintegrating tab 15 mg</i>	
<i>mirtazapine orally disintegrating tab 30 mg</i>	
<i>mirtazapine orally disintegrating tab 45 mg</i>	
<i>mirtazapine tab 7.5 mg</i>	
<i>mirtazapine tab 15 mg</i>	
<i>mirtazapine tab 30 mg</i>	
<i>mirtazapine tab 45 mg</i>	
<i>nefazodone hcl tab 50 mg</i>	
<i>nefazodone hcl tab 100 mg</i>	
<i>nefazodone hcl tab 150 mg</i>	
<i>nefazodone hcl tab 200 mg</i>	
<i>nefazodone hcl tab 250 mg</i>	
<i>nortriptyline hcl cap 10 mg</i>	
<i>nortriptyline hcl cap 25 mg</i>	
<i>nortriptyline hcl cap 50 mg</i>	
<i>nortriptyline hcl cap 75 mg</i>	
<i>nortriptyline hcl soln 10 mg/5ml</i>	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	
<i>paroxetine hcl tab 10 mg</i>	
<i>paroxetine hcl tab 20 mg</i>	
<i>paroxetine hcl tab 30 mg</i>	
<i>paroxetine hcl tab 40 mg</i>	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	
<i>paroxetine hcl tab er 24hr 25 mg</i>	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	
<i>phenelzine sulfate tab 15 mg</i>	
<i>protriptyline hcl tab 5 mg</i>	
<i>protriptyline hcl tab 10 mg</i>	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	
<i>sertraline hcl tab 25 mg</i>	
<i>sertraline hcl tab 50 mg</i>	
<i>sertraline hcl tab 100 mg</i>	
<i>tranylcypromine sulfate tab 10 mg</i>	
<i>trazodone hcl tab 50 mg</i>	
<i>trazodone hcl tab 100 mg</i>	
<i>trazodone hcl tab 150 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>trazodone hcl tab 300 mg</i>	
<i>trimipramine maleate cap 25 mg</i>	
<i>trimipramine maleate cap 50 mg</i>	
<i>trimipramine maleate cap 100 mg</i>	
<i>TRINTELLIX TAB 5MG</i>	
<i>TRINTELLIX TAB 10MG</i>	
<i>TRINTELLIX TAB 20MG</i>	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	
<i>VENLAFAKINE TAB 112.5MG</i>	
<i>vilazodone hcl tab 10 mg</i>	
<i>vilazodone hcl tab 20 mg</i>	
<i>vilazodone hcl tab 40 mg</i>	
<b>ANTIPARKINSONIAN AGENTS</b>	
<i>amantadine hcl cap 100 mg</i>	
<i>amantadine hcl soln 50 mg/5ml</i>	
<i>amantadine hcl tab 100 mg</i>	
<i>benztropine mesylate inj 1 mg/ml</i>	
<i>benztropine mesylate tab 0.5 mg</i>	
<i>benztropine mesylate tab 1 mg</i>	
<i>benztropine mesylate tab 2 mg</i>	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	
<i>carbidopa &amp; levodopa orally disintegrating tab 10-100 mg</i>	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-100 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>carbidopa &amp; levodopa orally disintegrating tab 25-250 mg</i>	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	
<i>carbidopa tab 25 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	
<i>entacapone tab 200 mg</i>	
<i>INBRIJA CAP 42MG</i>	NM, LA; DL
<i>NEUPRO DIS 1MG/24HR</i>	
<i>NEUPRO DIS 2MG/24HR</i>	
<i>NEUPRO DIS 3MG/24HR</i>	
<i>NEUPRO DIS 4MG/24HR</i>	
<i>NEUPRO DIS 6MG/24HR</i>	
<i>NEUPRO DIS 8MG/24HR</i>	
<i>NOURIANZ TAB 20MG</i>	NM, LA; DL
<i>NOURIANZ TAB 40MG</i>	NM, LA; DL
<i>pramipexole dihydrochloride tab 0.5 mg</i>	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	
<i>pramipexole dihydrochloride tab 1 mg</i>	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	
<i>ropinirole hydrochloride tab 0.5 mg</i>	
<i>ropinirole hydrochloride tab 0.25 mg</i>	
<i>ropinirole hydrochloride tab 1 mg</i>	
<i>ropinirole hydrochloride tab 2 mg</i>	
<i>ropinirole hydrochloride tab 3 mg</i>	
<i>ropinirole hydrochloride tab 4 mg</i>	
<i>ropinirole hydrochloride tab 5 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
RYTARY CAP 95MG	
RYTARY CAP 145MG	
RYTARY CAP 195MG	
RYTARY CAP 245MG	
<i>selegiline hcl cap 5 mg</i>	
<i>selegiline hcl tab 5 mg</i>	
<i>tolcapone tab 100 mg</i>	DL
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	
<i>trihexyphenidyl hcl tab 2 mg</i>	
<i>trihexyphenidyl hcl tab 5 mg</i>	
<b>ANTIPSYCHOTICS</b>	
ABILIFY ASIM INJ 720MG	DL
ABILIFY ASIM INJ 960MG	DL
ABILIFY MAIN INJ 300MG	QL (1 injection / 28 days); DL
ABILIFY MAIN INJ 400MG	QL (1 injection / 28 days); DL
<i>ariPIPRAZOLE oral solution 1 mg/ml</i>	
<i>ariPIPRAZOLE orally disintegrating tab 10 mg</i>	
<i>ariPIPRAZOLE orally disintegrating tab 15 mg</i>	
<i>ariPIPRAZOLE tab 2 mg</i>	
<i>ariPIPRAZOLE tab 5 mg</i>	
<i>ariPIPRAZOLE tab 10 mg</i>	
<i>ariPIPRAZOLE tab 15 mg</i>	
<i>ariPIPRAZOLE tab 20 mg</i>	
<i>ariPIPRAZOLE tab 30 mg</i>	
ARISTADA INJ 441MG/1.	DL
ARISTADA INJ 662MG/2	DL
ARISTADA INJ 882MG/3	DL
ARISTADA INJ 1064MG	DL
ARISTADA INJ INITIO	DL
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	
CAPLYTA CAP 10.5MG	DL
CAPLYTA CAP 21MG	DL
CAPLYTA CAP 42MG	DL
<i>chlorpromazine hcl inj 50 mg/2ml</i>	
<i>chlorpromazine hcl tab 10 mg</i>	
<i>chlorpromazine hcl tab 25 mg</i>	
<i>chlorpromazine hcl tab 50 mg</i>	
<i>chlorpromazine hcl tab 100 mg</i>	
<i>chlorpromazine hcl tab 200 mg</i>	
<i>clozapine orally disintegrating tab 12.5 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>clozapine orally disintegrating tab 25 mg</i>	
<i>clozapine orally disintegrating tab 100 mg</i>	
<i>clozapine orally disintegrating tab 150 mg</i>	
<i>clozapine orally disintegrating tab 200 mg</i>	DL
<i>clozapine tab 25 mg</i>	
<i>clozapine tab 50 mg</i>	
<i>clozapine tab 100 mg</i>	
<i>clozapine tab 200 mg</i>	
FANAPT TAB 1MG	DL
FANAPT TAB 2MG	DL
FANAPT TAB 4MG	DL
FANAPT TAB 6MG	DL
FANAPT TAB 8MG	DL
FANAPT TAB 10MG	DL
FANAPT TAB 12MG	DL
<i>fluphenazine decanoate inj 25 mg/ml</i>	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	
<i>fluphenazine hcl tab 1 mg</i>	
<i>fluphenazine hcl tab 2.5 mg</i>	
<i>fluphenazine hcl tab 5 mg</i>	
<i>fluphenazine hcl tab 10 mg</i>	
GEODON INJ 20MG	DL
<i>haloperidol decanoate im soln 50 mg/ml</i>	
<i>haloperidol decanoate im soln 100 mg/ml</i>	
<i>haloperidol lactate inj 5 mg/ml</i>	
<i>haloperidol lactate oral conc 2 mg/ml</i>	
<i>haloperidol tab 0.5 mg</i>	
<i>haloperidol tab 1 mg</i>	
<i>haloperidol tab 2 mg</i>	
<i>haloperidol tab 5 mg</i>	
<i>haloperidol tab 10 mg</i>	
<i>haloperidol tab 20 mg</i>	
INVEGA HAFYE INJ 1092MG	QL (1 injection / 180 days); DL
INVEGA HAFYE INJ 1560MG	QL (1 injection / 180 days); DL
INVEGA SUST INJ 39/0.25	QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	QL (1 injection / 28 days); DL
INVEGA SUST INJ 117/0.75	QL (1 injection / 28 days); DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
INVEGA SUST INJ 156MG/ML	QL (1 injection / 28 days); DL
INVEGA SUST INJ 234/1.5	QL (1 injection / 28 days); DL
INVEGA TRINZ INJ 273MG	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 410MG	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 546MG	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 819MG	QL (1 syringe / 90 days); DL
<i>loxapine succinate cap 5 mg</i>	
<i>loxapine succinate cap 10 mg</i>	
<i>loxapine succinate cap 25 mg</i>	
<i>loxapine succinate cap 50 mg</i>	
<i>lurasidone hcl tab 20 mg</i>	
<i>lurasidone hcl tab 40 mg</i>	
<i>lurasidone hcl tab 60 mg</i>	
<i>lurasidone hcl tab 80 mg</i>	
<i>lurasidone hcl tab 120 mg</i>	
LYBALVI TAB 5-10MG	DL
LYBALVI TAB 10-10MG	DL
LYBALVI TAB 15-10MG	DL
LYBALVI TAB 20-10MG	DL
<i>molindone hcl tab 5 mg</i>	
<i>molindone hcl tab 10 mg</i>	
<i>molindone hcl tab 25 mg</i>	
NUPLAZID CAP 34MG	NM, LA, PA; DL
NUPLAZID TAB 10MG	NM, LA, PA; DL
<i>olanzapine for im inj 10 mg</i>	
<i>olanzapine orally disintegrating tab 5 mg</i>	
<i>olanzapine orally disintegrating tab 10 mg</i>	
<i>olanzapine orally disintegrating tab 15 mg</i>	
<i>olanzapine orally disintegrating tab 20 mg</i>	
<i>olanzapine tab 2.5 mg</i>	
<i>olanzapine tab 5 mg</i>	
<i>olanzapine tab 7.5 mg</i>	
<i>olanzapine tab 10 mg</i>	
<i>olanzapine tab 15 mg</i>	
<i>olanzapine tab 20 mg</i>	
<i>paliperidone tab er 24hr 1.5 mg</i>	
<i>paliperidone tab er 24hr 3 mg</i>	
<i>paliperidone tab er 24hr 6 mg</i>	
<i>paliperidone tab er 24hr 9 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>perphenazine tab 2 mg</i>	
<i>perphenazine tab 4 mg</i>	
<i>perphenazine tab 8 mg</i>	
<i>perphenazine tab 16 mg</i>	
PERSERIS INJ 90MG	DL
PERSERIS INJ 120MG	DL
<i>pimozide tab 1 mg</i>	
<i>pimozide tab 2 mg</i>	
<i>quetiapine fumarate tab 25 mg</i>	
<i>quetiapine fumarate tab 50 mg</i>	
<i>quetiapine fumarate tab 100 mg</i>	
<i>quetiapine fumarate tab 150 mg</i>	
<i>quetiapine fumarate tab 200 mg</i>	
<i>quetiapine fumarate tab 300 mg</i>	
<i>quetiapine fumarate tab 400 mg</i>	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	
REXULTI TAB 0.5MG	DL
REXULTI TAB 0.25MG	DL
REXULTI TAB 1MG	DL
REXULTI TAB 2MG	QL (30 tabs / 30 days); DL
REXULTI TAB 3MG	QL (30 tabs / 30 days); DL
REXULTI TAB 4MG	QL (30 tabs / 30 days); DL
RISPERDAL INJ 12.5MG	DL
RISPERDAL INJ 25MG	DL
RISPERDAL INJ 37.5MG	DL
RISPERDAL INJ 50MG	DL
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	DL
<i>risperidone microspheres for im extended rel susp 25 mg</i>	DL
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	DL
<i>risperidone microspheres for im extended rel susp 50 mg</i>	DL
<i>risperidone orally disintegrating tab 0.5 mg</i>	
<i>risperidone orally disintegrating tab 0.25 mg</i>	
<i>risperidone orally disintegrating tab 1 mg</i>	
<i>risperidone orally disintegrating tab 2 mg</i>	
<i>risperidone orally disintegrating tab 3 mg</i>	
<i>risperidone orally disintegrating tab 4 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>risperidone soln 1 mg/ml</i>	
<i>risperidone tab 0.5 mg</i>	
<i>risperidone tab 0.25 mg</i>	
<i>risperidone tab 1 mg</i>	
<i>risperidone tab 2 mg</i>	
<i>risperidone tab 3 mg</i>	
<i>risperidone tab 4 mg</i>	
SECUADO DIS 3.8MG	DL
SECUADO DIS 5.7MG	DL
SECUADO DIS 7.6MG	DL
<i>thioridazine hcl tab 10 mg</i>	
<i>thioridazine hcl tab 25 mg</i>	
<i>thioridazine hcl tab 50 mg</i>	
<i>thioridazine hcl tab 100 mg</i>	
<i>thiothixene cap 1 mg</i>	
<i>thiothixene cap 2 mg</i>	
<i>thiothixene cap 5 mg</i>	
<i>thiothixene cap 10 mg</i>	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	
UZEDY INJ 50MG	DL
UZEDY INJ 75MG	DL
UZEDY INJ 100MG	DL
UZEDY INJ 125MG	DL
UZEDY INJ 150MG	DL
UZEDY INJ 200MG	DL
UZEDY INJ 250MG	DL
VERSACLOZ SUS 50MG/ML	DL
VRAYLAR CAP 1.5MG	DL
VRAYLAR CAP 3MG	DL
VRAYLAR CAP 4.5MG	DL
VRAYLAR CAP 6MG	DL
<i>ziprasidone hcl cap 20 mg</i>	
<i>ziprasidone hcl cap 40 mg</i>	
<i>ziprasidone hcl cap 60 mg</i>	
<i>ziprasidone hcl cap 80 mg</i>	
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	
ZYPREXA RELP INJ 210MG	NM; DL
ZYPREXA RELP INJ 300MG	NM; DL
ZYPREXA RELP INJ 405MG	NM; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b>ANTISEIZURE AGENTS</b>	
APTIOM TAB 200MG	DL
APTIOM TAB 400MG	DL
APTIOM TAB 600MG	DL
APTIOM TAB 800MG	DL
BRIVIACT INJ 50MG/5ML	DL
BRIVIACT SOL 10MG/ML	DL
BRIVIACT TAB 10MG	DL
BRIVIACT TAB 25MG	DL
BRIVIACT TAB 50MG	DL
BRIVIACT TAB 75MG	DL
BRIVIACT TAB 100MG	DL
<i>carbamazepine cap er 12hr 100 mg</i>	
<i>carbamazepine cap er 12hr 200 mg</i>	
<i>carbamazepine cap er 12hr 300 mg</i>	
<i>carbamazepine chew tab 100 mg</i>	
<i>carbamazepine susp 100 mg/5ml</i>	
<i>carbamazepine tab 200 mg</i>	
<i>carbamazepine tab er 12hr 100 mg</i>	
<i>carbamazepine tab er 12hr 200 mg</i>	
<i>carbamazepine tab er 12hr 400 mg</i>	
CELONTIN CAP 300MG	
<i>clobazam suspension 2.5 mg/ml</i>	
<i>clobazam tab 10 mg</i>	
<i>clobazam tab 20 mg</i>	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	
<i>clonazepam orally disintegrating tab 0.25 mg</i>	
<i>clonazepam orally disintegrating tab 0.125 mg</i>	
<i>clonazepam orally disintegrating tab 1 mg</i>	
<i>clonazepam orally disintegrating tab 2 mg</i>	
<i>clonazepam tab 0.5 mg</i>	
<i>clonazepam tab 1 mg</i>	
<i>clonazepam tab 2 mg</i>	
<i>clorazepate dipotassium tab 3.75 mg</i>	
<i>clorazepate dipotassium tab 7.5 mg</i>	
<i>clorazepate dipotassium tab 15 mg</i>	
DIACOMIT CAP 250MG	NM, LA, PA; DL
DIACOMIT CAP 500MG	NM, LA, PA; DL
DIACOMIT PAK 250MG	NM, LA, PA; DL
DIACOMIT PAK 500MG	NM, LA, PA; DL
<i>diazepam inj 5 mg/ml</i>	DL
<i>diazepam intensol</i>	DL
<i>diazepam oral soln 1 mg/ml</i>	DL
<i>diazepam rectal gel delivery system 2.5 mg</i>	

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 day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>diazepam rectal gel delivery system 10 mg</i>	
<i>diazepam rectal gel delivery system 20 mg</i>	
<i>diazepam tab 2 mg</i>	
<i>diazepam tab 5 mg</i>	
<i>diazepam tab 10 mg</i>	
DILANTIN CAP 30MG	
DILANTIN CAP 100MG	
DILANTIN CHW 50MG	
DILANTIN-125 SUS 125/5ML	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	
<i>divalproex sodium tab delayed release 125 mg</i>	
<i>divalproex sodium tab delayed release 250 mg</i>	
<i>divalproex sodium tab delayed release 500 mg</i>	
<i>divalproex sodium tab er 24 hr 250 mg</i>	
<i>divalproex sodium tab er 24 hr 500 mg</i>	
EPIDIOLEX SOL 100MG/ML	NM, LA, PA; DL
<i>epitol</i>	
EPRONTIA SOL 25MG/ML	
<i>ethosuximide cap 250 mg</i>	
<i>ethosuximide soln 250 mg/5ml</i>	
<i>felbamate susp 600 mg/5ml</i>	
<i>felbamate tab 400 mg</i>	
<i>felbamate tab 600 mg</i>	
FINTEPLA SOL 2.2MG/ML	NM, LA; DL
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	
FYCOMPA SUS 0.5MG/ML	DL
FYCOMPA TAB 2MG	QL (30 tabs / 30 days); DL
FYCOMPA TAB 4MG	DL
FYCOMPA TAB 6MG	DL
FYCOMPA TAB 8MG	DL
FYCOMPA TAB 10MG	DL
FYCOMPA TAB 12MG	DL
<i>gabapentin cap 100 mg</i>	
<i>gabapentin cap 300 mg</i>	
<i>gabapentin cap 400 mg</i>	
<i>gabapentin oral soln 250 mg/5ml</i>	
<i>gabapentin tab 600 mg</i>	
<i>gabapentin tab 800 mg</i>	
<i>lacosamide oral solution 10 mg/ml</i>	
<i>lacosamide tab 50 mg</i>	
<i>lacosamide tab 100 mg</i>	
<i>lacosamide tab 150 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>lacosamide tab 200 mg</i>	
<i>lamotrigine orally disintegrating tab 25 mg</i>	
<i>lamotrigine orally disintegrating tab 50 mg</i>	
<i>lamotrigine orally disintegrating tab 100 mg</i>	
<i>lamotrigine orally disintegrating tab 200 mg</i>	
<i>lamotrigine tab 25 mg</i>	
<i>lamotrigine tab 25 mg (42) &amp; 100 mg (7) starter kit</i>	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	
<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit</i>	
<i>lamotrigine tab 100 mg</i>	
<i>lamotrigine tab 150 mg</i>	
<i>lamotrigine tab 200 mg</i>	
<i>lamotrigine tab chewable dispersible 5 mg</i>	
<i>lamotrigine tab chewable dispersible 25 mg</i>	
<i>lamotrigine tab disint 21 x 25 mg &amp; 7 x 50 mg titration kit</i>	
<i>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i>	
<i>lamotrigine tab disint 42 x 50mg &amp; 14 x 100mg titration kit</i>	
<i>lamotrigine tab er 24hr 25 mg</i>	
<i>lamotrigine tab er 24hr 50 mg</i>	
<i>lamotrigine tab er 24hr 100 mg</i>	
<i>lamotrigine tab er 24hr 200 mg</i>	
<i>lamotrigine tab er 24hr 250 mg</i>	
<i>lamotrigine tab er 24hr 300 mg</i>	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	
<i>levetiracetam oral soln 100 mg/ml</i>	
<i>levetiracetam tab 250 mg</i>	
<i>levetiracetam tab 500 mg</i>	
<i>levetiracetam tab 750 mg</i>	
<i>levetiracetam tab 1000 mg</i>	
<i>levetiracetam tab er 24hr 500 mg</i>	
<i>levetiracetam tab er 24hr 750 mg</i>	
<i>LIBERVANT MIS 5MG</i>	
<i>LIBERVANT MIS 7.5MG</i>	
<i>LIBERVANT MIS 10MG</i>	
<i>LIBERVANT MIS 12.5MG</i>	
<i>LIBERVANT MIS 15MG</i>	
<i>lorazepam inj 2 mg/ml</i>	DL
<i>lorazepam inj 4 mg/ml</i>	DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>methylsuximide cap 300 mg</i>	
MOTPOLY XR CAP 100MG	
MOTPOLY XR CAP 150MG	
MOTPOLY XR CAP 200MG	
NAYZILAM SPR 5MG	DL
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	
<i>oxcarbazepine tab 150 mg</i>	
<i>oxcarbazepine tab 300 mg</i>	
<i>oxcarbazepine tab 600 mg</i>	
<i>oxcarbazepine tab er 24hr 150 mg</i>	
<i>oxcarbazepine tab er 24hr 300 mg</i>	
<i>oxcarbazepine tab er 24hr 600 mg</i>	
<i>phenobarbital elixir 20 mg/5ml</i>	
<i>phenobarbital tab 15 mg</i>	
<i>phenobarbital tab 16.2 mg</i>	
<i>phenobarbital tab 30 mg</i>	
<i>phenobarbital tab 32.4 mg</i>	
<i>phenobarbital tab 60 mg</i>	
<i>phenobarbital tab 64.8 mg</i>	
<i>phenobarbital tab 97.2 mg</i>	
<i>phenobarbital tab 100 mg</i>	
<i>phenytoin chew tab 50 mg</i>	
<i>phenytoin sodium extended cap 100 mg</i>	
<i>phenytoin sodium extended cap 200 mg</i>	
<i>phenytoin sodium extended cap 300 mg</i>	
<i>phenytoin sodium inj 50 mg/ml</i>	
<i>phenytoin susp 125 mg/5ml</i>	
<i>pregabalin cap 25 mg</i>	QL (90 caps / 30 days)
<i>pregabalin cap 50 mg</i>	QL (90 caps / 30 days)
<i>pregabalin cap 75 mg</i>	QL (90 caps / 30 days)
<i>pregabalin cap 100 mg</i>	QL (90 caps / 30 days)
<i>pregabalin cap 150 mg</i>	QL (90 caps / 30 days)
<i>pregabalin cap 200 mg</i>	QL (90 caps / 30 days)
<i>pregabalin cap 225 mg</i>	QL (60 caps / 30 days)
<i>pregabalin cap 300 mg</i>	QL (60 caps / 30 days)
<i>pregabalin soln 20 mg/ml</i>	QL (946 mL / 30 days); DL
<i>primidone tab 50 mg</i>	
<i>primidone tab 125 mg</i>	
<i>primidone tab 250 mg</i>	
<i>roweepra</i>	
<i>rufinamide susp 40 mg/ml</i>	DL
<i>rufinamide tab 200 mg</i>	
<i>rufinamide tab 400 mg</i>	DL
<i>SPRITAM TAB 250MG</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
SPRITAM TAB 500MG	
SPRITAM TAB 750MG	
SPRITAM TAB 1000MG	
<i>subvenite</i>	
<i>subvenite starter kit/blu</i>	
<i>subvenite starter kit/gre</i>	
<i>subvenite starter kit/ora</i>	
SYMPAZAN MIS 5MG	
SYMPAZAN MIS 10MG	DL
SYMPAZAN MIS 20MG	DL
<i>tiagabine hcl tab 2 mg</i>	
<i>tiagabine hcl tab 4 mg</i>	
<i>tiagabine hcl tab 12 mg</i>	
<i>tiagabine hcl tab 16 mg</i>	
<i>topiramate cap er 24hr 25 mg</i>	
<i>topiramate cap er 24hr 50 mg</i>	
<i>topiramate cap er 24hr 100 mg</i>	
<i>topiramate cap er 24hr 200 mg</i>	
<i>topiramate sprinkle cap 15 mg</i>	
<i>topiramate sprinkle cap 25 mg</i>	
<i>topiramate tab 25 mg</i>	
<i>topiramate tab 50 mg</i>	
<i>topiramate tab 100 mg</i>	
<i>topiramate tab 200 mg</i>	
<i>valproate sodium inj 100 mg/ml</i>	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	
<i>valproic acid cap 250 mg</i>	
VALTOCO SPR 5MG	
VALTOCO SPR 10MG	
VALTOCO SPR 15MG	
VALTOCO SPR 20MG	
<i>vigabatrin powd pack 500 mg</i>	NM, LA; DL
<i>vigabatrin tab 500 mg</i>	NM, LA; DL
<i>vigadron</i>	NM, LA; DL
<i>vigadron tab 500mg</i>	NM, LA; DL
VIGAFYDE SOL 100MG/ML	NM, LA; DL
<i>vigpoder pow 500mg</i>	NM, LA; DL
VIMPAT INJ 200MG/20	
VIMPAT SOL 10MG/ML	
VIMPAT TAB 50MG	
VIMPAT TAB 100MG	
VIMPAT TAB 150MG	
VIMPAT TAB 200MG	

<b>Drug Name</b>	<b>Requirements/Limits</b>
XCOPRI PAK 12.5-25	
XCOPRI PAK 50-100MG	DL
XCOPRI PAK 100-150	DL
XCOPRI PAK 150-200MG (MAINTENANCE)	DL
XCOPRI PAK 150-200MG (TITRATION)	DL
XCOPRI TAB 25MG	DL
XCOPRI TAB 50MG	DL
XCOPRI TAB 100MG	DL
XCOPRI TAB 150MG	DL
XCOPRI TAB 200MG	DL
ZONISADE SUS 100MG/5	
<i>zonisamide cap 25 mg</i>	
<i>zonisamide cap 50 mg</i>	
<i>zonisamide cap 100 mg</i>	
ZTALMY SUS 50MG/ML	NM, LA, PA; DL

**ATTENTION DEFICIT HYPERACTIVITY DISORDER**

*amphetamine-dextroamphetamine tab 5 mg*  
*amphetamine-dextroamphetamine tab 7.5 mg*  
*amphetamine-dextroamphetamine tab 10 mg*  
*amphetamine-dextroamphetamine tab 12.5 mg*  
*amphetamine-dextroamphetamine tab 15 mg*  
*amphetamine-dextroamphetamine tab 20 mg*  
*amphetamine-dextroamphetamine tab 30 mg*  
*atomoxetine hcl cap 10 mg (base equiv)*  
*atomoxetine hcl cap 18 mg (base equiv)*  
*atomoxetine hcl cap 25 mg (base equiv)*  
*atomoxetine hcl cap 40 mg (base equiv)*  
*atomoxetine hcl cap 60 mg (base equiv)*  
*atomoxetine hcl cap 80 mg (base equiv)*  
*atomoxetine hcl cap 100 mg (base equiv)*  
*dexmethylphenidate hcl tab 2.5 mg*  
*dexmethylphenidate hcl tab 5 mg*  
*dexmethylphenidate hcl tab 10 mg*  
*dextroamphetamine sulfate oral solution 5 mg/5ml*  
*dextroamphetamine sulfate tab 5 mg*  
*dextroamphetamine sulfate tab 10 mg*  
*guanfacine hcl tab er 24hr 1 mg (base equiv)*  
*guanfacine hcl tab er 24hr 2 mg (base equiv)*  
*guanfacine hcl tab er 24hr 3 mg (base equiv)*  
*guanfacine hcl tab er 24hr 4 mg (base equiv)*  
*methylphenidate hcl soln 5 mg/5ml*  
*methylphenidate hcl soln 10 mg/5ml*  
*methylphenidate hcl tab 5 mg*  
*methylphenidate hcl tab 10 mg*

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>methylphenidate hcl tab 20 mg</i>	
<b>HYPNOTICS</b>	
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	QL (30 tabs / 30 days)
<i>flurazepam hcl cap 15 mg</i>	QL (30 caps / 30 days); DL
<i>flurazepam hcl cap 30 mg</i>	QL (30 caps / 30 days); DL
<i>HETLIOZ CAP 20MG</i>	NM, LA, PA; DL
<i>ramelteon tab 8 mg</i>	QL (30 tabs / 30 days)
<i>tasimelteon capsule 20 mg</i>	NM, PA; DL
<i>temazepam cap 7.5 mg</i>	QL (30 caps / 30 days); DL
<i>temazepam cap 15 mg</i>	QL (30 caps / 30 days); DL
<i>temazepam cap 22.5 mg</i>	QL (30 caps / 30 days); DL
<i>temazepam cap 30 mg</i>	QL (30 caps / 30 days); DL
<i>zaleplon cap 5 mg</i>	QL (30 caps / 30 days); DL
<i>zaleplon cap 10 mg</i>	QL (30 caps / 30 days); DL
<i>zolpidem tartrate tab 5 mg</i>	QL (30 tabs / 30 days); DL
<i>zolpidem tartrate tab 10 mg</i>	QL (30 tabs / 30 days); DL
<i>zolpidem tartrate tab er 6.25 mg</i>	QL (30 tabs / 30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	QL (30 tabs / 30 days)
<b>MIGRAINE</b>	
<i>AIMOVIG INJ 70MG/ML</i>	NM, PA
<i>AIMOVIG INJ 140MG/ML</i>	NM, PA
<i>AJOVY INJ 225/1.5</i>	NM, PA
<i>almotriptan malate tab 6.25 mg</i>	QL (12 tabs / 30 days)
<i>almotriptan malate tab 12.5 mg</i>	QL (8 tabs / 30 days)
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	QL (24 ampules / 30 days); DL
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	QL (8 mL / 28 days); DL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	QL (8 tabs / 30 days)
<i>EMGALITY INJ 100MG/ML</i>	NM, PA
<i>EMGALITY INJ 120MG/ML</i>	NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	QL (43 tabs / 30 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	QL (18 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	QL (9 tabs / 30 days)
<i>NURTEC TAB 75MG ODT</i>	QL (16 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	QL (12 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	QL (12 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	QL (12 tabs / 30 days)

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>sumatriptan nasal spray 5 mg/act</i>	QL (12 units / 30 days)
<i>sumatriptan nasal spray 20 mg/act</i>	QL (12 units / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	QL (8 vials / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	QL (18 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	QL (18 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	QL (9 tabs / 30 days)
UBRELVY TAB 50MG	QL (16 tabs / 30 days)
UBRELVY TAB 100MG	QL (16 tabs / 30 days)
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	QL (12 units / 30 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	QL (12 units / 30 days)
<i>zolmitriptan odt tab 2.5 mg</i>	QL (12 tabs / 30 days)
<i>zolmitriptan odt tab 5 mg</i>	QL (8 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	QL (8 tabs / 30 days)

### **MISCELLANEOUS**

AUSTEDO TAB 6MG	NM, LA, PA; DL
AUSTEDO TAB 9MG	NM, LA, PA; DL
AUSTEDO TAB 12MG	NM, LA, PA; DL
AUSTEDO XR TAB 6MG	NM, PA; DL
AUSTEDO XR TAB 12MG	NM, PA; DL
AUSTEDO XR TAB 18MG	NM, PA; DL
AUSTEDO XR TAB 24MG	NM, PA; DL
AUSTEDO XR TAB 30MG ER	NM, PA; DL
AUSTEDO XR TAB 36MG ER	NM, PA; DL
AUSTEDO XR TAB 42MG ER	NM, PA; DL
AUSTEDO XR TAB 48MG ER	NM, PA; DL
AUSTEDO XR TAB TITR KIT	NM, PA; DL
ENSPRYNG INJ	NM, LA, PA; DL
EVRYSDI SOL	QL (240 mL / 30 days), NM, LA, PA; DL
EXSERVAN MIS 50MG	NM, LA; DL
FIRDAPSE TAB 10MG	NM, LA, PA; DL
INGREZZA CAP 40-80MG	NM, LA, PA; DL
INGREZZA CAP 40MG	NM, LA, PA; DL
INGREZZA CAP 60MG	NM, LA, PA; DL
INGREZZA CAP 80MG	NM, LA, PA; DL
<i>lithium carbonate cap 150 mg</i>	
<i>lithium carbonate cap 300 mg</i>	
<i>lithium carbonate cap 600 mg</i>	
<i>lithium carbonate tab 300 mg</i>	
<i>lithium carbonate tab er 300 mg</i>	
<i>lithium carbonate tab er 450 mg</i>	
<i>lithium oral solution 8 meq/5ml</i>	
LITHIUM SOL 8MEQ/5ML	

<b>Drug Name</b>	<b>Requirements/Limits</b>
NUEDEXTA CAP 20-10MG	PA; DL
<i>pyridostigmine bromide tab 60 mg</i>	
<i>pyridostigmine bromide tab er 180 mg</i>	
<i>riluzole tab 50 mg</i>	
TEGSEDI INJ 284/1.5	NM, LA, PA; DL
<i>tetrabenazine tab 12.5 mg</i>	NM, PA
<i>tetrabenazine tab 25 mg</i>	NM, PA
ZURZUVAE CAP 20MG	NM, LA; DL
ZURZUVAE CAP 25MG	NM, LA; DL
ZURZUVAE CAP 30MG	NM, LA; DL
<b>MULTIPLE SCLEROSIS AGENTS</b>	
AUBAGIO TAB 7MG	QL (30 tabs / 30 days), NM, LA; DL
AUBAGIO TAB 14MG	QL (30 tabs / 30 days), NM, LA; DL
AVONEX PEN KIT 30MCG	NM; DL
AVONEX PREFL KIT 30MCG	NM; DL
BAFIERTAM CAP 95MG	NM, LA; DL
BETASERON INJ 0.3MG	NM; DL
<i>dalfampridine tab er 12hr 10 mg</i>	QL (60 tabs / 30 days), NM; DL
<i>dimethyl fumarate capsule delayed release 120 mg</i>	QL (60 caps / 30 days), NM; DL
<i>dimethyl fumarate capsule delayed release 240 mg</i>	QL (60 caps / 30 days), NM; DL
<i>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg</i>	NM; DL
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	QL (30 caps / 30 days), NM; DL
GILENYA CAP 0.5MG	QL (30 caps / 30 days), NM; DL
GILENYA CAP 0.25MG	QL (30 caps / 30 days), NM; DL
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	QL (30 syringes / 30 days), NM; DL
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	NM; DL
<i>glatopa</i>	NM; DL; (40MG/ML)
<i>glatopa</i>	QL (30 mL / 30 days), NM; DL; (20MG/ML)
KESIMPTA INJ 20/.4ML	NM, LA; DL
MAYZENT STARTER PACK (7)	NM, LA
MAYZENT STARTER PACK (12)	NM, LA; DL
MAYZENT TAB 0.25MG	NM, LA; DL
MAYZENT TAB 1MG	NM, LA; DL
MAYZENT TAB 2MG	NM, LA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
PLEGRIDY INJ	NM, LA; DL
PLEGRIDY INJ PEN	NM, LA; DL
REBIF INJ 22/0.5	NM; DL
REBIF INJ 44/0.5	NM; DL
REBIF REBIDO INJ 22/0.5	NM; DL
REBIF REBIDO INJ 44/0.5	NM; DL
REBIF REBIDO INJ TITRATN	NM; DL
REBIF TITRTN INJ PACK	NM; DL
<i>teriflunomide tab 7 mg</i>	QL (30 tabs / 30 days), NM; DL
<i>teriflunomide tab 14 mg</i>	QL (30 tabs / 30 days), NM; DL
TYSABRI INJ 300/15ML	NM, LA; DL
VUMERITY CAP 231MG	NM, LA; DL
VUMERITY STARTER	LA; DL

#### **MUSCULOSKELETAL THERAPY AGENTS**

<i>baclofen tab 10 mg</i>
<i>baclofen tab 20 mg</i>
<i>cyclobenzaprine hcl tab 5 mg</i>
<i>cyclobenzaprine hcl tab 10 mg</i>
<i>metaxalone tab 800 mg</i>
<i>methocarbamol tab 500 mg</i>
<i>methocarbamol tab 750 mg</i>
<i>methocarbamol tab 1000 mg</i>
<i>tanlor tab 1000mg</i>
<i>tizanidine hcl tab 2 mg (base equivalent)</i>
<i>tizanidine hcl tab 4 mg (base equivalent)</i>

#### **NARCOLEPSY/CATAPLEXY**

<i>armodafinil tab 50 mg</i>	QL (60 tabs / 30 days), PA
<i>armodafinil tab 150 mg</i>	QL (30 tabs / 30 days), PA
<i>armodafinil tab 200 mg</i>	QL (30 tabs / 30 days), PA
<i>armodafinil tab 250 mg</i>	QL (30 tabs / 30 days), PA
<i>modafinil tab 100 mg</i>	QL (30 tabs / 30 days), PA
<i>modafinil tab 200 mg</i>	QL (60 tabs / 30 days), PA
SOD OXYBATE SOL 500MG/ML	QL (540 mL / 30 days), NM, LA, PA; DL
WAKIX TAB 4.45MG	QL (60 tabs / 30 days), NM, LA, PA; DL
WAKIX TAB 17.8MG	QL (60 tabs / 30 days), NM, LA, PA; DL
XYREM SOL 500MG/ML	QL (540 mL / 30 days), NM, LA, PA; DL

#### **PSYCHOTHERAPEUTIC-MISC**

<i>acamprosate calcium tab delayed release 333 mg</i>
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<b>Drug Name</b>	<b>Requirements/Limits</b>
buprenorphine hcl sl tab 2 mg (base equiv)	
buprenorphine hcl sl tab 8 mg (base equiv)	
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	QL (90 tabs / 30 days)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	QL (90 tabs / 30 days)
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	
disulfiram tab 250 mg	
disulfiram tab 500 mg	
KLOXXADO SPR 8MG	DL
naloxone hcl inj 0.4 mg/ml	
naloxone hcl nasal spray 4 mg/0.1ml	DL
naloxone hcl soln cartridge 0.4 mg/ml	
naloxone hcl soln prefilled syringe 2 mg/2ml	DL
naltrexone hcl tab 50 mg	
NICOTROL INH	
NICOTROL NS SPR 10MG/ML	
varenicline tartrate tab 0.5 mg (base equiv)	
varenicline tartrate tab 1 mg (base equiv)	
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	
VIVITROL INJ 380MG	NM; DL
ZIMHI SOL	DL

## **ENDOCRINE AND METABOLIC**

### **ANDROGENS**

depo-testost inj 100mg/ml	
depo-testost inj 200mg/ml	
methitest tab 10mg	
methyltestosterone cap 10 mg	
oxandrolone tab 2.5 mg	QL (120 tabs / 30 days)
oxandrolone tab 10 mg	
testosterone cypionate im inj in oil 100 mg/ml	
testosterone cypionate im inj in oil 200 mg/ml	
testosterone enanthate im inj in oil 200 mg/ml	
testosterone td gel 10mg/act (2%)	
testosterone td gel 12.5 mg/act (1%)	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	
<i>testosterone td gel 50 mg/5gm (1%)</i>	
<i>testosterone td soln 30 mg/act</i>	
<b>ANTIDIABETICS</b>	
<i>acarbose tab 25 mg</i>	
<i>acarbose tab 50 mg</i>	
<i>acarbose tab 100 mg</i>	
BYDUREON BC INJ 2/0.85ML	QL (4 pens / 28 days), PA
BYETTA INJ 5MCG	QL (1 pen / 30 days), PA
BYETTA INJ 10MCG	QL (1 pen / 30 days), PA
FARXIGA TAB 5MG	QL (30 tabs / 30 days)
FARXIGA TAB 10MG	QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	QL (240 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	QL (120 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	QL (60 tabs / 30 days)
<i>glip/metform tab 2.5-250m</i>	QL (240 tabs / 30 days)
<i>glip/metform tab 2.5-500m</i>	QL (120 tabs / 30 days)
<i>glip/metform tab 5-500mg</i>	QL (120 tabs / 30 days)
<i>glipizide tab 5 mg</i>	QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	QL (240 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	QL (60 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	QL (30 tabs / 30 days)
INVOKAMET TAB 50-500MG	QL (60 tabs / 30 days)
INVOKAMET TAB 50-1000	QL (60 tabs / 30 days)
INVOKAMET TAB 150-500	QL (60 tabs / 30 days)
INVOKAMET TAB 150-1000	QL (60 tabs / 30 days)
INVOKAMET XR TAB 50-500MG	QL (60 tabs / 30 days)
INVOKAMET XR TAB 50-1000	QL (60 tabs / 30 days)
INVOKAMET XR TAB 150-500	QL (60 tabs / 30 days)
INVOKAMET XR TAB 150-1000	QL (60 tabs / 30 days)
INVOKANA TAB 100MG	QL (60 tabs / 30 days)
INVOKANA TAB 300MG	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	QL (30 tabs / 30 days)

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<b>Drug Name</b>	<b>Requirements/Limits</b>
JANUVIA TAB 50MG	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	QL (30 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	QL (30 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	QL (120 tabs / 30 days)
<i>metformin hcl tab er 24hr 750 mg</i>	QL (60 tabs / 30 days)
<i>miglitol tab 25 mg</i>	
<i>miglitol tab 50 mg</i>	
<i>miglitol tab 100 mg</i>	
MOUNJARO INJ 2.5/0.5	QL (4 pens / 28 days), NM, PA
MOUNJARO INJ 5MG/0.5	QL (4 pens / 28 days), NM, PA
MOUNJARO INJ 7.5/0.5	QL (4 pens / 28 days), NM, PA
MOUNJARO INJ 10MG/0.5	QL (4 pens / 28 days), NM, PA
MOUNJARO INJ 12.5/0.5	QL (4 pens / 28 days), NM, PA
MOUNJARO INJ 15MG/0.5	QL (4 pens / 28 days), NM, PA
<i>nateglinide tab 60 mg</i>	
<i>nateglinide tab 120 mg</i>	
OZEMPIC INJ 2MG/3ML	QL (1 pen / 28 days), PA
OZEMPIC INJ 4MG/3ML	QL (1 pen / 28 days), PA
OZEMPIC INJ 8MG/3ML	QL (1 pen / 28 days), PA
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	QL (30 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	QL (90 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	QL (90 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	
<i>repaglinide tab 1 mg</i>	
<i>repaglinide tab 2 mg</i>	
RYBELSUS TAB 3MG	QL (30 tabs / 30 days), PA
RYBELSUS TAB 7MG	QL (30 tabs / 30 days), PA
RYBELSUS TAB 14MG	QL (30 tabs / 30 days), PA

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<b>Drug Name</b>	<b>Requirements/Limits</b>
SYMLINPEN 60 INJ 1000MCG	
SYMLNPEN 120 INJ 1000MCG	
SYNJARDY TAB 5-500MG	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000MG	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	QL (30 tabs / 30 days)
TRULICITY INJ 0.75/0.5	QL (4 pens / 28 days), NM, PA
TRULICITY INJ 1.5/0.5	QL (4 pens / 28 days), NM, PA
TRULICITY INJ 3/0.5	QL (4 pens / 28 days), NM, PA
TRULICITY INJ 4.5/0.5	QL (4 pens / 28 days), NM, PA
XIGDUO XR TAB 2.5-1000	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	QL (30 tabs / 30 days)
<b>ANTIDIABETICS, INSULINS</b>	
BASAGLAR INJ 100UNIT	
BD SWAB REG PAD SNGL USE	
GAUZE PADS & DRESSINGS - PADS 2 X 2	
HUMALOG INJ 100/ML	
HUMALOG JR INJ 100/ML	
HUMALOG KWIK INJ 100/ML	
HUMALOG KWIK INJ 200/ML	
HUMALOG MIX INJ 50/50	
HUMALOG MIX INJ 50/50KWP	
HUMALOG MIX INJ 75/25KWP	
HUMALOG MIX SUS 75/25	
HUMULIN INJ 70/30	
HUMULIN INJ 70/30KWP	
HUMULIN N INJ U-100	
HUMULIN N INJ U-100KWP	

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<b>Drug Name</b>	<b>Requirements/Limits</b>
HUMULIN R INJ U-100	
HUMULIN R INJ U-500	
INSULIN LISP INJ 100/ML	
INSULIN LISP INJ JUNIOR	
INSULIN LISP INJ PROTAMIN	
INSULIN PEN NEEDLE	
INSULIN SYRINGE (DISP) U-100 0.3 ML	
INSULIN SYRINGE (DISP) U-100 1 ML	
INSULIN SYRINGE (DISP) U-100 1/2 ML	
ISOPROPYL ALCOHOL 0.7 ML/ML	
LANTUS INJ 100/ML	
LANTUS SOLOS INJ 100/ML	
LEVEMIR INJ	
LEVEMIR INJ FLEXPEN	
LYUMJEV INJ 100UT/ML	
LYUMJEV KWPN INJ 100UT/ML	
LYUMJEV KWPN INJ 200UT/ML	
NEEDLES, INSULIN DISP., SAFETY	
OMNIPOD 5 DX KIT INT G7G6	QL (1 kit / 365 days)
OMNIPOD 5 DX MIS POD G7G6	QL (10 pods / 30 days)
OMNIPOD DASH MIS PODS	QL (10 pods / 30 days)
OMNIPOD GO KIT 10UNT/DY	QL (10 pods / 30 days)
OMNIPOD GO KIT 15UNT/DY	QL (10 pods / 30 days)
OMNIPOD GO KIT 20UNT/DY	QL (10 pods / 30 days)
OMNIPOD GO KIT 25UNT/DY	QL (10 pods / 30 days)
OMNIPOD GO KIT 30UNT/DY	QL (10 pods / 30 days)
OMNIPOD GO KIT 35UNT/DY	QL (10 pods / 30 days)
OMNIPOD GO KIT 40UNT/DY	QL (10 pods / 30 days)
OMNIPOD MIS CLASSIC	QL (10 pods / 30 days)
OMNIPOD PDM KIT CLASSIC	QL (1 kit / 365 days)
TOUJEO MAX INJ 300/ML	
TOUJEO SOLO INJ 300/ML	
TRESIBA FLEX INJ 100UNIT	
TRESIBA FLEX INJ 200UNIT	
TRESIBA INJ 100UNIT	
V-GO 20 KIT	QL (30 devices (1 box) / 30 days)
V-GO 30 KIT	QL (30 devices (1 box) / 30 days)
V-GO 40 KIT	QL (30 devices (1 box) / 30 days)
XULTOPHY INJ 100/3.6	
<b>CALCIUM REGULATORS</b>	
<i>alendronate sodium oral soln 70 mg/75ml</i>	

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>alendronate sodium tab 10 mg</i>	
<i>alendronate sodium tab 35 mg</i>	
<i>alendronate sodium tab 70 mg</i>	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	
FORTEO INJ 600/2.4	QL (2.4 mL / 28 days), NM, PA; DL
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	
<i>pamidronate disodium iv soln 3 mg/ml</i>	
<i>pamidronate disodium iv soln 9 mg/ml</i>	
PROLIA INJ 60MG/ML	QL (2 injections / year), NM
<i>risedronate sodium tab 5 mg</i>	
<i>risedronate sodium tab 30 mg</i>	
<i>risedronate sodium tab 35 mg</i>	
<i>risedronate sodium tab 150 mg</i>	
<i>risedronate sodium tab delayed release 35 mg</i>	
TERIPARATIDE INJ 620/2.48	QL (2.48 mL / 28 days), NM, PA; DL
<i>teriparatide soln pen-inj 600 mcg/2.4ml</i>	QL (2.4 mL / 28 days), NM, PA; DL
XGEVA INJ	NM, PA; DL
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	NM
<i>zoledronic acid iv soln 5 mg/100ml</i>	NM

### **CHELATING AGENTS**

CHEMET CAP 100MG	DL
<i>deferasirox granules packet 90 mg</i>	NM; DL
<i>deferasirox granules packet 180 mg</i>	NM; DL
<i>deferasirox granules packet 360 mg</i>	NM; DL
<i>deferasirox tab 90 mg</i>	NM; DL
<i>deferasirox tab 180 mg</i>	NM; DL
<i>deferasirox tab 360 mg</i>	NM; DL
<i>deferasirox tab for oral susp 125 mg</i>	NM
<i>deferasirox tab for oral susp 250 mg</i>	NM; DL
<i>deferasirox tab for oral susp 500 mg</i>	NM; DL
<i>deferiprone tab 500 mg</i>	NM, LA; DL
<i>deferiprone tab 1000 mg</i>	NM, LA; DL
DEPEN TITRA TAB 250MG	NM; DL
<i>kionex sus 15gm/60</i>	
<i>penicillamine tab 250 mg</i>	NM; DL
<i>sodium polystyrene sulfonate powder</i>	
<i>sps</i>	
<i>trientine hcl cap 250 mg</i>	NM, PA; DL
<i>trientine hcl cap 500 mg</i>	NM, PA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
VELTASSA POW 8.4GM	
VELTASSA POW 16.8GM	
VELTASSA POW 25.2GM	
<b>CONTRACEPTIVES</b>	
<i>altavera</i>	
<i>alyacen 1/35</i>	
<i>amethia</i>	
<i>apri</i>	
<i>aranelle</i>	
<i>ashlyna</i>	
<i>aubra eq</i>	
<i>aviane</i>	
<i>azurette tab</i>	
BALCOLTRA TAB 0.1-20	
<i>balziva</i>	
<i>blisovi 24 fe</i>	
<i>blisovi fe 1.5/30</i>	
<i>brielllyn</i>	
<i>camila</i>	
<i>camrese lo</i>	
<i>cryselle-28</i>	
<i>cyred eq tab</i>	
<i>deblitane</i>	
<i>delyla</i>	
DEPO-SQ PROV INJ 104	
<i>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	
<i>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</i>	
<i>dolishale</i>	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	
<i>eluryng mis</i>	
<i>enilloring mis</i>	
<i>enpresse-28</i>	
<i>enskyce</i>	
<i>errin</i>	
<i>estarrylla tab 0.25-35</i>	
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg</i>	
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</i>	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>falmina</i>	
<i>gemmily</i>	
<i>hailey 24 tab fe</i>	
<i>heather tab 0.35mg</i>	
<i>iclevia</i>	
<i>incassia tab 0.35mg</i>	
<i>introvale</i>	
<i>isibloom</i>	
<i>jasmiel</i>	
<i>joyeaux tab 0.1-20</i>	
<i>juleber</i>	
<i>junel 1.5/30</i>	
<i>junel 1/20</i>	
<i>junel fe 1.5/30</i>	
<i>junel fe 1/20</i>	
<i>junel fe 24</i>	
<i>kaitlib fe</i>	
<i>kariva</i>	
<i>kelnor 1/35</i>	
<i>kelnor 1/50</i>	
<i>kurvelo</i>	
<i>larin 1.5/30</i>	
<i>larin 1/20</i>	
<i>larin fe 1.5/30</i>	
<i>larin fe 1/20</i>	
<i>layolis fe</i>	
<i>leena</i>	
<i>lessina</i>	
<i>levonest</i>	
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	
<i>levonorgestrel &amp; ethynodiolide (91-day) tab 0.15-0.03 mg</i>	
<i>levonorgestrel &amp; ethynodiolide tab 0.1 mg-20 mcg</i>	
<i>levonorgestrel &amp; ethynodiolide tab 0.15 mg-30 mcg</i>	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	
<i>levonorgestrel-ethynodiolide (continuous) tab 90-20 mcg</i>	
<i>levora 0.15/30-28</i>	
<i>loestrin 21 tab 1.5/30</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>loestrin fe tab 1.5/30</i>	
<i>loestrin fe tab 1/20</i>	
<i>loestrin tab 1/20-21</i>	
<i>loryna</i>	
<i>low-ogestrel</i>	
<i>lutera</i>	
<i>lyeq</i>	
<i>lyza</i>	
<i>marlissa</i>	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	
<i>merzee</i>	
<i>microgestin 1.5/30</i>	
<i>microgestin 1/20</i>	
<i>microgestin 24 fe</i>	
<i>microgestin fe 1.5/30</i>	
<i>microgestin fe 1/20</i>	
<i>mili tab 0.25/35</i>	
<i>necon 0.5/35-28</i>	
<i>NEXTSTELLIS TAB 3-14.2MG</i>	
<i>nikki</i>	
<i>nora-be</i>	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	
<i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg</i>	
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>	
<i>norethindrone tab 0.35 mg</i>	
<i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</i>	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	
<i>norlyroc</i>	
<i>nortrel 0.5/35 (28)</i>	
<i>nortrel 1/35</i>	
<i>nortrel 7/7/7</i>	
<i>nylia 1/35</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>nylia</i> 7/7/7	
<i>nymyo</i>	
<i>ocella tab</i> 3-0.03mg	
<i>pimtrea</i>	
<i>portia-28</i>	
<i>reclipsen</i>	
<i>setlakin</i>	
<i>sharobel</i>	
<b>SLYND TAB 4MG</b>	
<i>sprintec 28</i>	
<i>sronyx</i>	
<i>syeda tab</i> 3-0.03mg	
<i>tarina 24 fe</i>	
<i>tarina fe</i> 1/20 eq	
<i>tilia fe</i>	
<i>tri-estaryl tab</i>	
<i>tri-legest fe</i>	
<i>tri-mili tab</i>	
<i>tri-nymyo</i>	
<i>tri-sprintec</i>	
<i>tri-vylibra tab</i>	
<i>trivora-28</i>	
<i>turqoz tab</i>	
<b>TYBLUME CHW 0.1-0.02</b>	
<i>tydemy</i>	
<i>velivet</i>	
<i>vestura</i>	
<i>vienva</i>	
<i>vyfemla</i>	
<i>vylibra tab</i> 0.25-35	
<i>wymzya fe</i>	
<i>xulane</i>	
<i>zafemy</i>	
<i>zovia</i> 1/35	
<b>ENDOMETRIOSIS</b>	
<i>danazol cap</i> 50 mg	
<i>danazol cap</i> 100 mg	
<i>danazol cap</i> 200 mg	
<b>SYNAREL SOL 2MG/ML</b>	
<b>ESTROGENS</b>	
<b>BIJUVA CAP 0.5-100</b>	
<b>BIJUVA CAP 1-100MG</b>	
<i>dotti</i>	
<i>estradiol &amp; norethindrone acetate tab</i> 0.5-0.1 mg	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	
<i>estradiol tab 0.5 mg</i>	
<i>estradiol tab 1 mg</i>	
<i>estradiol tab 2 mg</i>	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	
<i>estradiol vaginal cream 0.1 mg/gm</i>	
<i>estradiol vaginal tab 10 mcg</i>	
<i>estradiol valerate im in oil 10 mg/ml</i>	
<i>estradiol valerate im in oil 20 mg/ml</i>	
<i>estropipate tab 1.5 mg</i>	
<i>estropipate tab 3 mg</i>	
<i>fyavolv tab 0.5-2.5</i>	
<i>fyavolv tab 1-5</i>	
<i>jintel i tab 1mg-5mcg</i>	
<i>lyllana</i>	
<i>mimvey tab 1-0.5mg</i>	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	
<i>PREMARIN INJ 25MG</i>	
<i>PREMARIN TAB 0.3MG</i>	
<i>PREMARIN TAB 0.9MG</i>	
<i>PREMARIN TAB 0.45MG</i>	
<i>PREMARIN TAB 0.625MG</i>	
<i>PREMARIN TAB 1.25MG</i>	
<i>PREMARIN VAG CRE 0.625MG</i>	
<i>PREMPRO TAB 0.3-1.5</i>	
<i>PREMPRO TAB 0.45-1.5</i>	
<i>PREMPRO TAB 0.625-2.5</i>	
<i>PREMPRO TAB 0.625-5</i>	
<i>yuvafem</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b><i>GLUCOCORTICOIDS</i></b>	
DEPO-MEDROL INJ 20MG/ML	
DEPO-MEDROL INJ 40MG/ML	
DEPO-MEDROL INJ 80MG/ML	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	
<i>dexamethasone soln 0.5 mg/5ml</i>	
<i>dexamethasone tab 0.5 mg</i>	
<i>dexamethasone tab 0.75 mg</i>	
<i>dexamethasone tab 1 mg</i>	
<i>dexamethasone tab 1.5 mg</i>	
<i>dexamethasone tab 2 mg</i>	
<i>dexamethasone tab 4 mg</i>	
<i>dexamethasone tab 6 mg</i>	
<i>fludrocortisone acetate tab 0.1 mg</i>	
<i>hydrocortisone tab 5 mg</i>	
<i>hydrocortisone tab 10 mg</i>	
<i>hydrocortisone tab 20 mg</i>	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	
<i>methylprednisolone tab 4 mg</i>	
<i>methylprednisolone tab 8 mg</i>	
<i>methylprednisolone tab 16 mg</i>	
<i>methylprednisolone tab 32 mg</i>	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	
<i>prednisolone soln 15 mg/5ml</i>	
<i>prednisolone tab 5 mg</i>	
PREDNISONE CON 5MG/ML	
<i>prednisone oral soln 5 mg/5ml</i>	
<i>prednisone tab 1 mg</i>	
<i>prednisone tab 2.5 mg</i>	
<i>prednisone tab 5 mg</i>	
<i>prednisone tab 10 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>prednisone tab 20 mg</i>	
<i>prednisone tab 50 mg</i>	
SOLU-CORTEF INJ 100MG	
SOLU-CORTEF INJ 250MG	
SOLU-CORTEF INJ 500MG	
SOLU-CORTEF INJ 1000MG	
SOLU-MEDROL INJ 2GM	
SOLU-MEDROL INJ 40MG	
SOLU-MEDROL INJ 125MG	
SOLU-MEDROL INJ 500MG	
SOLU-MEDROL INJ 1000MG	
<b>GLUCOSE ELEVATING AGENTS</b>	
BAQSIMI ONE POW 3MG/DOSE	
<i>diazoxide susp 50 mg/ml</i>	
<i>glucagon (rdna) for inj kit 1 mg</i>	
GLUCAGON KIT 1MG	
GVOKE HYPO 2 INJ 0.5/.1ML	
GVOKE HYPO 2 INJ 1MG/.2ML	
GVOKE PFS INJ	
<b>MISCELLANEOUS</b>	
ACTHAR INJ 80UNIT	NM, LA, PA; DL
<i>betaine powder for oral solution</i>	NM, LA
<i>cabergoline tab 0.5 mg</i>	
<i>carglumic acid soluble tab 200 mg</i>	NM, LA; DL
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	B/D, NM
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	B/D, NM
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	B/D, NM
CORTROPHIN GEL 80UNIT	NM, LA, PA; DL
CYSTAGON CAP 50MG	NM, LA
CYSTAGON CAP 150MG	NM, LA
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	
<i>desmopressin acetate tab 0.1 mg</i>	
<i>desmopressin acetate tab 0.2 mg</i>	
DOJOLVI LIQ 100%	NM, LA; DL
EGRIFTA SV INJ 2MG	NM, LA, PA; DL
ENDARI POW 5GM	NM, LA; DL
GALAFOLD CAP 123MG	NM, LA, PA; DL
HUMATROPE INJ 6MG	NM, PA; DL
HUMATROPE INJ 12MG	NM, PA; DL
HUMATROPE INJ 24MG	NM, PA; DL
INCRELEX INJ 40MG/4ML	NM, LA; DL
ISTURISA TAB 1MG	NM, LA; DL
ISTURISA TAB 5MG	NM, LA; DL

**PA** - Prior Authorization   **QL** - Quantity Limits   **NM** - Not available at mail-order   **B/D** - Covered under Medicare B or D   **LA** - Limited Access   **DL** - Medication restricted to a 30 day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
JYNARQUE PAK 15MG	NM, LA, PA; DL
JYNARQUE PAK 30-15MG	NM, LA, PA; DL
JYNARQUE PAK 45-15MG	NM, LA, PA; DL
JYNARQUE PAK 60-30MG	NM, LA, PA; DL
JYNARQUE PAK 90-30MG	NM, LA, PA; DL
JYNARQUE TAB 15MG	NM, LA, PA; DL
JYNARQUE TAB 30MG	NM, LA, PA; DL
KORLYM TAB 300MG	QL (120 tabs / 30 days), NM, LA, PA; DL
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	
<i>levocarnitine tab 330 mg</i>	
LUPR DEP-PED INJ 7.5MG	NM; DL
LUPR DEP-PED INJ 11.25MG	NM; DL
LUPR DEP-PED INJ 15MG	NM; DL
LUPRON DEPOT INJ 45MG	NM; DL
<i>mifepristone tab 300 mg</i>	QL (120 tabs / 30 days), NM, PA; DL
<i>miglustat cap 100 mg</i>	NM, PA; DL
MYALEPT INJ 11.3MG	NM, LA, PA; DL
MYCAPSSA CAP 20MG	NM, LA; DL
<i>nitisinone cap 2 mg</i>	NM; DL
<i>nitisinone cap 5 mg</i>	NM; DL
<i>nitisinone cap 10 mg</i>	NM; DL
<i>nitisinone cap 20 mg</i>	NM; DL
NORDITROPIN INJ 5/1.5ML	NM, PA; DL
NORDITROPIN INJ 10/1.5ML	NM, PA; DL
NORDITROPIN INJ 15/1.5ML	NM, PA; DL
NORDITROPIN INJ 30/3ML	NM, PA; DL
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	NM; DL
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	NM; DL
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	NM; DL
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	NM; DL
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	NM; DL
ORFADIN CAP 20MG	NM, LA; DL
ORFADIN SUS 4MG/ML	NM, LA; DL
ORIAHNN CAP	DL
PROSYSBI GRA 75MG	NM, LA; DL
PROSYSBI GRA 300MG	NM, LA; DL
<i>raloxifene hcl tab 60 mg</i>	
RAVICTI LIQ 1.1GM/ML	NM, LA; DL
SANDOSTATIN KIT LAR 10MG	NM; DL
SANDOSTATIN KIT LAR 20MG	NM; DL
SANDOSTATIN KIT LAR 30MG	NM; DL
<i>sapropterin dihydrochloride powder packet 100 mg</i>	NM, PA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
sapropterin dihydrochloride powder packet 500 mg	NM, PA; DL
sapropterin dihydrochloride tab 100 mg	NM, PA; DL
SIGNIFOR INJ 0.3MG/ML	NM, LA; DL
SIGNIFOR INJ 0.6MG/ML	NM, LA; DL
SIGNIFOR INJ 0.9MG/ML	NM, LA; DL
SIGNIFOR LAR INJ 20MG	NM, LA; DL
SIGNIFOR LAR INJ 40MG	NM, LA; DL
SIGNIFOR LAR INJ 60MG	NM, LA; DL
SOMAVERT INJ 10MG	NM, LA; DL
SOMAVERT INJ 15MG	NM, LA; DL
SOMAVERT INJ 20MG	NM, LA; DL
SOMAVERT INJ 25MG	NM, LA; DL
SOMAVERT INJ 30MG	NM, LA; DL
tolvaptan tab 15 mg	NM, PA; DL
tolvaptan tab 30 mg	NM, PA; DL
VIJOICE GRA 50MG	NM, LA, PA; DL
VIJOICE TAB 50MG	NM, LA, PA; DL
VIJOICE TAB 125MG	NM, LA, PA; DL
VIJOICE TAB 250MG	NM, LA, PA; DL

### **PHOSPHATE BINDER AGENTS**

AURYXIA TAB 210MG	PA; DL
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	
calcium acetate (phosphate binder) tab 667 mg	
lanthanum carbonate chew tab 500 mg (elemental)	
lanthanum carbonate chew tab 750 mg (elemental)	
lanthanum carbonate chew tab 1000 mg (elemental)	
sevelamer carbonate packet 0.8 gm	
sevelamer carbonate packet 2.4 gm	
sevelamer carbonate tab 800 mg	
sevelamer hcl tab 400 mg	
sevelamer hcl tab 800 mg	

### **PROGESTINS**

medroxyprogesterone acetate tab 2.5 mg	
medroxyprogesterone acetate tab 5 mg	
medroxyprogesterone acetate tab 10 mg	
megestrol acetate susp 40 mg/ml	PA; DL
megestrol acetate susp 625 mg/5ml	PA; DL
norethindrone acetate tab 5 mg	
progesterone cap 100 mg	
progesterone cap 200 mg	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b>THYROID AGENTS</b>	
ARMOUR THYRO TAB 15MG	
ARMOUR THYRO TAB 30MG	
ARMOUR THYRO TAB 60MG	
ARMOUR THYRO TAB 90MG	
ARMOUR THYRO TAB 120MG	
ARMOUR THYRO TAB 180MG	
ARMOUR THYRO TAB 240MG	
ARMOUR THYRO TAB 300MG	
euthyrox	
levothyroxine sodium cap 13 mcg	
levothyroxine sodium cap 25 mcg	
levothyroxine sodium cap 50 mcg	
levothyroxine sodium cap 75 mcg	
levothyroxine sodium cap 88 mcg	
levothyroxine sodium cap 100 mcg	
levothyroxine sodium cap 112 mcg	
levothyroxine sodium cap 125 mcg	
levothyroxine sodium cap 137 mcg	
levothyroxine sodium cap 150 mcg	
levothyroxine sodium cap 175 mcg	
levothyroxine sodium cap 200 mcg	
levothyroxine sodium tab 25 mcg	
levothyroxine sodium tab 50 mcg	
levothyroxine sodium tab 75 mcg	
levothyroxine sodium tab 88 mcg	
levothyroxine sodium tab 100 mcg	
levothyroxine sodium tab 112 mcg	
levothyroxine sodium tab 125 mcg	
levothyroxine sodium tab 137 mcg	
levothyroxine sodium tab 150 mcg	
levothyroxine sodium tab 175 mcg	
levothyroxine sodium tab 200 mcg	
levothyroxine sodium tab 300 mcg	
levoxyl	
liothyronine sodium iv soln 10 mcg/ml	
liothyronine sodium tab 5 mcg	
liothyronine sodium tab 25 mcg	
liothyronine sodium tab 50 mcg	
methimazole tab 5 mg	
methimazole tab 10 mg	
np thyroid 15	
np thyroid 30	
np thyroid 60	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>np thyroid 90</i>	
<i>np thyroid 120</i>	
<i>propylthiouracil tab 50 mg</i>	
SYNTHROID TAB 25MCG	
SYNTHROID TAB 50MCG	
SYNTHROID TAB 75MCG	
SYNTHROID TAB 88MCG	
SYNTHROID TAB 100MCG	
SYNTHROID TAB 112MCG	
SYNTHROID TAB 125MCG	
SYNTHROID TAB 137MCG	
SYNTHROID TAB 150MCG	
SYNTHROID TAB 175MCG	
SYNTHROID TAB 200MCG	
SYNTHROID TAB 300MCG	
TIROSINT CAP 13MCG	
TIROSINT CAP 25MCG	
TIROSINT CAP 37.5MCG	
TIROSINT CAP 44MCG	
TIROSINT CAP 50MCG	
TIROSINT CAP 62.5MCG	
TIROSINT CAP 75MCG	
TIROSINT CAP 88MCG	
TIROSINT CAP 100MCG	
TIROSINT CAP 112MCG	
TIROSINT CAP 125MCG	
TIROSINT CAP 137MCG	
TIROSINT CAP 150MCG	
TIROSINT CAP 175MCG	
TIROSINT CAP 200	
TIROSINT-SOL SOL 13MCG/ML	
TIROSINT-SOL SOL 25MCG/ML	
TIROSINT-SOL SOL 37.5/ML	
TIROSINT-SOL SOL 44MCG/ML	
TIROSINT-SOL SOL 50MCG/ML	
TIROSINT-SOL SOL 62.5/ML	
TIROSINT-SOL SOL 75MCG/ML	
TIROSINT-SOL SOL 88MCG/ML	
TIROSINT-SOL SOL 100MCG	
TIROSINT-SOL SOL 112MCG	
TIROSINT-SOL SOL 125MCG	
TIROSINT-SOL SOL 137MCG	
TIROSINT-SOL SOL 150MCG	
TIROSINT-SOL SOL 175MCG	

<b>Drug Name</b>	<b>Requirements/Limits</b>
TIROSINT-SOL SOL 200MCG	
unithroid	
<b>VITAMIN D ANALOGS</b>	
<i>calcitriol cap 0.5 mcg</i>	
<i>calcitriol cap 0.25 mcg</i>	
<i>calcitriol inj 1 mcg/ml</i>	
<i>calcitriol oral soln 1 mcg/ml</i>	
<i>doxercalciferol cap 0.5 mcg</i>	
<i>doxercalciferol cap 1 mcg</i>	
<i>doxercalciferol cap 2.5 mcg</i>	
<i>paricalcitol cap 1 mcg</i>	
<i>paricalcitol cap 2 mcg</i>	
<i>paricalcitol cap 4 mcg</i>	
<i>paricalcitol iv soln 2 mcg/ml</i>	
RAYALDEE CAP 30MCG	DL
<b>GASTROINTESTINAL</b>	
<b>ANTIEMETICS</b>	
<i>aprepitant capsule 40 mg</i>	B/D, QL (1 cap / 30 days); DL
<i>aprepitant capsule 80 mg</i>	B/D, QL (8 caps / 30 days); DL
<i>aprepitant capsule 125 mg</i>	B/D, QL (2 caps / 30 days); DL
<i>aprepitant pak 80 &amp; 125</i>	B/D, QL (6 caps / 30 days); DL
<i>compro</i>	
<i>dronabinol cap 2.5 mg</i>	QL (60 caps / 30 days), PA
<i>dronabinol cap 5 mg</i>	QL (60 caps / 30 days), PA
<i>dronabinol cap 10 mg</i>	QL (60 caps / 30 days), PA
<i>gransetron hcl tab 1 mg</i>	B/D, QL (30 tabs / 30 days); DL
<i>meclizine hcl tab 12.5 mg</i>	
<i>meclizine hcl tab 25 mg</i>	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	DL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	B/D; DL
<i>ondansetron hcl tab 4 mg</i>	B/D; DL
<i>ondansetron hcl tab 8 mg</i>	B/D; DL
<i>ondansetron tab 4mg odt</i>	B/D; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>ondansetron tab 8mg odt</i>	B/D; DL
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	
<i>prochlorperazine suppos 25 mg</i>	
<i>promethazine hcl inj 25 mg/ml</i>	
<i>promethazine hcl inj 50 mg/ml</i>	
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	DL
<i>promethazine hcl suppos 12.5 mg</i>	DL
<i>promethazine hcl suppos 25 mg</i>	DL
<i>promethazine hcl tab 12.5 mg</i>	DL
<i>promethazine hcl tab 25 mg</i>	DL
<i>promethazine hcl tab 50 mg</i>	DL
<i>promethegan</i>	DL
<i>SANCUSO DIS 3.1MG</i>	DL
<i>scopolamine td patch 72hr 1 mg/3days</i>	QL (10 patches / 30 days)
<i>VARUBI TAB 90MG</i>	B/D, QL (4 tabs / 30 days), NM; DL

### **ANTISPASMODICS**

<i>dicyclomine hcl cap 10 mg</i>
<i>dicyclomine hcl oral soln 10 mg/5ml</i>
<i>dicyclomine hcl tab 20 mg</i>
<i>glycopyrrolate inj 0.2 mg/ml</i>
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>
<i>glycopyrrolate tab 1 mg</i>
<i>glycopyrrolate tab 2 mg</i>
<i>methscopolamine bromide tab 2.5 mg</i>
<i>methscopolamine bromide tab 5 mg</i>

### **H2-RECEPTOR ANTAGONISTS**

<i>famotidine for susp 40 mg/5ml</i>
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>
<i>famotidine preservative free inj 20 mg/2ml</i>
<i>famotidine tab 20 mg</i>
<i>famotidine tab 40 mg</i>
<i>nizatidine cap 150 mg</i>
<i>nizatidine cap 300 mg</i>
<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>

### **INFLAMMATORY BOWEL DISEASE**

<i>balsalazide disodium cap 750 mg</i>	
<i>budesonide delayed release particles cap 3 mg</i>	
<i>budesonide tab er 24hr 9 mg</i>	QL (30 tabs / 30 days); DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
hydrocortisone enema 100 mg/60ml	
mesalamine cap dr 400 mg	
mesalamine cap er 24hr 0.375 gm	
mesalamine enema 4 gm	
mesalamine suppos 1000 mg	
mesalamine tab delayed release 1.2 gm	
mesalamine tab delayed release 800 mg	
sulfasalazin tab 500mg dr	
sulfasalazine tab 500 mg	
<b>LAXATIVES</b>	
constulose	
enulose	
gavilyte-c	
gavilyte-g	
gavilyte-n sol flav pk	
generlac	
lactulose solution 10 gm/15ml	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	
peg-3350/electrolytes/asc	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	
<b>MISCELLANEOUS</b>	
alosetron hcl tab 0.5 mg (base equiv)	DL
alosetron hcl tab 1 mg (base equiv)	DL
amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg	
cromolyn sodium oral conc 100 mg/5ml	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	
diphenoxylate w/ atropine tab 2.5-0.025 mg	
GATTEX KIT 5MG	NM, LA, PA; DL
HELIDAC MIS THERAPY	
LINZESS CAP 72MCG	QL (30 caps / 30 days)
LINZESS CAP 145MCG	QL (30 caps / 30 days)
LINZESS CAP 290MCG	QL (30 caps / 30 days)
loperamide hcl cap 2 mg	
lubiprostone cap 8 mcg	QL (60 caps / 30 days)
lubiprostone cap 24 mcg	QL (60 caps / 30 days)
misoprostol tab 100 mcg	
misoprostol tab 200 mcg	
MOVANTIK TAB 12.5MG	
MOVANTIK TAB 25MG	
RELISTOR INJ 8/0.4ML	DL
RELISTOR INJ 12/0.6ML	DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
SUCRAID SOL 8500/ML	NM, LA; DL
<i>sucralfate susp 1 gm/10ml</i>	
<i>sucralfate tab 1 gm</i>	
SYMPROIC TAB 0.2MG	
TALICIA CAP	
<i>ursodiol cap 300 mg</i>	
<i>ursodiol tab 250 mg</i>	
<i>ursodiol tab 500 mg</i>	
VOWST CAP	QL (12 caps / 30 days), NM, LA, PA; DL
XERMELO TAB 250MG	QL (90 tabs / 30 days), NM, LA, PA; DL
XIFAXAN TAB 550MG	PA; DL

### **PANCREATIC ENZYMES**

CREON CAP 3000UNIT
CREON CAP 6000UNIT
CREON CAP 12000UNT
CREON CAP 24000UNT
CREON CAP 36000UNT
ZENPEP CAP 3000UNIT
ZENPEP CAP 5000UNIT
ZENPEP CAP 10000UNT
ZENPEP CAP 15000UNT
ZENPEP CAP 20000UNT
ZENPEP CAP 25000UNT
ZENPEP CAP 40000UNT
ZENPEP CAP 60000UNT

### **PROTON PUMP INHIBITORS**

<i>dexlansoprazole cap delayed release 30 mg</i>	QL (30 caps / 30 days)
<i>dexlansoprazole cap delayed release 60 mg</i>	QL (30 caps / 30 days)
<i>lansoprazole cap delayed release 15 mg</i>	QL (60 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 10 mg</i>	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 20 mg</i>	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 40 mg</i>	QL (60 caps / 30 days)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	QL (60 tabs / 30 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	QL (60 tabs / 30 days)
<i>rabeprazole sodium ec tab 20 mg</i>	QL (60 tabs / 30 days)

### **GENITOURINARY**

#### **BENIGN PROSTATIC HYPERPLASIA**

<i>alfuzosin hcl tab er 24hr 10 mg</i>
<i>dutasteride cap 0.5 mg</i>
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>
<i>finasteride tab 5 mg</i>

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>silodosin cap 4 mg</i>	
<i>silodosin cap 8 mg</i>	
<i>tadalafil tab 2.5 mg</i>	QL (30 tabs / 30 days), PA; DL
<i>tadalafil tab 5 mg</i>	QL (30 tabs / 30 days), PA; DL
<i>tamsulosin hcl cap 0.4 mg</i>	

#### **MISCELLANEOUS**

<i>bethanechol chloride tab 5 mg</i>
<i>bethanechol chloride tab 10 mg</i>
<i>bethanechol chloride tab 25 mg</i>
<i>bethanechol chloride tab 50 mg</i>
<i>flavoxate hcl tab 100 mg</i>
<i>potassium citrate tab er 5 meq (540 mg)</i>
<i>potassium citrate tab er 10 meq (1080 mg)</i>
<i>potassium citrate tab er 15 meq (1620 mg)</i>
<i>tiopronin tab 100 mg</i>
NM; DL

#### **URINARY ANTISPASMODICS**

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>
<i>fesoterodine fumarate tab er 24hr 4 mg</i>
<i>fesoterodine fumarate tab er 24hr 8 mg</i>
<i>GEMTESA TAB 75MG</i>
<i>mirabegron tab er 24 hr 25 mg</i>
<i>mirabegron tab er 24 hr 50 mg</i>
<i>MYRBETRIQ TAB 25MG</i>
<i>MYRBETRIQ TAB 50MG</i>
<i>oxybutynin chloride solution 5 mg/5ml</i>
<i>oxybutynin chloride tab 5 mg</i>
<i>oxybutynin chloride tab er 24hr 5 mg</i>
<i>oxybutynin chloride tab er 24hr 10 mg</i>
<i>oxybutynin chloride tab er 24hr 15 mg</i>
<i>solifenacin succinate tab 5 mg</i>
<i>solifenacin succinate tab 10 mg</i>
<i>tolterodine tartrate cap er 24hr 2 mg</i>
<i>tolterodine tartrate cap er 24hr 4 mg</i>
<i>tolterodine tartrate tab 1 mg</i>
<i>tolterodine tartrate tab 2 mg</i>
<i>trospium chloride cap er 24hr 60 mg</i>
<i>trospium chloride tab 20 mg</i>

#### **VAGINAL ANTI-INFECTIVES**

<i>CLEOCIN SUP 100MG</i>
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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>clindamycin phosphate vaginal cream 2%</i>	
<i>metronidazole vaginal gel 0.75%</i>	
<i>terconazole vaginal cream 0.4%</i>	
<i>terconazole vaginal cream 0.8%</i>	
<i>terconazole vaginal suppos 80 mg</i>	
<i>VANDAZOLE GEL 0.75%</i>	
<b>HEMATOLOGIC</b>	
<b>ANTICOAGULANTS</b>	
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	DL
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	
<i>ELIQUIS ST P TAB 5MG</i>	
<i>ELIQUIS TAB 2.5MG</i>	
<i>ELIQUIS TAB 5MG</i>	
<i>enoxaparin sodium inj 300 mg/3ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	DL
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	DL
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	DL
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	DL
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	DL
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	DL
<i>FRAGMIN INJ 2500/0.2</i>	DL
<i>FRAGMIN INJ 5000/0.2</i>	DL
<i>FRAGMIN INJ 7500/0.3</i>	DL
<i>FRAGMIN INJ 10000/ML</i>	DL
<i>FRAGMIN INJ 12500UNT</i>	DL
<i>FRAGMIN INJ 15000UNT</i>	DL
<i>FRAGMIN INJ 18000UNT</i>	DL
<i>FRAGMIN INJ 95000UNT</i>	DL
<i>HEP SOD/D5W INJ 25000UNT</i>	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	
<i>jantoven</i>	
PRADAXA CAP 75MG	
PRADAXA CAP 110MG	
PRADAXA CAP 150MG	
<i>warfarin sodium tab 1 mg</i>	
<i>warfarin sodium tab 2 mg</i>	
<i>warfarin sodium tab 2.5 mg</i>	
<i>warfarin sodium tab 3 mg</i>	
<i>warfarin sodium tab 4 mg</i>	
<i>warfarin sodium tab 5 mg</i>	
<i>warfarin sodium tab 6 mg</i>	
<i>warfarin sodium tab 7.5 mg</i>	
<i>warfarin sodium tab 10 mg</i>	
XARELTO STAR TAB 15/20MG	
XARELTO SUS 1MG/ML	
XARELTO TAB 2.5MG	
XARELTO TAB 10MG	
XARELTO TAB 15MG	
XARELTO TAB 20MG	
<b>HEMATOPOIETIC GROWTH FACTORS</b>	
GRANIX INJ 300/0.5	NM; DL
GRANIX INJ 300/1ML	NM; DL
GRANIX INJ 480/0.8	NM; DL
GRANIX INJ 480/1.6	NM; DL
MOZOBIL INJ	NM, LA; DL
NIVESTYM INJ 300/0.5	NM; DL
NIVESTYM INJ 300MCG	NM; DL
NIVESTYM INJ 480/0.8	NM; DL
NIVESTYM INJ 480MCG	NM; DL
PROCRIT INJ 2000/ML	B/D, NM
PROCRIT INJ 3000/ML	B/D, NM
PROCRIT INJ 4000/ML	B/D, NM
PROCRIT INJ 10000/ML	B/D, NM
PROCRIT INJ 20000/ML	B/D, NM; DL
PROCRIT INJ 40000/ML	B/D, QL (8 vials / 30 days), NM; DL
UDENYCA INJ 6MG/0.6	NM; DL
UDENYCA INJ 6MG/.6ML	NM; DL
<b>MISCELLANEOUS</b>	
<i>aminocaproic acid tab 500 mg</i>	DL
<i>aminocaproic acid tab 1000 mg</i>	DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>anagrelide hcl cap 0.5 mg</i>	
<i>anagrelide hcl cap 1 mg</i>	
CABLIVI KIT 11MG	NM, LA; DL
<i>cilostazol tab 50 mg</i>	
<i>cilostazol tab 100 mg</i>	
CINRYZE SOL 500 UNIT	NM, LA, PA; DL
DROXIA CAP 200MG	
DROXIA CAP 300MG	
DROXIA CAP 400MG	
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	NM, PA; DL
MULPLETA TAB 3MG	NM, PA; DL
ORLADEYO CAP 110MG	NM, LA, PA; DL
ORLADEYO CAP 150MG	NM, LA, PA; DL
<i>pentoxifylline tab er 400 mg</i>	
PROMACTA PAK 25MG	NM, LA, PA; DL
PROMACTA POW 12.5MG	NM, LA, PA; DL
PROMACTA TAB 12.5MG	NM, LA, PA; DL
PROMACTA TAB 25MG	NM, LA, PA; DL
PROMACTA TAB 50MG	NM, LA, PA; DL
PROMACTA TAB 75MG	NM, LA, PA; DL
RUCONEST INJ 2100UNIT	NM, LA, PA; DL
TAKHZYRO INJ 150MG/ML	NM, LA, PA; DL
TAKHZYRO INJ 300/2ML	NM, LA, PA; DL
TAVNEOS CAP 10MG	NM, LA; DL
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	
<i>tranexamic acid tab 650 mg</i>	

#### **PLATELET AGGREGATION INHIBITORS**

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>
BRILINTA TAB 60MG
BRILINTA TAB 90MG
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>
<i>prasugrel hcl tab 5 mg (base equiv)</i>
<i>prasugrel hcl tab 10 mg (base equiv)</i>

#### **IMMUNOLOGIC AGENTS**

##### **AUTOIMMUNE AGENTS**

DUPIXENT INJ 100/0.67	NM, PA; DL
DUPIXENT INJ 200/1.14	NM, PA; DL
DUPIXENT INJ 200MG	NM, PA; DL
DUPIXENT INJ 300/2ML	NM, PA; DL
ENBREL INJ 25/0.5ML	NM, PA; DL
ENBREL INJ 25MG	NM, PA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
ENBREL INJ 50MG/ML	NM, PA; DL
ENBREL MINI INJ 50MG/ML	NM, PA; DL
ENBREL SRCLK INJ 50MG/ML	NM, PA; DL
HUMIRA INJ 10/0.1ML	NM, PA; DL
HUMIRA INJ 20/0.2ML	NM, PA; DL
HUMIRA INJ 40/0.4ML	NM, PA; DL
HUMIRA KIT 40MG/0.8	NM, PA; DL
HUMIRA PEN INJ 40/0.4ML	NM, PA; DL
HUMIRA PEN INJ 40MG/0.8	NM, PA; DL
HUMIRA PEN INJ 80/0.8ML	NM, PA; DL
HUMIRA PEN INJ CD/UC/HS	NM, PA; DL
HUMIRA PEN KIT CD/UC/HS	NM, PA; DL
HUMIRA PEN KIT PED UC	NM, PA; DL
HUMIRA PEN KIT PS/UV	NM, PA; DL
KINERET INJ	NM, PA; DL
LITFULO CAP 50MG	NM, LA, PA; DL
OTEZLA TAB 10/20	NM, PA; DL
OTEZLA TAB 10/20/30	NM, PA; DL
OTEZLA TAB 20MG	NM, PA; DL
OTEZLA TAB 30MG	NM, PA; DL
RINVOQ TAB 15MG ER	NM, PA; DL
RINVOQ TAB 30MG ER	NM, PA; DL
RINVOQ TAB 45MG ER	NM, PA; DL
SKYRIZI INJ 150DOSE	NM, PA; DL
SKYRIZI INJ 150MG/ML	NM, PA; DL
SKYRIZI INJ 180/1.2	NM, PA; DL
SKYRIZI INJ 360/2.4	NM, PA; DL
SKYRIZI PEN INJ 150MG/ML	NM, PA; DL
STELARA INJ 45MG/0.5	NM, LA, PA; DL; (vials)
STELARA INJ 45MG/0.5	NM, PA; DL; (syringes)
STELARA INJ 90MG/ML	NM, PA; DL
TALTZ INJ 20/0.25	NM, LA, PA; DL
TALTZ INJ 40/0.5ML	NM, LA, PA; DL
TALTZ INJ 80MG/ML	NM, LA, PA; DL
XELJANZ SOL 1MG/ML	NM, PA; DL
XELJANZ TAB 5MG	NM, PA; DL
XELJANZ TAB 10MG	NM, PA; DL
XELJANZ XR TAB 11MG	NM, PA; DL
XELJANZ XR TAB 22MG	NM, PA; DL

#### **DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDs)**

*hydroxychloroquine sulfate tab 200 mg*

*JYLAMVO SOL 2MG/ML*

*leflunomide tab 10 mg*

*leflunomide tab 20 mg*

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	
RIDAURA CAP 3MG	DL
XATMEP SOL 2.5MG/ML	DL
<b>IMMUNOGLOBULINS</b>	
BIVIGAM INJ 10%	NM, LA, PA; DL
GAMASTAN INJ	NM, LA, PA
GAMMAGARD INJ 2.5GM/25	NM, PA; DL
GAMMAGARD INJ 5GM/50ML	NM, PA; DL
GAMMAGARD INJ 10GM/100	NM, PA; DL
GAMMAGARD INJ 20GM/200	NM, PA; DL
GAMMAGARD INJ 30GM/300	NM, PA; DL
GAMMAGARD SD INJ 5GM HU	NM, PA; DL
GAMMAGARD SD INJ 10GM HU	NM, PA; DL
GAMMAKED INJ 1GM/10ML	NM, PA; DL
GAMMAKED INJ 5GM/50ML	NM, PA; DL
GAMMAKED INJ 10GM/100	NM, PA; DL
GAMMAKED INJ 20GM/200	NM, PA; DL
GAMMAPLEX INJ 5%	NM, LA, PA; DL
GAMMAPLEX INJ 10%	NM, LA, PA; DL
GAMUNEX-C INJ 1GM/10ML	NM, PA; DL
GAMUNEX-C INJ 5GM/50ML	NM, PA; DL
GAMUNEX-C INJ 10GM/100	NM, PA; DL
GAMUNEX-C INJ 20GM/200	NM, PA; DL
GAMUNEX-C INJ 40/400ML	NM, PA; DL
OCTAGAM INJ 1GM	NM, PA; DL
OCTAGAM INJ 2GM/20ML	NM, PA; DL
PANZYGA SOL 1GM/10ML	NM, PA; DL
PANZYGA SOL 2.5/25ML	NM, PA; DL
PANZYGA SOL 5GM/50ML	NM, PA; DL
PANZYGA SOL 10/100ML	NM, PA; DL
PANZYGA SOL 20/200ML	NM, PA; DL
PANZYGA SOL 30/300ML	NM, PA; DL
PRIVIGEN INJ 20GRAMS	NM, PA; DL
<b>IMMUNOMODULATORS</b>	
ACTIMMUNE INJ 2MU/0.5	NM, LA, PA; DL
ARCALYST INJ 220MG	NM, LA, PA; DL
BEYFORTUS INJ 50/0.5ML	DL
BEYFORTUS INJ 100MG/ML	DL
GRASTEK SUB 2800BAU	PA; DL
INTRON A INJ 10MU	LA; DL
INTRON A INJ 18MU	LA; DL
INTRON A INJ 25MU	DL
INTRON A INJ 50MU	LA; DL
ODACTRA SUB	PA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
SYNAGIS INJ 100MG/ML	NM; DL
<b>IMMUNOSUPPRESSANTS</b>	
ASTAGRAF XL CAP 0.5MG	B/D, NM
ASTAGRAF XL CAP 1MG	B/D, NM
ASTAGRAF XL CAP 5MG	B/D, NM
ATGAM INJ 250MG	DL
AZATHIOPRINE INJ 100MG	B/D
<i>azathioprine tab 50 mg</i>	B/D
<i>azathioprine tab 75 mg</i>	B/D
<i>azathioprine tab 100 mg</i>	B/D
BENLYSTA INJ 120MG	NM, LA, PA; DL
BENLYSTA INJ 200MG/ML	QL (4 auto-injectors / 28 days), NM, LA, PA; DL
BENLYSTA INJ 200MG/ML	QL (4 syringes / 28 days), NM, LA, PA; DL
BENLYSTA INJ 400MG	NM, LA, PA; DL
<i>cyclosporine cap 25 mg</i>	B/D, NM
<i>cyclosporine cap 100 mg</i>	B/D, NM
<i>cyclosporine iv soln 50 mg/ml</i>	B/D, NM
<i>cyclosporine modified cap 25 mg</i>	B/D, NM
<i>cyclosporine modified cap 50 mg</i>	B/D, NM
<i>cyclosporine modified cap 100 mg</i>	B/D, NM
<i>cyclosporine modified oral soln 100 mg/ml</i>	B/D, NM
ENVARSUS XR TAB 0.75MG	B/D, NM
ENVARSUS XR TAB 1MG	B/D, NM
ENVARSUS XR TAB 4MG	B/D, NM
<i>everolimus tab 0.5 mg</i>	B/D, NM; DL
<i>everolimus tab 0.25 mg</i>	B/D, QL (60 tabs / 30 days), NM; DL
<i>everolimus tab 0.75 mg</i>	B/D, NM; DL
<i>everolimus tab 1 mg</i>	B/D, NM; DL
<i>gengraf</i>	B/D, NM
LUPKYNIS CAP 7.9MG	QL (180 caps / 30 days), NM, LA, PA; DL
<i>mycophenolate mofetil cap 250 mg</i>	B/D, NM
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	B/D, NM
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	B/D, NM
<i>mycophenolate mofetil tab 500 mg</i>	B/D, NM
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	B/D, NM
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	B/D, NM
MYHIBBIN SUS 200MG/ML	B/D, NM; DL
NULOJIX INJ 250MG	B/D, NM; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
PROGRAF GRA 0.2MG	B/D, NM
PROGRAF GRA 1MG	B/D, NM
PROGRAF INJ 5MG/ML	B/D, NM
REZUROCK TAB 200MG	NM, LA, PA; DL
SIMULECT INJ 10MG	B/D
SIMULECT INJ 20MG	B/D
<i>sirolimus oral soln 1 mg/ml</i>	B/D, NM
<i>sirolimus tab 0.5 mg</i>	B/D, NM
<i>sirolimus tab 1 mg</i>	B/D, NM
<i>sirolimus tab 2 mg</i>	B/D, NM
<i>tacrolimus cap 0.5 mg</i>	B/D, NM
<i>tacrolimus cap 1 mg</i>	B/D, NM
<i>tacrolimus cap 5 mg</i>	B/D, NM
THYMOGLOBULN INJ 25MG	B/D

## **VACCINES**

ABRYSVO INJ	
ACTHIB INJ	
ADACEL INJ	
AREXVY INJ 120MCG	
BCG VACCINE INJ 50MG	
BEXSERO INJ	
BOOSTRIX INJ	
DAPTACEL INJ	
DIP/TET PED INJ 25-5LFU	
ENGERIX-B INJ 10/0.5ML	B/D
ENGERIX-B INJ 20MCG/ML	B/D
GARDASIL 9 INJ	
HAVRIX INJ 720UNIT	
HAVRIX INJ 1440UNIT	
HEPLISAV-B INJ 20/0.5ML	B/D
HIBERIX SOL 10MCG	
IMOVAX RABIE INJ 2.5/ML	
INFANRIX INJ	
IPOP INJ INACTIVE	
IXCHIQ INJ	
IXIARO INJ	
JYNNEOS INJ	
KINRIX INJ	
M-M-R II INJ	
MENACTRA INJ	
MENQUADFI INJ	
MENVEO INJ	
MENVEO SOL	
MRESVIA INJ 50MCG	

**PA** - Prior Authorization   **QL** - Quantity Limits   **NM** - Not available at mail-order   **B/D** -  
 Covered under Medicare B or D   **LA** - Limited Access   **DL** - Medication restricted to a 30  
 day supply

<b>Drug Name</b>	<b>Requirements/Limits</b>
PEDIARIX INJ 0.5ML	
PEDVAX HIB INJ	
PENBRAYA INJ	
PENTACEL INJ	
PREHEVBRIOSUS 10MCG/ML	B/D
PRIORIX INJ	
PROQUAD INJ	
QUADRACEL INJ	
QUADRACEL INJ 0.5ML	
RABAVERT INJ	DL
RECOMBIVAHB INJ 5MCG/0.5	B/D
RECOMBIVAHB INJ 10MCG/ML	B/D
RECOMBIVAHB INJ 40MCG/ML	B/D
ROTARIX SUS	
ROTATEQ SOL	
SHINGRIX INJ 50/0.5ML	QL (2 injections in lifetime)
TDVAX INJ 2-2 LF	
TENIVAC INJ 5-2LF	
TICOVAC INJ	
TRUMENBA INJ	
TWINRIX INJ	
TYPHIM VI INJ	
VAQTA INJ 25/0.5ML	
VAQTA INJ 50UNT/ML	
VARIVAX INJ	
VAXCHORA SUS	
YF-VAX INJ	

## **NUTRITIONAL/SUPPLEMENTS**

### **ELECTROLYTES/MINERALS, INJECTABLE**

D10W/NACL INJ 0.2%	
DEXTROSE 2.5% W/ SODIUM CHLORIDE 0.45%	
<i>dextrose 5% in lactated ringers</i>	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	
ISOLYTE-P INJ /D5W	DL
ISOLYTE-S INJ PH 7.4	DL
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i>	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	
kcl 40 meq/l (0.3%) in nacl 0.9% inj	
KCL/D5W/LACT INJ 20MEQ/L	
<i>lactated ringer's solution</i>	
<i>magnesium sulfate inj 50%</i>	
<i>mult electro inj ph 5.5</i>	DL
PLASMA-LYTE INJ -148	DL
PLASMA-LYTE INJ -A	DL
POT CHLORIDE INJ 10MEQ	
POT CHLORIDE INJ 20MEQ	
POT CHLORIDE INJ 40MEQ	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	
<i>potassium chloride inj 2 meq/ml</i>	
<i>ringer's solution</i>	
<i>sodium chloride iv soln 0.9%</i>	
<i>sodium chloride iv soln 0.45%</i>	
<i>sodium chloride iv soln 3%</i>	

#### **ELECTROLYTES/MINERALS/VITAMINS, ORAL**

<i>effervescent pot chloride</i>
<i>klor-con</i>
<i>klor-con 8</i>
<i>klor-con 10</i>
<i>klor-con m10</i>
<i>klor-con m15</i>
<i>klor-con m20</i>
<i>klor-con/ef</i>
<i>potassium chloride cap er 8 meq</i>
<i>potassium chloride cap er 10 meq</i>
<i>potassium chloride microencapsulated crys er tab 10 meq</i>
<i>potassium chloride microencapsulated crys er tab 15 meq</i>
<i>potassium chloride microencapsulated crys er tab 20 meq</i>
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	
<i>potassium chloride powder packet 20 meq</i>	
<i>potassium chloride tab er 8 meq (600 mg)</i>	
<i>potassium chloride tab er 10 meq</i>	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	
<i>sodium fluoride 2.2 mg</i>	

#### **IV NUTRITION**

<i>dextrose inj 5%</i>	
<i>dextrose inj 10%</i>	
<i>INTRALIPID INJ 20%</i>	B/D; DL
<i>INTRALIPID INJ 30%</i>	B/D; DL
<i>NUTRILIPID EMU 20%</i>	B/D; DL
<i>PREMASOL SOL 10%</i>	B/D; DL
<i>PROSOL INJ 20%</i>	B/D; DL
<i>TRAVASOL INJ 10%</i>	B/D; DL
<i>TROPHAMINE INJ 10%</i>	B/D; DL

#### **OPHTHALMIC**

##### **ANTI-INFECTIVE/ANTI-INFLAMMATORY**

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	
<i>neo-polycin oin hc 1%op</i>	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	
<i>neomycin-polymyxin-hc ophth susp</i>	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	
<i>TOBRADEX OIN 0.3-0.1%</i>	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	

##### **ANTI-INFECTIVES**

<i>AZASITE SOL 1%</i>	
<i>bacitracin ophth oint 500 unit/gm</i>	
<i>bacitracin-polymyxin b ophth oint</i>	
<i>CILOXAN OIN 0.3% OP</i>	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	
<i>erythromycin ophth oint 5 mg/gm</i>	
<i>gatifloxacin ophth soln 0.5%</i>	
<i>gentamicin sulfate ophth soln 0.3%</i>	
<i>levofloxacin ophth soln 0.5%</i>	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	
<i>NATACYN SUS 5% OP</i>	
<i>neo-polycin oin op</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	
<i>neomycin-polomyx-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	
<i>ofloxacin ophth soln 0.3%</i>	
<i>polycin oin op</i>	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	
<i>sulfacetamide sodium ophth oint 10%</i>	
<i>sulfacetamide sodium ophth soln 10%</i>	
<i>tobramycin ophth soln 0.3%</i>	
<i>TOBREX OIN 0.3% OP</i>	
<i>trifluridine ophth soln 1%</i>	
<i>ZIRGAN GEL 0.15%</i>	
<b>ANTI-INFLAMMATORIES</b>	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	
<i>diclofenac sodium ophth soln 0.1%</i>	
<i>diluprednate ophth emulsion 0.05%</i>	
<i>EYSUVIS DRO 0.25%</i>	
<i>fluorometholone ophth susp 0.1%</i>	
<i>flurbiprofen sodium ophth soln 0.03%</i>	
<i>FML FORTE SUS 0.25% OP</i>	
<i>ketorolac tromethamine ophth soln 0.4%</i>	
<i>ketorolac tromethamine ophth soln 0.5%</i>	
<i>LOTEMAX OIN 0.5%</i>	
<i>LOTEMAX SM GEL 0.38%</i>	
<i>loteprednol etabonate ophth gel 0.5%</i>	
<i>loteprednol etabonate ophth susp 0.5%</i>	
<i>NEVANAC SUS 0.1% OP</i>	
<i>PRED MILD SUS 0.12% OP</i>	
<i>PRED SOD PHO SOL 1% OP</i>	
<i>prednisolone acetate ophth susp 1%</i>	
<i>PROLENSA SOL 0.07%</i>	
<b>ANTIALLERGICS</b>	
<i>azelastine hcl ophth soln 0.05%</i>	
<i>bepotastine besilate ophth soln 1.5%</i>	
<i>cromolyn sodium ophth soln 4%</i>	
<i>epinastine hcl ophth soln 0.05%</i>	
<i>ZERVIATE DRO 0.24%</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<b>ANTIGLAUCOMA</b>	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	
<i>betaxolol hcl ophth soln 0.5%</i>	
<i>BETOPTIC-S SUS 0.25% OP</i>	
<i>bimatoprost ophth soln 0.03%</i>	
<i>brimonidine tartrate ophth soln 0.2%</i>	
<i>brimonidine tartrate ophth soln 0.15%</i>	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	
<i>brinzolamide ophth susp 1%</i>	
<i>carteolol hcl ophth soln 1%</i>	
<i>dorzolamide hcl ophth soln 2%</i>	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	
<i>IOPIDINE SOL 1% OP</i>	
<i>latanoprost ophth soln 0.005%</i>	
<i>levobunolol hcl ophth soln 0.5%</i>	
<i>LUMIGAN SOL 0.01% OP</i>	
<i>pilocarpine hcl ophth soln 1%</i>	
<i>pilocarpine hcl ophth soln 2%</i>	
<i>pilocarpine hcl ophth soln 4%</i>	
<i>RHOPRESSA SOL 0.02%</i>	
<i>ROCKLATAN DRO</i>	
<i>SIMBRINZA SUS 1-0.2%</i>	
<i>timolol maleate ophth gel forming soln 0.5%</i>	
<i>timolol maleate ophth gel forming soln 0.25%</i>	
<i>timolol maleate ophth soln 0.5%</i>	
<i>timolol maleate ophth soln 0.25%</i>	
<i>timolol maleate preservative free ophth soln 0.5%</i>	
<i>timolol maleate preservative free ophth soln 0.25%</i>	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	
<i>VYZULTA SOL 0.024%</i>	
<b>MISCELLANEOUS</b>	
<i>atropine sulfate ophth soln 1%</i>	
<i>cyclosporine (ophth) emulsion 0.05%</i>	
<i>CYSTADROPS SOL 0.37%</i>	NM, LA, PA; DL
<i>CYSTARAN SOL 0.44%</i>	NM, LA, PA; DL
<i>EYLEA INJ 2/0.05ML</i>	NM, LA; DL
<i>LUCENTIS SOL 0.3MG</i>	NM, LA; DL
<i>LUCENTIS SOL 0.5MG</i>	NM, LA; DL
<i>OXERVATE SOL 20MCG/ML</i>	NM, LA; DL

<b>Drug Name</b>	<b>Requirements/Limits</b>
RESTASIS EMU 0.05% OP	
RESTASIS MUL EMU 0.05% OP	
IIDRA DRO 5%	

## **OTIC**

### **OTIC AGENTS**

<i>acetic acid otic soln 2%</i>
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>
<i>flac oil 0.01%</i>
<i>fluocinolone acetonide (otic) oil 0.01%</i>
<i>neomycin-polymyxin-hc otic soln 1%</i>
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>
<i>ofloxacin otic soln 0.3%</i>

## **RESPIRATORY**

### **ANTICHOLINERGIC/BETA AGONIST COMBINATIONS**

ANORO ELLIPT AER 62.5-25
BEVESPI AER 9-4.8MCG
BREZTRI AERO AER SPHERE
COMBIVENT AER 20-100
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3mlB/D</i>
TRELEGY AER 100MCG
TRELEGY AER 200MCG

### **ANTICHOLINERGICS**

ATROVENT HFA AER 17MCG	
INCRUSE ELPT INH 62.5MCG	
<i>ipratropium bromide inhal soln 0.02%</i>	B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	
YUPELRI SOL	B/D

### **ANTIHISTAMINES**

<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>
<i>azelastine spr 0.1%</i>
<i>cyproheptadine hcl tab 4 mg</i>
<i>desloratadine tab 5 mg</i>
<i>diphenhydramine hcl inj 50 mg/ml</i>
<i>hydroxyzine hcl tab 10 mg</i>
<i>hydroxyzine hcl tab 25 mg</i>
<i>hydroxyzine hcl tab 50 mg</i>
<i>hydroxyzine pamoate cap 25 mg</i>
<i>hydroxyzine pamoate cap 50 mg</i>

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>hydroxyzine pamoate cap 100 mg</i>	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	
<i>levocetirizine dihydrochloride tab 5 mg</i>	
<i>olopatadine hcl nasal soln 0.6%</i>	
<b>BETA AGONISTS</b>	
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	B/D
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	B/D
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	B/D
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	B/D
<i>albuterol sulfate syrup 2 mg/5ml</i>	
<i>albuterol sulfate tab 2 mg</i>	
<i>albuterol sulfate tab 4 mg</i>	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	B/D; DL
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	B/D; DL
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	B/D
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	B/D
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	B/D
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	B/D
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	
SEREVENT DIS AER 50MCG	
<i>terbutaline sulfate inj 1 mg/ml</i>	
<i>terbutaline sulfate tab 2.5 mg</i>	
<i>terbutaline sulfate tab 5 mg</i>	
VENTOLIN HFA AER	
<b>LEUKOTRIENE MODULATORS</b>	
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	
<i>montelukast sodium tab 10 mg (base equiv)</i>	
<i>zafirlukast tab 10 mg</i>	
<i>zafirlukast tab 20 mg</i>	
<b>MISCELLANEOUS</b>	
<i>acetylcysteine inhal soln 10%</i>	B/D; DL
<i>acetylcysteine inhal soln 20%</i>	B/D; DL
<i>ARALAST NP INJ 1000MG</i>	NM, LA, PA; DL

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<b>Drug Name</b>	<b>Requirements/Limits</b>
BRONCHITOL CAP 40MG	NM, LA, PA
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	B/D
DALIRESP TAB 250MCG	DL
DALIRESP TAB 500MCG	DL
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	QL (4 pens / 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	QL (4 pens / 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	QL (4 pens / 30 days)
ESBRIET CAP 267MG	NM, LA, PA; DL
ESBRIET TAB 267MG	NM, LA, PA; DL
ESBRIET TAB 801MG	NM, LA, PA; DL
FASENRA INJ 10MG/0.5	NM, LA, PA; DL
FASENRA INJ 30MG/ML	NM, LA, PA; DL
FASENRA PEN INJ 30MG/ML	NM, LA, PA; DL
GLASSIA INJ	NM, LA, PA; DL
KALYDECO GRA 5.8MG	NM, LA, PA; DL
KALYDECO GRA 13.4MG	NM, LA, PA; DL
KALYDECO PAK 25MG	NM, LA, PA; DL
KALYDECO PAK 50MG	NM, LA, PA; DL
KALYDECO PAK 75MG	NM, LA, PA; DL
KALYDECO TAB 150MG	QL (60 tabs / 30 days), NM, LA, PA; DL
OFEV CAP 100MG	NM, LA, PA; DL
OFEV CAP 150MG	NM, LA, PA; DL
ORKAMBI GRA 75-94MG	NM, LA, PA; DL
ORKAMBI GRA 100-125	NM, LA, PA; DL
ORKAMBI GRA 150-188	NM, LA, PA; DL
ORKAMBI TAB 100-125	NM, LA, PA; DL
ORKAMBI TAB 200-125	NM, LA, PA; DL
<i>pirfenidone cap 267 mg</i>	NM, PA; DL
<i>pirfenidone tab 267 mg</i>	NM, PA; DL
<i>pirfenidone tab 534 mg</i>	NM, PA; DL
<i>pirfenidone tab 801 mg</i>	NM, PA; DL
PROLASTIN-C INJ 1000MG	NM, LA, PA; DL
PULMOZYME SOL 1MG/ML	B/D, NM; DL
<i>roflumilast tab 250 mcg</i>	DL
<i>roflumilast tab 500 mcg</i>	DL
SYMDEKO TAB 50-75MG	QL (60 tabs / 30 days), NM, LA, PA; DL
THEO-24 CAP 100MG CR	
THEO-24 CAP 200MG CR	
<i>theophylline tab er 12hr 100 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>theophylline tab er 12hr 200 mg</i>	
<i>theophylline tab er 12hr 300 mg</i>	
<i>theophylline tab er 12hr 450 mg</i>	
<i>theophylline tab er 24hr 400 mg</i>	
<i>theophylline tab er 24hr 600 mg</i>	
TRIKAFTA TAB	QL (84 tabs / 28 days), NM, LA, PA; DL
XOLAIR INJ 75/0.5	NM, LA, PA; DL
XOLAIR INJ 150MG/ML	NM, LA, PA; DL
XOLAIR INJ 300/2ML	NM, LA, PA; DL
XOLAIR SOL 150MG	NM, LA, PA; DL
ZEMAIRA INJ 1000MG	NM, LA, PA; DL
<b>NASAL STEROIDS</b>	
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	
<i>mometasone furoate nasal susp 50 mcg/act</i>	
XHANCE MIS 93MCG	
<b>STEROID INHALANTS</b>	
ARNUITY ELPT INH 50MCG	
ARNUITY ELPT INH 100MCG	
ARNUITY ELPT INH 200MCG	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	B/D
<i>budesonide inhalation susp 1 mg/2ml</i>	B/D
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	
PULMICORT INH 90MCG	
PULMICORT INH 180MCG	
<b>STEROID/BETA-AGONIST COMBINATIONS</b>	
ADVAIR HFA AER 45/21	
ADVAIR HFA AER 115/21	
ADVAIR HFA AER 230/21	
BREO ELLIPTA INH 50-25MCG	
BREO ELLIPTA INH 100-25	
BREO ELLIPTA INH 200-25	
DULERA AER 50-5MCG	
DULERA AER 100-5MCG	
DULERA AER 200-5MCG	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	
<i>wixela inhba</i>	
<b>TOPICAL</b>	
<b>DERMATOLOGY, ACNE</b>	
<i>accutane</i>	
<i>amnesteem cap 10mg</i>	
<i>amnesteem cap 20mg</i>	
<i>amnesteem cap 40mg</i>	
<i>avita cre 0.025%</i>	PA
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	
<i>claravis cap 10mg</i>	
<i>claravis cap 20mg</i>	
<i>claravis cap 30mg</i>	
<i>claravis cap 40mg</i>	
<i>clindacin mis etz 1%</i>	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	
<i>clindamycin phosphate gel 1%</i>	
<i>clindamycin phosphate lotion 1%</i>	
<i>clindamycin phosphate soln 1%</i>	
<i>clindamycin phosphate swab 1%</i>	
<i>ery</i>	
<i>erythromycin gel 2%</i>	
<i>erythromycin soln 2%</i>	
<i>isotretinoin cap 10 mg</i>	
<i>isotretinoin cap 20 mg</i>	
<i>isotretinoin cap 30 mg</i>	
<i>isotretinoin cap 40 mg</i>	
<i>sulfacetamide sodium lotion 10% (acne)</i>	
<i>tretinoin cream 0.1%</i>	PA; DL
<i>tretinoin cream 0.05%</i>	PA; DL
<i>tretinoin cream 0.025%</i>	PA; DL
<i>tretinoin gel 0.01%</i>	PA
<i>tretinoin gel 0.05%</i>	PA
<i>tretinoin gel 0.025%</i>	PA
<i>zenatane cap 10mg</i>	
<i>zenatane cap 20mg</i>	
<i>zenatane cap 30mg</i>	
<i>zenatane cap 40mg</i>	
<b>DERMATOLOGY, ANTIBIOTICS</b>	
<i>ALTABAX OIN 1%</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>gentamicin sulfate cream 0.1%</i>	
<i>gentamicin sulfate oint 0.1%</i>	
<i>mupirocin calcium cream 2%</i>	
<i>mupirocin oint 2%</i>	
<i>silver sulfadiazine cream 1%</i>	
<i>ssd</i>	
<i>SULFAMYLYON CRE 85MG/GM</i>	
<b>DERMATOLOGY, ANTIFUNGALS</b>	
<i>ciclopirox gel 0.77%</i>	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	
<i>ciclopirox shampoo 1%</i>	
<i>ciclopirox solution 8%</i>	DL
<i>clotrimazole cream 1%</i>	
<i>clotrimazole soln 1%</i>	QL (90 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	QL (90 gm / 30 days)
<i>ketoconazole cream 2%</i>	
<i>luliconazole cream 1%</i>	
<i>nyamyc</i>	
<i>nystatin cream 100000 unit/gm</i>	
<i>nystatin oint 100000 unit/gm</i>	
<i>nystatin topical powder 100000 unit/gm</i>	
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	
<i>nystop</i>	
<b>DERMATOLOGY, ANTIPSORIATICS</b>	
<i>acitretin cap 10 mg</i>	
<i>acitretin cap 17.5 mg</i>	
<i>acitretin cap 25 mg</i>	
<i>calcipotriene cream 0.005%</i>	
<i>calcipotriene oint 0.005%</i>	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	
<i>calcitriol oint 3 mcg/gm</i>	
<i>methoxsalen rapid cap 10 mg</i>	DL
<i>tazarotene cream 0.1%</i>	
<i>tazarotene gel 0.1%</i>	
<i>tazarotene gel 0.05%</i>	
<b>DERMATOLOGY, ANTISEBORRHEICS</b>	
<i>ketoconazole shampoo 2%</i>	
<i>selenium sulfide lotion 2.5%</i>	
<b>DERMATOLOGY, CORTICOSTEROIDS</b>	
<i>ala-cort</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>alclometasone dipropionate cream 0.05%</i>	
<i>alclometasone dipropionate oint 0.05%</i>	
<i>betamethasone dipropionate augmented cream 0.05%</i>	
<i>betamethasone dipropionate augmented gel 0.05%</i>	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	
<i>betamethasone dipropionate augmented oint 0.05%</i>	
<i>betamethasone dipropionate cream 0.05%</i>	
<i>betamethasone dipropionate lotion 0.05%</i>	
<i>betamethasone dipropionate oint 0.05%</i>	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	
<i>clobetasol propionate cream 0.05%</i>	QL (120 gm / 30 days)
<i>clobetasol propionate e</i>	QL (120 gm / 30 days)
<i>clobetasol propionate emulsion foam 0.05%</i>	QL (100 gm / 30 days)
<i>clobetasol propionate foam 0.05%</i>	QL (100 gm / 30 days)
<i>clobetasol propionate gel 0.05%</i>	QL (120 gm / 30 days)
<i>clobetasol propionate lotion 0.05%</i>	QL (120 mL / 30 days)
<i>clobetasol propionate oint 0.05%</i>	QL (120 gm / 30 days)
<i>clobetasol propionate shampoo 0.05%</i>	QL (120 mL / 30 days)
<i>clobetasol propionate soln 0.05%</i>	QL (100 mL / 30 days)
<i>clobetasol propionate spray 0.05%</i>	QL (120 mL / 30 days)
<i>clocortolone pivalate cream 0.1%</i>	
<i>clodan sha 0.05%</i>	QL (120 mL / 30 days)
<i>desonide cream 0.05%</i>	QL (90 gm / 30 days)
<i>desonide lotion 0.05%</i>	QL (120 mL / 30 days)
<i>desonide oint 0.05%</i>	QL (90 gm / 30 days)
<i>fluocinolone acetonide cream 0.01%</i>	
<i>fluocinolone acetonide cream 0.025%</i>	
<i>fluocinolone acetonide oint 0.025%</i>	
<i>fluocinolone acetonide sc</i>	QL (120 mL / 30 days)
<i>fluocinolone acetonide soln 0.01%</i>	QL (120 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	
<i>fluocinonide emulsified base cream 0.05%</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>fluocinonide gel 0.05%</i>	
<i>fluocinonide oint 0.05%</i>	
<i>fluocinonide soln 0.05%</i>	QL (120 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	
<i>fluticasone propionate oint 0.005%</i>	
<i>halobetasol propionate cream 0.05%</i>	QL (120 gm / 30 days)
<i>halobetasol propionate oint 0.05%</i>	QL (120 gm / 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	
<i>hydrocortisone butyrate oint 0.1%</i>	
<i>hydrocortisone butyrate soln 0.1%</i>	
<i>hydrocortisone lotion 2.5%</i>	
<i>hydrocortisone oint 2.5%</i>	
<i>hydrocortisone valerate cream 0.2%</i>	
<i>hydrocortisone valerate oint 0.2%</i>	
<i>mometasone furoate cream 0.1%</i>	
<i>mometasone furoate oint 0.1%</i>	
<i>mometasone furoate solution 0.1% (lotion)</i>	
<i>tovet</i>	QL (100 gm / 30 days)
<i>triamcinolone acetonide cream 0.1%</i>	
<i>triamcinolone acetonide cream 0.5%</i>	
<i>triamcinolone acetonide cream 0.025%</i>	
<i>triamcinolone acetonide lotion 0.1%</i>	
<i>triamcinolone acetonide lotion 0.025%</i>	
<i>triamcinolone acetonide oint 0.1%</i>	
<i>triamcinolone acetonide oint 0.5%</i>	
<i>triamcinolone acetonide oint 0.025%</i>	
<i>triderm</i>	
<i>triderm cre 0.1%</i>	
<i>VERDESO AER 0.05%</i>	QL (100 gm / 30 days); DL

#### **DERMATOLOGY, LOCAL ANESTHETICS**

<i>lidocaine oint 5%</i>	PA
<i>lidocaine patch 5%</i>	QL (90 patches / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	QL (30 gm / 30 days)
<i>lidocan pad 5%</i>	QL (90 patches / 30 days), PA
<i>tridacaine pad 5%</i>	QL (90 patches / 30 days), PA

#### **DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE**

<i>acyclovir oint 5%</i>	
<i>azelaic acid gel 15%</i>	
<i>bexarotene gel 1%</i>	NM, PA; DL
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	QL (500 gm / 30 days)

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>diclofenac sodium soln 1.5%</i>	QL (300 mL / 30 days)
EUCRISA OIN 2%	
FLUOROPLEX CRE 1%	DL
<i>fluorouracil cream 5%</i>	
<i>fluorouracil soln 2%</i>	
<i>fluorouracil soln 5%</i>	
<i>hydrocortisone perianal cream 2.5%</i>	
HYFTOR GEL 0.2%	NM, LA; DL
<i>imiquimod cream 5%</i>	
<i>lactic acid (ammonium lactate) cream 12%</i>	
<i>lactic acid (ammonium lactate) lotion 12%</i>	
<i>metronidazole cream 0.75%</i>	
<i>metronidazole gel 0.75%</i>	
<i>metronidazole lotion 0.75%</i>	
<i>nitroglycerin oint 0.4%</i>	
PANRETIN GEL 0.1%	DL
<i>penciclovir cream 1%</i>	DL
<i>pimecrolimus cream 1%</i>	
<i>podofilox soln 0.5%</i>	
<i>procto-med hc</i>	
<i>proctosol hc</i>	
<i>proctozone-hc</i>	
QBREXZA PAD 2.4%	QL (30 pledges / 30 days)
RECTIV OIN 0.4%	
<i>tacrolimus oint 0.1%</i>	
<i>tacrolimus oint 0.03%</i>	
TARGETIN GEL 1%	NM, PA; DL
VALCHLOR GEL 0.016%	NM, LA, PA; DL
ZYCLARA PUMP CRE 2.5%	DL

#### **DERMATOLOGY, SCABICIDES AND PEDICULIDES**

<i>malathion lotion 0.5%</i>
<i>permethrin cream 5%</i>
<i>spinosad susp 0.9%</i>

#### **DERMATOLOGY, WOUND CARE AGENTS**

<i>lactated ringer's for irrigation</i>	
REGRANEX GEL 0.01%	QL (30 gm / 30 days); DL
<i>ringer's solution for irrigation</i>	
SANTYL OIN 250/GM	
<i>sodium chloride irrigation soln 0.9%</i>	
<i>water for irrigation, sterile irrigation soln</i>	

#### **MOUTH/THROAT/DENTAL AGENTS**

ARESTIN MIS 1MG	NM
<i>cevimeline hcl cap 30 mg</i>	

<b>Drug Name</b>	<b>Requirements/Limits</b>
<i>chlorhexidine gluconate soln 0.12%</i>	
<i>clotrimazole troche 10 mg</i>	
<i>lidocaine hcl viscous soln 2%</i>	
<i>nystatin susp 100000 unit/ml</i>	
<i>periogard</i>	
<i>pilocarpine hcl tab 5 mg</i>	
<i>pilocarpine hcl tab 7.5 mg</i>	
<i>sf 5000 plus</i>	
<i>triamcinolone acetonide dental paste 0.1%</i>	

## Index

### A

abacavir sulfate soln 20 mg/ml (base equiv) ..... 7  
abacavir sulfate tab 300 mg (base equiv) ..... 7  
abacavir sulfate-lamivudine tab 600-300 mg ..... 8  
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg ..... 8  
ABELCET INJ 5MG/ML ..... 6  
ABILIFY ASIM INJ 720MG ..... 45  
ABILIFY ASIM INJ 960MG ..... 45  
ABILIFY MAIN INJ 300MG ..... 45  
ABILIFY MAIN INJ 400MG ..... 45  
abiraterone acetate tab 250 mg ..... 17  
abiraterone acetate tab 500 mg ..... 17  
ABRAXANE INJ 100MG ..... 19  
ABRYSVO INJ ..... 88  
acamprosate calcium tab delayed release 333 mg ..... 59  
acarbose tab 100 mg ..... 61  
acarbose tab 25 mg ..... 61  
acarbose tab 50 mg ..... 61  
accutane ..... 98  
acebutolol hcl cap 200 mg ..... 33  
acebutolol hcl cap 400 mg ..... 33  
acetaminophen w/ codeine soln 120-12 mg/5ml ..... 2  
acetaminophen w/ codeine tab 300-15 mg ..... 2  
acetaminophen w/ codeine tab 300-30 mg ..... 2  
acetaminophen w/ codeine tab 300-60 mg ..... 2  
acetazolamide cap er 12hr 500 mg ..... 35  
acetazolamide tab 125 mg ..... 36  
acetazolamide tab 250 mg ..... 36  
acetic acid otic soln 2% ..... 94  
acetylcysteine inhal soln 10% ..... 95  
acetylcysteine inhal soln 20% ..... 95  
acitretin cap 10 mg ..... 99  
acitretin cap 17.5 mg ..... 99  
acitretin cap 25 mg ..... 99  
ACTHAR INJ 80UNIT ..... 72  
ACTHIB INJ ..... 88  
ACTIMMUNE INJ 2MU/0.5 ..... 86

acyclovir cap 200 mg ..... 10  
acyclovir oint 5% ..... 101  
acyclovir sodium iv soln 50 mg/ml ..... 10  
acyclovir susp 200 mg/5ml ..... 10  
acyclovir tab 400 mg ..... 10  
acyclovir tab 800 mg ..... 10  
ADACEL INJ ..... 88  
adefovir dipivoxil tab 10 mg ..... 10  
ADEMPAS TAB 0.5MG ..... 38  
ADEMPAS TAB 1.5MG ..... 38  
ADEMPAS TAB 1MG ..... 38  
ADEMPAS TAB 2.5MG ..... 38  
ADEMPAS TAB 2MG ..... 38  
ADRENALIN INJ 1MG/ML ..... 36  
ADVAIR HFA AER 115/21 ..... 97  
ADVAIR HFA AER 230/21 ..... 97  
ADVAIR HFA AER 45/21 ..... 97  
AFINITOR DIS TAB 2MG ..... 19  
AFINITOR DIS TAB 3MG ..... 19  
AFINITOR DIS TAB 5MG ..... 19  
AIMOVIG INJ 140MG/ML ..... 56  
AIMOVIG INJ 70MG/ML ..... 56  
AJOVY INJ 225/1.5 ..... 56  
AKEEGA TAB 100/500 ..... 19  
AKEEGA TAB 50/500MG ..... 19  
ala-cort ..... 99  
albendazole tab 200 mg ..... 4  
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) ..... 95  
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml) ..... 95  
albuterol sulfate soln nebu 0.5% (5 mg/ml) ..... 95  
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv) ..... 95  
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv) ..... 95  
albuterol sulfate syrup 2 mg/5ml ..... 95  
albuterol sulfate tab 2 mg ..... 95  
albuterol sulfate tab 4 mg ..... 95  
alclometasone dipropionate cream 0.05% ..... 100  
alclometasone dipropionate oint 0.05% ..... 100  
ALECENSA CAP 150MG ..... 19

<i>alendronate sodium oral soln 70 mg/75ml</i> .....	64	<i>amiodarone hcl tab 100 mg</i> .....	30
<i>alendronate sodium tab 10 mg</i> .....	65	<i>amiodarone hcl tab 200 mg</i> .....	30
<i>alendronate sodium tab 35 mg</i> .....	65	<i>amiodarone hcl tab 400 mg</i> .....	30
<i>alendronate sodium tab 70 mg</i> .....	65	<i>amitriptyline hcl tab 10 mg</i> .....	40
<i>alfuzosin hcl tab er 24hr 10 mg</i> .....	80	<i>amitriptyline hcl tab 100 mg</i> .....	40
<i>aliskiren fumarate tab 150 mg (base equivalent)</i> .....	36	<i>amitriptyline hcl tab 150 mg</i> .....	40
<i>aliskiren fumarate tab 300 mg (base equivalent)</i> .....	36	<i>amitriptyline hcl tab 25 mg</i> .....	40
<i>allopurinol tab 100 mg</i> .....	1	<i>amitriptyline hcl tab 50 mg</i> .....	40
<i>allopurinol tab 300 mg</i> .....	1	<i>amitriptyline hcl tab 75 mg</i> .....	40
<i>almotriptan malate tab 12.5 mg</i> .....	56	<i>amlodipine besylate tab 10 mg (base equivalent)</i> .....	34
<i>almotriptan malate tab 6.25 mg</i> .....	56	<i>amlodipine besylate tab 2.5 mg (base equivalent)</i> .....	34
<i>alosetron hcl tab 0.5 mg (base equiv)</i> .....	79	<i>amlodipine besylate tab 5 mg (base equivalent)</i> .....	34
<i>alosetron hcl tab 1 mg (base equiv)</i> .....	79	<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i> .....	26
<i>ALPRAZOLAM CON 1 MG/ML</i> .....	39	<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i> .....	27
<i>alprazolam tab 0.25 mg</i> .....	39	<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i> .....	26
<i>alprazolam tab 0.5 mg</i> .....	39	<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i> .....	26
<i>alprazolam tab 1 mg</i> .....	39	<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i> .....	26
<i>alprazolam tab 2 mg</i> .....	39	<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i> .....	26
<i>ALTABAX OIN 1%</i> .....	98	<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i> .....	28
<i>altavera</i> .....	66	<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i> .....	28
<i>ALUNBRIG PAK</i> .....	19	<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i> .....	28
<i>ALUNBRIG TAB 180MG</i> .....	19	<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i> .....	28
<i>ALUNBRIG TAB 30MG</i> .....	19	<i>amlodipine besylate-valsartan tab 10-160 mg</i> .....	29
<i>ALUNBRIG TAB 90MG</i> .....	19	<i>amlodipine besylate-valsartan tab 10-320 mg</i> .....	29
<i>alyacen 1/35</i> .....	66	<i>amlodipine besylate-valsartan tab 5-160 mg</i> .....	28
<i>alyq</i> .....	38	<i>amlodipine besylate-valsartan tab 5-320 mg</i> .....	28
<i>amantadine hcl cap 100 mg</i> .....	43	<i>amnesteem cap 10mg</i> .....	98
<i>amantadine hcl soln 50 mg/5ml</i> .....	43	<i>amnesteem cap 20mg</i> .....	98
<i>amantadine hcl tab 100 mg</i> .....	43	<i>amnesteem cap 40mg</i> .....	98
<i>ambrisentan tab 10 mg</i> .....	38	<i>amoxapine tab 100 mg</i> .....	40
<i>ambrisentan tab 5 mg</i> .....	38		
<i>amethia</i> .....	66		
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i> .....	4		
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i> .....	4		
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i> .....	36		
<i>amiloride hcl tab 5 mg</i> .....	36		
<i>aminocaproic acid tab 1000 mg</i> .....	83		
<i>aminocaproic acid tab 500 mg</i> .....	83		
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i> .....	30		

<i>amoxapine tab 150 mg</i> .....	40
<i>amoxapine tab 25 mg</i> .....	40
<i>amoxapine tab 50 mg</i> .....	40
<i>amoxicil cap &amp;clarithro tab &amp;lansopraz cap dr 500 &amp;500 &amp;30mg</i> .....	79
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i> .....	13
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i> .....	13
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i> .....	13
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i> .....	13
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i> .....	13
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i> .....	13
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i> .....	13
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i> .....	13
<i>amoxicillin (trihydrate) cap 250 mg</i> ..13	
<i>amoxicillin (trihydrate) cap 500 mg</i> ..13	
<i>amoxicillin (trihydrate) chew tab 125 mg</i> .....	13
<i>amoxicillin (trihydrate) chew tab 250 mg</i> .....	13
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i> .....	13
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i> .....	13
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i> .....	13
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i> .....	13
<i>amoxicillin (trihydrate) tab 500 mg</i> ..14	
<i>amoxicillin (trihydrate) tab 875 mg</i> ..14	
<i>amphetamine-dextroamphetamine tab 10 mg</i> .....	55
<i>amphetamine-dextroamphetamine tab 12.5 mg</i> .....	55
<i>amphetamine-dextroamphetamine tab 15 mg</i> .....	55
<i>amphetamine-dextroamphetamine tab 20 mg</i> .....	55
<i>amphetamine-dextroamphetamine tab 30 mg</i> .....	55
<i>amphetamine-dextroamphetamine tab 5 mg</i> .....	55
<i>amphetamine-dextroamphetamine tab 7.5 mg</i> .....	55
<i>amphotericin b for iv soln 50 mg</i> .....	6
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i> .....	14
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i> .....	14
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i> .....	14
<i>ampicillin cap 250 mg</i> .....	14
<i>ampicillin cap 500 mg</i> .....	14
<i>ampicillin for susp 250 mg/5ml</i> .....	14
<i>ampicillin sodium for inj 1 gm</i> .....	14
<i>ampicillin sodium for inj 125 mg</i> .....	14
<i>ampicillin sodium for inj 2 gm</i> .....	14
<i>ampicillin sodium for iv soln 10 gm</i> ...14	
<i>anagrelide hcl cap 0.5 mg</i> .....	84
<i>anagrelide hcl cap 1 mg</i> .....	84
<i>anastrozole tab 1 mg</i> .....	17
<i>ANORO ELLIPT AER 62.5-25</i> .....	94
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i> .....	93
<i>aprepitant capsule 125 mg</i> .....	77
<i>aprepitant capsule 40 mg</i> .....	77
<i>aprepitant capsule 80 mg</i> .....	77
<i>aprepitant pak 80 &amp; 125</i> .....	77
<i>apri</i> .....	66
<i>APTIOM TAB 200MG</i> .....	50
<i>APTIOM TAB 400MG</i> .....	50
<i>APTIOM TAB 600MG</i> .....	50
<i>APTIOM TAB 800MG</i> .....	50
<i>APTIVUS CAP 250MG</i> .....	7
<i>ARALAST NP INJ 1000MG</i> .....	95
<i>aranelle</i> .....	66
<i>ARCALYST INJ 220MG</i> .....	86
<i>ARESTIN MIS 1MG</i> .....	102
<i>AREXVY INJ 120MCG</i> .....	88
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i> .....	95
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i> .....	82
<i>ariPIPRAZOLE oral solution 1 mg/ml</i> ....45	

<i>aripiprazole orally disintegrating tab 10 mg</i> .....	45
<i>aripiprazole orally disintegrating tab 15 mg</i> .....	45
<i>aripiprazole tab 10 mg</i> .....	45
<i>aripiprazole tab 15 mg</i> .....	45
<i>aripiprazole tab 2 mg</i> .....	45
<i>aripiprazole tab 20 mg</i> .....	45
<i>aripiprazole tab 30 mg</i> .....	45
<i>aripiprazole tab 5 mg</i> .....	45
ARISTADA INJ 1064MG .....	45
ARISTADA INJ 441MG/1.....	45
ARISTADA INJ 662MG/2.....	45
ARISTADA INJ 882MG/3.....	45
ARISTADA INJ INITIO .....	45
<i>armodafinil tab 150 mg</i> .....	59
<i>armodafinil tab 200 mg</i> .....	59
<i>armodafinil tab 250 mg</i> .....	59
<i>armodafinil tab 50 mg</i> .....	59
ARMOUR THYRO TAB 120MG .....	75
ARMOUR THYRO TAB 15MG .....	75
ARMOUR THYRO TAB 180MG .....	75
ARMOUR THYRO TAB 240MG .....	75
ARMOUR THYRO TAB 300MG .....	75
ARMOUR THYRO TAB 30MG .....	75
ARMOUR THYRO TAB 60MG .....	75
ARMOUR THYRO TAB 90MG .....	75
ARNUITY ELPT INH 100MCG .....	97
ARNUITY ELPT INH 200MCG .....	97
ARNUITY ELPT INH 50MCG .....	97
ARRANON INJ 5MG/ML.....	16
ARZERRA CON 100/5ML.....	19
<i>ascomp/codeine</i> .....	2
<i>asenapine maleate sl tab 10 mg (base equiv)</i> .....	45
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i> .....	45
<i>asenapine maleate sl tab 5 mg (base equiv)</i> .....	45
<i>ashlyna</i> .....	66
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i> .....	84
ASTAGRAF XL CAP 0.5MG.....	87
ASTAGRAF XL CAP 1MG .....	87
ASTAGRAF XL CAP 5MG .....	87
<i>atazanavir sulfate cap 150 mg (base equiv)</i> .....	7
<i>atazanavir sulfate cap 200 mg (base equiv)</i> .....	7
<i>atazanavir sulfate cap 300 mg (base equiv)</i> .....	7
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i> .....	32
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i> .....	32
<i>atenolol tab 100 mg</i> .....	33
<i>atenolol tab 25 mg</i> .....	33
<i>atenolol tab 50 mg</i> .....	33
ATGAM INJ 250MG .....	87
<i>atomoxetine hcl cap 10 mg (base equiv)</i> .....	55
<i>atomoxetine hcl cap 100 mg (base equiv)</i> .....	55
<i>atomoxetine hcl cap 18 mg (base equiv)</i> .....	55
<i>atomoxetine hcl cap 25 mg (base equiv)</i> .....	55
<i>atomoxetine hcl cap 40 mg (base equiv)</i> .....	55
<i>atomoxetine hcl cap 60 mg (base equiv)</i> .....	55
<i>atomoxetine hcl cap 80 mg (base equiv)</i> .....	55
<i>atorvastatin calcium tab 10 mg (base equivalent)</i> .....	31
<i>atorvastatin calcium tab 20 mg (base equivalent)</i> .....	31
<i>atorvastatin calcium tab 40 mg (base equivalent)</i> .....	31
<i>atorvastatin calcium tab 80 mg (base equivalent)</i> .....	31
<i>atovaquone susp 750 mg/5ml</i> .....	4
<i>atovaquone-proguanil hcl tab 250-100 mg</i> .....	7
<i>atropine sulfate ophth soln 1%</i> .....	93
ATROVENT HFA AER 17MCG .....	94
AUBAGIO TAB 14MG.....	58
AUBAGIO TAB 7MG.....	58
<i>aubra eq</i> .....	66
<i>AUGTYRO CAP 40MG</i> .....	19
AURYXIA TAB 210MG.....	74
AUSTEDO TAB 12MG .....	57
AUSTEDO TAB 6MG .....	57
AUSTEDO TAB 9MG .....	57

AUSTEDO XR TAB 12MG.....	57
AUSTEDO XR TAB 18MG.....	57
AUSTEDO XR TAB 24MG.....	57
AUSTEDO XR TAB 30MG ER .....	57
AUSTEDO XR TAB 36MG ER .....	57
AUSTEDO XR TAB 42MG ER .....	57
AUSTEDO XR TAB 48MG ER .....	57
AUSTEDO XR TAB 6MG .....	57
AUSTEDO XR TAB TITR KIT .....	57
AUVELITY TAB 45-105MG .....	40
AVASTIN INJ.....	19
AVASTIN INJ 400/16ML.....	19
aviane .....	66
avita cre 0.025% .....	98
AVONEX PEN KIT 30MCG.....	58
AVONEX PREFL KIT 30MCG.....	58
AYVAKIT TAB 100MG .....	20
AYVAKIT TAB 200MG .....	20
AYVAKIT TAB 25MG .....	20
AYVAKIT TAB 300MG .....	20
AYVAKIT TAB 50MG .....	20
azacitidine for inj 100 mg .....	16
AZASITE SOL 1% .....	91
AZATHIOPRINE INJ 100MG .....	87
azathioprine tab 100 mg .....	87
azathioprine tab 50 mg .....	87
azathioprine tab 75 mg .....	87
azelaic acid gel 15% .....	101
azelastine hcl ophth soln 0.05%.....	92
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act.....	94
azelastine spr 0.1% .....	94
azithromycin for susp 100 mg/5ml ...	12
azithromycin for susp 200 mg/5ml ...	12
azithromycin iv for soln 500 mg .....	12
azithromycin tab 250 mg.....	12
azithromycin tab 500 mg.....	12
azithromycin tab 600 mg.....	12
aztreonam for inj 1 gm .....	4
azurette tab.....	66
<b>B</b>	
baciim.....	4
bacitracin ophth oint 500 unit/gm ....	91
bacitracin-polymyxin b ophth oint....	91
bacitracin-polymyxin-neomycin-hc ophth oint 1%.....	91
baclofen tab 10 mg.....	59

<i>baclofen tab 20 mg .....</i>	59
BAFIERTAM CAP 95MG.....	58
BALCOLTRA TAB 0.1-20 .....	66
<i>balsalazide disodium cap 750 mg .....</i>	78
BALVERSA TAB 3MG .....	20
BALVERSA TAB 4MG .....	20
BALVERSA TAB 5MG .....	20
<i>balziva .....</i>	66
BAQSIMI ONE POW 3MG/DOSE .....	72
BASAGLAR INJ 100UNIT.....	63
BCG VACCINE INJ 50MG .....	88
BD SWAB REG PAD SNGL USE .....	63
BELEODAQ INJ 500MG .....	20
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg .....</i>	27
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg .....</i>	27
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg .....</i>	27
<i>benazepril &amp; hydrochlorothiazide tab 5- 6.25 mg .....</i>	27
benazepril hcl tab 10 mg .....	27
benazepril hcl tab 20 mg .....	27
benazepril hcl tab 40 mg .....	27
benazepril hcl tab 5 mg.....	27
<i>bendamustine hcl for iv soln 100 mg</i>	15
<i>bendamustine hcl for iv soln 25 mg</i>	.15
BENLYSTA INJ 120MG.....	87
BENLYSTA INJ 200MG/ML.....	87
BENLYSTA INJ 400MG.....	87
<i>benzoyl peroxide-erythromycin gel 5- 3%</i>	98
benztropine mesylate inj 1 mg/ml ...	43
benztropine mesylate tab 0.5 mg .....	43
benztropine mesylate tab 1 mg .....	43
benztropine mesylate tab 2 mg .....	43
<i>bepotastine besilate ophth soln 1.5%</i>	92
BESREMI SOL 500MCG .....	18
<i>betaine powder for oral solution .....</i>	72
<i>betamethasone dipropionate augmented cream 0.05% .....</i>	100
<i>betamethasone dipropionate augmented gel 0.05%.....</i>	100
<i>betamethasone dipropionate augmented lotion 0.05% .....</i>	100
<i>betamethasone dipropionate augmented oint 0.05% .....</i>	100

<i>betamethasone dipropionate cream</i>	
<i>0.05%</i> .....	100
<i>betamethasone dipropionate lotion</i>	
<i>0.05%</i> .....	100
<i>betamethasone dipropionate oint</i>	
<i>0.05%</i> .....	100
<i>betamethasone valerate cream 0.1%</i>	
<i>(base equivalent)</i> .....	100
<i>betamethasone valerate lotion 0.1%</i>	
<i>(base equivalent)</i> .....	100
<i>betamethasone valerate oint 0.1%</i>	
<i>(base equivalent)</i> .....	100
BETASERON INJ 0.3MG .....	58
<i>betaxolol hcl ophth soln 0.5%</i> .....	93
<i>betaxolol hcl tab 10 mg</i> .....	33
<i>betaxolol hcl tab 20 mg</i> .....	33
<i>bethanechol chloride tab 10 mg</i> .....	81
<i>bethanechol chloride tab 25 mg</i> .....	81
<i>bethanechol chloride tab 5 mg</i> .....	81
<i>bethanechol chloride tab 50 mg</i> .....	81
BETOPTIC-S SUS 0.25% OP .....	93
BEVESPI AER 9-4.8MCG .....	94
<i>bexarotene cap 75 mg</i> .....	18
<i>bexarotene gel 1%</i> .....	101
BEXZERO INJ.....	88
BEYFORTUS INJ 100MG/ML .....	86
BEYFORTUS INJ 50/0.5ML .....	86
<i>bicalutamide tab 50 mg</i> .....	17
BICILLIN C-R INJ 1200000 .....	14
BICILLIN C-R INJ 900/300.....	14
BICILLIN L-A INJ 1200000.....	14
BICILLIN L-A INJ 2400000.....	14
BICILLIN L-A INJ 600000 .....	14
BICNU INJ 100MG .....	15
BIJUVA CAP 0.5-100.....	69
BIJUVA CAP 1-100MG .....	69
BIKTARVY TAB .....	8
<i>bimatoprost ophth soln 0.03%</i> .....	93
<i>bisoprolol &amp; hydrochlorothiazide tab</i>	
<i>10-6.25 mg</i> .....	33
<i>bisoprolol &amp; hydrochlorothiazide tab</i>	
<i>2.5-6.25 mg</i> .....	32
<i>bisoprolol &amp; hydrochlorothiazide tab 5-</i>	
<i>6.25 mg</i> .....	33
<i>bisoprolol fumarate tab 10 mg</i> .....	33
<i>bisoprolol fumarate tab 5 mg</i> .....	33
BIVIGAM INJ 10% .....	86
<i>bleomycin sulfate for inj 15 unit</i> .....	16
<i>bleomycin sulfate for inj 30 unit</i> .....	16
<i>blisovi 24 fe</i> .....	66
<i>blisovi fe 1.5/30</i> .....	66
BOOSTRIX INJ .....	88
BOSULIF CAP 100MG .....	20
BOSULIF CAP 50MG.....	20
BOSULIF TAB 100MG .....	20
BOSULIF TAB 400MG .....	20
BOSULIF TAB 500MG .....	20
BRAFTOVI CAP 75MG.....	20
BREO ELLIPTA INH 100-25 .....	97
BREO ELLIPTA INH 200-25 .....	97
BREO ELLIPTA INH 50-25MCG .....	97
BREZTRI AERO AER SPHERE.....	94
<i>briellyn</i> .....	66
BRILINTA TAB 60MG.....	84
BRILINTA TAB 90MG.....	84
<i>brimonidine tartrate ophth soln 0.15%</i>	
.....	93
<i>brimonidine tartrate ophth soln 0.2%</i> .....	93
<i>brimonidine tartrate-timolol maleate</i>	
<i>ophth soln 0.2-0.5%</i> .....	93
<i>brinzolamide ophth susp 1%</i> .....	93
BRIVIACT INJ 50MG/5ML .....	50
BRIVIACT SOL 10MG/ML .....	50
BRIVIACT TAB 100MG.....	50
BRIVIACT TAB 10MG .....	50
BRIVIACT TAB 25MG .....	50
BRIVIACT TAB 50MG .....	50
BRIVIACT TAB 75MG .....	50
<i>bromfenac sodium ophth soln 0.07%</i>	
<i>(base equivalent)</i> .....	92
<i>bromfenac sodium ophth soln 0.09%</i>	
<i>(base equiv) (once-daily)</i> .....	92
<i>bromocriptine mesylate tab 2.5 mg</i>	
<i>(base equivalent)</i> .....	43
BRONCHITOL CAP 40MG .....	96
BRUKINSA CAP 80MG .....	20
<i>budesonide delayed release particles</i>	
<i>cap 3 mg</i> .....	78
<i>budesonide inhalation susp 0.25</i>	
<i>mg/2ml</i> .....	97
<i>budesonide inhalation susp 0.5 mg/2ml</i>	
.....	97
<i>budesonide inhalation susp 1 mg/2ml</i>	
.....	97

<i>budesonide tab er 24hr 9 mg</i>	78
<i>bumetanide tab 0.5 mg</i>	36
<i>bumetanide tab 1 mg</i>	36
<i>bumetanide tab 2 mg</i>	36
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	2
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	60
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	60
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	60
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	60
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	60
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	60
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	60
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	60
<i>buprenorphine td patch weekly 10 mcg/hr</i>	2
<i>buprenorphine td patch weekly 15 mcg/hr</i>	2
<i>buprenorphine td patch weekly 20 mcg/hr</i>	2
<i>buprenorphine td patch weekly 5 mcg/hr</i>	2
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	2
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	60
<i>bupropion hcl tab 100 mg</i>	40
<i>bupropion hcl tab 75 mg</i>	40
<i>bupropion hcl tab er 12hr 100 mg</i>	40
<i>bupropion hcl tab er 12hr 150 mg</i>	40
<i>bupropion hcl tab er 12hr 200 mg</i>	40
<i>bupropion hcl tab er 24hr 150 mg</i>	40
<i>bupropion hcl tab er 24hr 300 mg</i>	40
<i>buspirone hcl tab 10 mg</i>	39
<i>buspirone hcl tab 15 mg</i>	39
<i>buspirone hcl tab 30 mg</i>	39
<i>buspirone hcl tab 5 mg</i>	39
<i>buspirone hcl tab 7.5 mg</i>	39
<i>busulfan inj 6 mg/ml</i>	15
<i>butalbital-acetaminophen tab 50-325 mg</i>	1
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	2
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	2
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1
<i>butorphanol tartrate inj 1 mg/ml</i>	2
<i>butorphanol tartrate inj 2 mg/ml</i>	2
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	2
BYDUREON BC INJ 2/0.85ML	61
BYETTA INJ 10MCG	61
BYETTA INJ 5MCG	61
<b>C</b>	
<i>cabergoline tab 0.5 mg</i>	72
CABLIVI KIT 11MG	84
CABOMETYX TAB 20MG	20
CABOMETYX TAB 40MG	20
CABOMETYX TAB 60MG	20
<i>calcipotriene cream 0.005%</i>	99
<i>calcipotriene oint 0.005%</i>	99
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	99
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	100
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	100
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	65
<i>calcitriol cap 0.25 mcg</i>	77
<i>calcitriol cap 0.5 mcg</i>	77
<i>calcitriol inj 1 mcg/ml</i>	77
<i>calcitriol oint 3 mcg/gm</i>	99
<i>calcitriol oral soln 1 mcg/ml</i>	77
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	74
<i>calcium acetate (phosphate binder) tab 667 mg</i>	74
CALQUENCE CAP 100MG	20

CALQUENCE TAB 100MG .....	20
camila.....	66
camrese lo .....	66
candesartan cilexetil tab 16 mg.....	30
candesartan cilexetil tab 32 mg.....	30
candesartan cilexetil tab 4 mg .....	30
candesartan cilexetil tab 8 mg .....	30
candesartan cilexetil- hydrochlorothiazide tab 16-12.5 mg .....	29
candesartan cilexetil- hydrochlorothiazide tab 32-12.5 mg .....	29
candesartan cilexetil- hydrochlorothiazide tab 32-25 mg .	29
CAPASTAT SUL INJ 1GM .....	9
CAPLYTA CAP 10.5MG .....	45
CAPLYTA CAP 21MG.....	45
CAPLYTA CAP 42MG.....	45
CAPRELSA TAB 100MG .....	20
CAPRELSA TAB 300MG .....	20
captopril tab 100 mg .....	27
captopril tab 12.5 mg .....	27
captopril tab 25 mg .....	27
captopril tab 50 mg .....	27
carbamazepine cap er 12hr 100 mg..	50
carbamazepine cap er 12hr 200 mg..	50
carbamazepine cap er 12hr 300 mg..	50
carbamazepine chew tab 100 mg .....	50
carbamazepine susp 100 mg/5ml .....	50
carbamazepine tab 200 mg .....	50
carbamazepine tab er 12hr 100 mg ..	50
carbamazepine tab er 12hr 200 mg ..	50
carbamazepine tab er 12hr 400 mg ..	50
carbidopa & levodopa orally disintegrating tab 10-100 mg .....	43
carbidopa & levodopa orally disintegrating tab 25-100 mg .....	43
carbidopa & levodopa orally disintegrating tab 25-250 mg .....	44
carbidopa & levodopa tab 10-100 mg	44
carbidopa & levodopa tab 25-100 mg	44
carbidopa & levodopa tab 25-250 mg	44
carbidopa & levodopa tab er 25-100 mg .....	44
carbidopa & levodopa tab er 50-200 mg .....	44
carbidopa tab 25 mg.....	44
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg .....	44
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg .....	44
carbidopa-levodopa-entacapone tabs 25-100-200 mg .....	44
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg .....	44
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg .....	44
carbidopa-levodopa-entacapone tabs 50-200-200 mg .....	44
carboplatin iv soln 150 mg/15ml .....	15
carboplatin iv soln 450 mg/45ml .....	15
carboplatin iv soln 50 mg/5ml.....	15
carboplatin iv soln 600 mg/60ml .....	15
carglumic acid soluble tab 200 mg....	72
carteolol hcl ophth soln 1% .....	93
cartia xt .....	34
carvedilol phosphate cap er 24hr 10 mg .....	33
carvedilol phosphate cap er 24hr 20 mg .....	33
carvedilol phosphate cap er 24hr 40 mg .....	33
carvedilol phosphate cap er 24hr 80 mg .....	33
carvedilol tab 12.5 mg .....	33
carvedilol tab 25 mg .....	33
carvedilol tab 3.125 mg .....	33
carvedilol tab 6.25 mg .....	33
CAYSTON INH 75MG.....	4
cefaclor cap 250 mg .....	11
cefaclor cap 500 mg .....	11
cefadroxil cap 500 mg.....	11
cefadroxil for susp 250 mg/5ml.....	11
cefadroxil for susp 500 mg/5ml.....	11
cefadroxil tab 1 gm .....	11
cefazin sodium for inj 1 gm .....	11
cefazin sodium for inj 10 gm .....	11
cefazin sodium for inj 500 mg .....	11
cefdinir cap 300 mg .....	11
cefdinir for susp 125 mg/5ml.....	11
cefdinir for susp 250 mg/5ml .....	11
cefepime hcl for inj 1 gm.....	11
cefepime hcl for iv soln 2 gm .....	11

<i>cefixime cap 400 mg</i> .....	11
<i>cefixime for susp 100 mg/5ml</i> .....	11
<i>cefixime for susp 200 mg/5ml</i> .....	11
<i>cefotetan disodium for inj 1 gm</i> .....	11
<i>cefotetan disodium for inj 2 gm</i> .....	11
<i>cefoxitin sodium for iv soln 1 gm</i> .....	11
<i>cefoxitin sodium for iv soln 10 gm</i> .....	11
<i>cefoxitin sodium for iv soln 2 gm</i> .....	11
<i>cefpodoxime proxetil for susp 100 mg/5ml</i> .....	11
<i>cefpodoxime proxetil for susp 50 mg/5ml</i> .....	11
<i>cefpodoxime proxetil tab 100 mg</i> .....	11
<i>cefpodoxime proxetil tab 200 mg</i> .....	11
<i>cefprozil for susp 125 mg/5ml</i> .....	11
<i>cefprozil for susp 250 mg/5ml</i> .....	11
<i>cefprozil tab 250 mg</i> .....	11
<i>cefprozil tab 500 mg</i> .....	12
<i>ceftazidime for inj 1 gm</i> .....	12
<i>ceftazidime for inj 6 gm</i> .....	12
<i>ceftazidime for iv soln 2 gm</i> .....	12
<i>ceftriaxone sodium for inj 1 gm</i> .....	12
<i>ceftriaxone sodium for inj 10 gm</i> .....	12
<i>ceftriaxone sodium for inj 2 gm</i> .....	12
<i>ceftriaxone sodium for inj 250 mg</i> .....	12
<i>ceftriaxone sodium for inj 500 mg</i> .....	12
<i>cefuroxime axetil tab 250 mg</i> .....	12
<i>cefuroxime axetil tab 500 mg</i> .....	12
<i>cefuroxime sodium for inj 750 mg</i> ....	12
<i>cefuroxime sodium for iv soln 1.5 gm</i> .....	12
<i>celecoxib cap 100 mg</i> .....	1
<i>celecoxib cap 200 mg</i> .....	1
<i>celecoxib cap 400 mg</i> .....	1
<i>celecoxib cap 50 mg</i> .....	1
<i>CELONTIN CAP 300MG</i> .....	50
<i>cephalexin cap 250 mg</i> .....	12
<i>cephalexin cap 500 mg</i> .....	12
<i>cephalexin for susp 125 mg/5ml</i> .....	12
<i>cephalexin for susp 250 mg/5ml</i> .....	12
<i>cevimeline hcl cap 30 mg</i> .....	102
<i>CHEMET CAP 100MG</i> .....	65
<i>chlordiazepoxide hcl cap 10 mg</i> .....	39
<i>chlordiazepoxide hcl cap 25 mg</i> .....	39
<i>chlordiazepoxide hcl cap 5 mg</i> .....	39
<i>chlorhexidine gluconate soln 0.12%</i>	103
<i>chloroquine phosphate tab 250 mg</i> ....	7
<i>chloroquine phosphate tab 500 mg</i> ....	7
<i>chlorpromazine hcl inj 50 mg/2ml</i> ....	45
<i>chlorpromazine hcl tab 10 mg</i> .....	45
<i>chlorpromazine hcl tab 100 mg</i> .....	45
<i>chlorpromazine hcl tab 200 mg</i> .....	45
<i>chlorpromazine hcl tab 25 mg</i> .....	45
<i>chlorpromazine hcl tab 50 mg</i> .....	45
<i>chlorthalidone tab 25 mg</i> .....	36
<i>chlorthalidone tab 50 mg</i> .....	36
<i>cholestyramine light powder 4 gm/dose</i> .....	32
<i>cholestyramine powder packets 4 gm</i> 32	
<i>ciclopirox gel 0.77%</i> .....	99
<i>ciclopirox olamine cream 0.77% (base equiv)</i> .....	99
<i>ciclopirox olamine susp 0.77% (base equiv)</i> .....	99
<i>ciclopirox shampoo 1%</i> .....	99
<i>ciclopirox solution 8%</i> .....	99
<i>cidofovir iv inj 75 mg/ml</i> .....	10
<i>cilostazol tab 100 mg</i> .....	84
<i>cilostazol tab 50 mg</i> .....	84
<i>CILOXAN OIN 0.3% OP</i> .....	91
<i>CIMDUO TAB 300-300</i> .....	8
<i>cinacalcet hcl tab 30 mg (base equiv)</i> .....	72
<i>cinacalcet hcl tab 60 mg (base equiv)</i> .....	72
<i>cinacalcet hcl tab 90 mg (base equiv)</i> .....	72
<i>CINRYZE SOL 500 UNIT</i> .....	84
<i>ciprofloxacin 200 mg/100ml in d5w</i> ..13	
<i>ciprofloxacin 400 mg/200ml in d5w</i> ..13	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i> .....	91
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i> .....	94
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i> .....	13
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i> .....	13
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i> .....	13
<i>ciprofloxacin iv soln 400 mg/40ml (1%)</i> .....	13
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i> .....	94

<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	15
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	15
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	40
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	40
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	40
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	40
<i>claravis cap 10mg</i>	98
<i>claravis cap 20mg</i>	98
<i>claravis cap 30mg</i>	98
<i>claravis cap 40mg</i>	98
<i>clarithromycin for susp 125 mg/5ml</i>	12
<i>clarithromycin for susp 250 mg/5ml</i>	12
<i>clarithromycin tab 250 mg</i>	12
<i>clarithromycin tab 500 mg</i>	12
<i>clarithromycin tab er 24hr 500 mg</i>	12
<i>CLEOCIN SUP 100MG</i>	81
<i>clindacin mis etz 1%</i>	98
<i>clindamycin hcl cap 150 mg</i>	4
<i>clindamycin hcl cap 300 mg</i>	4
<i>clindamycin hcl cap 75 mg</i>	4
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	4
<i>clindamycin phosphate gel 1%</i>	98
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	4
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	4
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	4
<i>clindamycin phosphate inj 900 mg/6ml</i>	4
<i>clindamycin phosphate lotion 1%</i>	98
<i>clindamycin phosphate soln 1%</i>	98
<i>clindamycin phosphate swab 1%</i>	98
<i>clindamycin phosphate vaginal cream 2%</i>	82
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	98
<i>clobazam suspension 2.5 mg/ml</i>	50
<i>clobazam tab 10 mg</i>	50
<i>clobazam tab 20 mg</i>	50
<i>clobetasol propionate cream 0.05%</i>	100
<i>clobetasol propionate e</i>	100
<i>clobetasol propionate emulsion foam 0.05%</i>	100
<i>clobetasol propionate foam 0.05%</i>	100
<i>clobetasol propionate gel 0.05%</i>	100
<i>clobetasol propionate lotion 0.05%</i>	100
<i>clobetasol propionate oint 0.05%</i>	100
<i>clobetasol propionate shampoo 0.05%</i>	100
<i>clobetasol propionate soln 0.05%</i>	100
<i>clobetasol propionate spray 0.05%</i>	100
<i>cloccortolone pivalate cream 0.1%</i>	100
<i>clodan sha 0.05%</i>	100
<i>clofarabine iv soln 1 mg/ml</i>	16
<i>clomipramine hcl cap 25 mg</i>	40
<i>clomipramine hcl cap 50 mg</i>	41
<i>clonazepam orally disintegrating tab 0.125 mg</i>	50
<i>clonazepam orally disintegrating tab 0.25 mg</i>	50
<i>clonazepam orally disintegrating tab 0.5 mg</i>	50
<i>clonazepam orally disintegrating tab 1 mg</i>	50
<i>clonazepam orally disintegrating tab 2 mg</i>	50
<i>clonazepam tab 0.5 mg</i>	50
<i>clonazepam tab 1 mg</i>	50
<i>clonazepam tab 2 mg</i>	50
<i>clonidine hcl tab 0.1 mg</i>	36
<i>clonidine hcl tab 0.2 mg</i>	36
<i>clonidine hcl tab 0.3 mg</i>	36
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	84
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	84
<i>clorazepate dipotassium tab 15 mg</i>	.50
<i>clorazepate dipotassium tab 3.75 mg</i>	.50
<i>clorazepate dipotassium tab 7.5 mg</i>	.50
<i>clotrimazole cream 1%</i>	99
<i>clotrimazole soln 1%</i>	99
<i>clotrimazole troche 10 mg</i>	103
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	99
<i>clozapine orally disintegrating tab 100 mg</i>	46

<i>clozapine orally disintegrating tab 12.5</i>	15
<i>mg</i> .....	45
<i>clozapine orally disintegrating tab 150</i>	15
<i>mg</i> .....	46
<i>clozapine orally disintegrating tab 200</i>	15
<i>mg</i> .....	46
<i>clozapine orally disintegrating tab 25</i>	15
<i>mg</i> .....	46
<i>clozapine tab 100 mg</i> .....	46
<i>clozapine tab 200 mg</i> .....	46
<i>clozapine tab 25 mg</i> .....	46
<i>clozapine tab 50 mg</i> .....	46
<i>COARTEM TAB 20-120MG</i> .....	7
<i>colchicine tab 0.6 mg</i> .....	1
<i>colchicine w/ probenecid tab 0.5-500</i>	
<i>mg</i> .....	1
<i>colesevelam hcl tab 625 mg</i> .....	32
<i>colestipol hcl granule packets 5 gm</i> ..	32
<i>colestipol hcl tab 1 gm</i> .....	32
<i>colistimethate sod for inj 150 mg</i>	
( <i>colistin base activity</i> ) .....	4
<i>COMBIVENT AER 20-100</i> .....	94
<i>COMETRIQ (60MG DOSE)</i> .....	20
<i>COMETRIQ KIT 100MG</i> .....	20
<i>COMETRIQ KIT 140MG</i> .....	20
<i>COMPLERA TAB</i> .....	9
<i>compro</i> .....	77
<i>constulose</i> .....	79
<i>COPIKTRA CAP 15MG</i> .....	20
<i>COPIKTRA CAP 25MG</i> .....	20
<i>CORLANOR TAB 5MG</i> .....	36
<i>CORLANOR TAB 7.5MG</i> .....	36
<i>CORTROPHIN GEL 80UNIT</i> .....	72
<i>COTELLIC TAB 20MG</i> .....	20
<i>CREON CAP 12000UNT</i> .....	80
<i>CREON CAP 24000UNT</i> .....	80
<i>CREON CAP 3000UNIT</i> .....	80
<i>CREON CAP 36000UNT</i> .....	80
<i>CREON CAP 6000UNIT</i> .....	80
<i>cromolyn sodium ophth soln 4%</i> .....	92
<i>cromolyn sodium oral conc 100 mg/5ml</i>	
.....	79
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	
.....	96
<i>cryselle-28</i> .....	66
<i>cyclobenzaprine hcl tab 10 mg</i> .....	59
<i>cyclobenzaprine hcl tab 5 mg</i> .....	59
<i>CYCLOPHOSPH TAB 25MG</i> .....	15
<i>CYCLOPHOSPH TAB 50MG</i> .....	15
<i>cyclophosphamide cap 25 mg</i> .....	15
<i>cyclophosphamide cap 50 mg</i> .....	15
<i>cyclosporine (ophth) emulsion 0.05%</i>	
.....	93
<i>cyclosporine cap 100 mg</i> .....	87
<i>cyclosporine cap 25 mg</i> .....	87
<i>cyclosporine iv soln 50 mg/ml</i> .....	87
<i>cyclosporine modified cap 100 mg</i> .....	87
<i>cyclosporine modified cap 25 mg</i> .....	87
<i>cyclosporine modified cap 50 mg</i> .....	87
<i>cyclosporine modified oral soln 100</i>	
<i>mg/ml</i> .....	87
<i>cyproheptadine hcl tab 4 mg</i> .....	94
<i>CYRAMZA INJ 100/10ML</i> .....	20
<i>CYRAMZA INJ 500/50ML</i> .....	20
<i>cyred eq tab</i> .....	66
<i>CYSTADROPS SOL 0.37%</i> .....	93
<i>CYSTAGON CAP 150MG</i> .....	72
<i>CYSTAGON CAP 50MG</i> .....	72
<i>CYSTARAN SOL 0.44%</i> .....	93
<i>cytarabine inj 20 mg/ml</i> .....	16
<i>cytarabine inj pf 100 mg/ml</i> .....	16
<i>cytarabine inj pf 20 mg/ml</i> .....	16
<b>D</b>	
<i>D10W/NACL INJ 0.2%</i> .....	89
<i>dabigatran etexilate mesylate cap 110</i>	
<i>mg (etexilate base eq)</i> .....	82
<i>dabigatran etexilate mesylate cap 150</i>	
<i>mg (etexilate base eq)</i> .....	82
<i>dabigatran etexilate mesylate cap 75</i>	
<i>mg (etexilate base eq)</i> .....	82
<i>dacarbazine for inj 100 mg</i> .....	18
<i>dacarbazine for inj 200 mg</i> .....	18
<i>dalfampridine tab er 12hr 10 mg</i> .....	58
<i>DALIRESP TAB 250MCG</i> .....	96
<i>DALIRESP TAB 500MCG</i> .....	96
<i>danazol cap 100 mg</i> .....	69
<i>danazol cap 200 mg</i> .....	69
<i>danazol cap 50 mg</i> .....	69
<i>dapsone tab 100 mg</i> .....	4
<i>dapsone tab 25 mg</i> .....	4
<i>DAPTACEL INJ</i> .....	88
<i>daptomycin for iv soln 500 mg</i> .....	4
<i>darifenacin hydrobromide tab er 24hr</i>	
<i>15 mg (base equiv)</i> .....	81

<i>darifenacin hydrobromide tab er 24hr</i>	
7.5 mg (base equiv) .....	81
<i>darunavir tab 600 mg</i> .....	7
<i>darunavir tab 800 mg</i> .....	7
<i>DARZALEX SOL 100MG/5M</i> .....	20
<i>DARZALEX SOL 400MG/20</i> .....	20
<i>dasatinib tab 100 mg</i> .....	20
<i>dasatinib tab 140 mg</i> .....	20
<i>dasatinib tab 20 mg</i> .....	20
<i>dasatinib tab 50 mg</i> .....	20
<i>dasatinib tab 70 mg</i> .....	20
<i>dasatinib tab 80 mg</i> .....	20
<i>daunorubicin hcl iv soln 20 mg/4ml</i> (base equiv) .....	16
<i>DAURISMO TAB 100MG</i> .....	20
<i>DAURISMO TAB 25MG</i> .....	20
<i>deblitane</i> .....	66
<i>decitabine for inj 50 mg</i> .....	16
<i>deferasirox granules packet 180 mg</i> .....	65
<i>deferasirox granules packet 360 mg</i> .....	65
<i>deferasirox granules packet 90 mg</i> .....	65
<i>deferasirox tab 180 mg</i> .....	65
<i>deferasirox tab 360 mg</i> .....	65
<i>deferasirox tab 90 mg</i> .....	65
<i>deferasirox tab for oral susp 125 mg</i> .....	65
<i>deferasirox tab for oral susp 250 mg</i> .....	65
<i>deferasirox tab for oral susp 500 mg</i> .....	65
<i>deferiprone tab 1000 mg</i> .....	65
<i>deferiprone tab 500 mg</i> .....	65
<i>DELSTRIGO TAB</i> .....	9
<i>delyla</i> .....	66
<i>DEPEN TITRA TAB 250MG</i> .....	65
<i>DEPO-MEDROL INJ 20MG/ML</i> .....	71
<i>DEPO-MEDROL INJ 40MG/ML</i> .....	71
<i>DEPO-MEDROL INJ 80MG/ML</i> .....	71
<i>DEPO-SQ PROV INJ 104</i> .....	66
<i>depo-testost inj 100mg/ml</i> .....	60
<i>depo-testost inj 200mg/ml</i> .....	60
<i>DESCOVI TAB 120-15MG</i> .....	9
<i>DESCOVI TAB 200/25MG</i> .....	9
<i>desipramine hcl tab 10 mg</i> .....	41
<i>desipramine hcl tab 100 mg</i> .....	41
<i>desipramine hcl tab 150 mg</i> .....	41
<i>desipramine hcl tab 25 mg</i> .....	41
<i>desipramine hcl tab 50 mg</i> .....	41
<i>desipramine hcl tab 75 mg</i> .....	41
<i>desloratadine tab 5 mg</i> .....	94

<i>desmopressin acetate nasal spray soln</i>	
0.01% (refrigerated) .....	72
<i>desmopressin acetate tab 0.1 mg</i> .....	72
<i>desmopressin acetate tab 0.2 mg</i> .....	72
<i>desogest-eth estrad &amp; eth estrad tab</i>	
0.15-0.02/0.01 mg(21/5) .....	66
<i>desogestrel &amp; ethinyl estradiol tab 0.15</i> mg-30 mcg .....	66
<i>desonide cream 0.05%</i> .....	100
<i>desonide lotion 0.05%</i> .....	100
<i>desonide oint 0.05%</i> .....	100
<i>desvenlafaxine succinate tab er 24hr</i>	
100 mg (base equiv) .....	41
<i>desvenlafaxine succinate tab er 24hr</i>	
25 mg (base equiv) .....	41
<i>desvenlafaxine succinate tab er 24hr</i>	
50 mg (base equiv) .....	41
<i>dexamethasone sodium phosphate inj</i>	
10 mg/ml .....	71
<i>dexamethasone sodium phosphate inj</i>	
120 mg/30ml .....	71
<i>dexamethasone sodium phosphate</i>	
ophth soln 0.1% .....	92
<i>dexamethasone soln 0.5 mg/5ml</i> .....	71
<i>dexamethasone tab 0.5 mg</i> .....	71
<i>dexamethasone tab 0.75 mg</i> .....	71
<i>dexamethasone tab 1 mg</i> .....	71
<i>dexamethasone tab 1.5 mg</i> .....	71
<i>dexamethasone tab 2 mg</i> .....	71
<i>dexamethasone tab 4 mg</i> .....	71
<i>dexamethasone tab 6 mg</i> .....	71
<i>dexlansoprazole cap delayed release</i>	
30 mg .....	80
<i>dexlansoprazole cap delayed release</i>	
60 mg .....	80
<i>dexamethylphenidate hcl tab 10 mg</i> .....	55
<i>dexamethylphenidate hcl tab 2.5 mg</i> .....	55
<i>dexamethylphenidate hcl tab 5 mg</i> .....	55
<i>dexrazoxane hcl for inj 250 mg (base</i> <i>equivalent)</i> .....	26
<i>dextroamphetamine sulfate oral</i>	
solution 5 mg/5ml .....	55
<i>dextroamphetamine sulfate tab 10 mg</i> .....	55
<i>dextroamphetamine sulfate tab 5 mg</i> .....	55
<i>dextrose 10% w/ sodium chloride</i>	
0.45% .....	89

DEXTROSE 2.5% W/ SODIUM	
CHLORIDE 0.45%.....	89
<i>dextrose 5% in lactated ringers.....</i>	89
<i>dextrose 5% w/ sodium chloride 0.2%</i>	
.....	89
<i>dextrose 5% w/ sodium chloride 0.45%</i>	
.....	89
<i>dextrose 5% w/ sodium chloride 0.9%</i>	
.....	89
<i>dextrose inj 10%.....</i>	91
<i>dextrose inj 5% .....</i>	91
DIACOMIT CAP 250MG .....	50
DIACOMIT CAP 500MG .....	50
DIACOMIT PAK 250MG .....	50
DIACOMIT PAK 500MG .....	50
<i>diazepam inj 5 mg/ml .....</i>	50
<i>diazepam intensol .....</i>	50
<i>diazepam oral soln 1 mg/ml .....</i>	50
<i>diazepam rectal gel delivery system 10</i>	
<i>mg .....</i>	51
<i>diazepam rectal gel delivery system 2.5</i>	
<i>mg .....</i>	50
<i>diazepam rectal gel delivery system 20</i>	
<i>mg .....</i>	51
<i>diazepam tab 10 mg .....</i>	51
<i>diazepam tab 2 mg.....</i>	51
<i>diazepam tab 5 mg.....</i>	51
<i>diazoxide susp 50 mg/ml.....</i>	72
<i>diclofenac sodium gel 1% (1.16%</i>	
<i>diethylamine equiv) .....</i>	101
<i>diclofenac sodium ophth soln 0.1%...92</i>	
<i>diclofenac sodium soln 1.5%.....102</i>	
<i>diclofenac sodium tab delayed release</i>	
<i>50 mg .....</i>	1
<i>diclofenac sodium tab delayed release</i>	
<i>75 mg .....</i>	1
<i>diclofenac sodium tab er 24hr 100 mg 1</i>	
<i>dicloxacillin sodium cap 250 mg .....</i>	14
<i>dicloxacillin sodium cap 500 mg .....</i>	14
<i>dicyclomine hcl cap 10 mg.....</i>	78
<i>dicyclomine hcl oral soln 10 mg/5ml .78</i>	
<i>dicyclomine hcl tab 20 mg .....</i>	78
DIFICID SUS .....	12
DIFICID TAB 200MG .....	12
<i>difluprednate ophth emulsion 0.05% 92</i>	
<i>digoxin inj 0.25 mg/ml.....</i>	37
<i>digoxin oral soln 0.05 mg/ml .....</i>	37

<i>digoxin tab 125 mcg (0.125 mg) .....</i>	37
<i>digoxin tab 250 mcg (0.25 mg).....</i>	37
<i>dihydroergotamine mesylate inj 1</i>	
<i>mg/ml.....</i>	56
<i>dihydroergotamine mesylate nasal</i>	
<i>spray 4 mg/ml .....</i>	56
DILANTIN CAP 100MG .....	51
DILANTIN CAP 30MG .....	51
DILANTIN CHW 50MG .....	51
DILANTIN-125 SUS 125/5ML .....	51
<i>diltiazem hcl cap er 12hr 120 mg .....</i>	34
<i>diltiazem hcl cap er 12hr 60 mg .....</i>	34
<i>diltiazem hcl cap er 12hr 90 mg .....</i>	34
<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>120 mg .....</i>	34
<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>180 mg .....</i>	34
<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>240 mg .....</i>	34
<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>300 mg .....</i>	34
<i>diltiazem hcl coated beads cap er 24hr</i>	
<i>360 mg .....</i>	34
<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 360 mg .....</i>	34
<i>diltiazem hcl extended release beads</i>	
<i>cap er 24hr 420 mg .....</i>	34
<i>diltiazem hcl iv soln 50 mg/10ml (5</i>	
<i>mg/ml) .....</i>	34
<i>diltiazem hcl tab 120 mg .....</i>	34
<i>diltiazem hcl tab 30 mg.....</i>	34
<i>diltiazem hcl tab 60 mg.....</i>	34
<i>diltiazem hcl tab 90 mg.....</i>	34
<i>diltiazem hcl tab er 24hr 120 mg.....</i>	34
<i>diltiazem hcl tab er 24hr 180 mg.....</i>	34
<i>diltiazem hcl tab er 24hr 240 mg.....</i>	34
<i>diltiazem hcl tab er 24hr 300 mg.....</i>	34
<i>diltiazem hcl tab er 24hr 360 mg.....</i>	35
<i>diltiazem hcl tab er 24hr 420 mg.....</i>	35
<i>dilt-xr .....</i>	34
<i>dimethyl fumarate capsule delayed</i>	
<i>release 120 mg .....</i>	58
<i>dimethyl fumarate capsule delayed</i>	
<i>release 240 mg .....</i>	58
<i>dimethyl fumarate capsule dr starter</i>	
<i>pack 120 mg &amp; 240 mg .....</i>	58
DIP/TET PED INJ 25-5LFU .....	88

<i>diphenhydramine hcl inj 50 mg/ml</i> ...	94
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i> .....	79
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i> .....	79
<i>disopyramide phosphate cap 100 mg</i> 30	
<i>disopyramide phosphate cap 150 mg</i> 30	
<i>disulfiram tab 250 mg</i> .....	60
<i>disulfiram tab 500 mg</i> .....	60
<i>divalproex sodium cap delayed release sprinkle 125 mg</i> .....	51
<i>divalproex sodium tab delayed release 125 mg</i> .....	51
<i>divalproex sodium tab delayed release 250 mg</i> .....	51
<i>divalproex sodium tab delayed release 500 mg</i> .....	51
<i>divalproex sodium tab er 24 hr 250 mg</i> .....	51
<i>divalproex sodium tab er 24 hr 500 mg</i> .....	51
<i>DOCETAXEL INJ 160/16ML</i> .....	19
<i>DOCETAXEL INJ 80MG/4ML</i> .....	19
<i>dofetilide cap 125 mcg (0.125 mg)</i> ...	30
<i>dofetilide cap 250 mcg (0.25 mg)</i> ....	30
<i>dofetilide cap 500 mcg (0.5 mg)</i> .....	30
<i>DOJOLVI LIQ 100%</i> .....	72
<i>dolishale</i> .....	66
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i> .....	39
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i> .....	39
<i>donepezil hydrochloride tab 10 mg</i> ...	39
<i>donepezil hydrochloride tab 23 mg</i> ...	39
<i>donepezil hydrochloride tab 5 mg</i> ....	39
<i>DORIBAX INJ 250MG</i> .....	4
<i>dorzolamide hcl ophth soln 2%</i> .....	93
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i> .....	93
<i>dotti</i> .....	69
<i>DOVATO TAB 50-300MG</i> .....	9
<i>doxazosin mesylate tab 1 mg</i> .....	28
<i>doxazosin mesylate tab 2 mg</i> .....	28
<i>doxazosin mesylate tab 4 mg</i> .....	28
<i>doxazosin mesylate tab 8 mg</i> .....	28
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i> .....	56
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i> .....	56
<i>doxepin hcl cap 10 mg</i> .....	41
<i>doxepin hcl cap 100 mg</i> .....	41
<i>doxepin hcl cap 150 mg</i> .....	41
<i>doxepin hcl cap 25 mg</i> .....	41
<i>doxepin hcl cap 50 mg</i> .....	41
<i>doxepin hcl cap 75 mg</i> .....	41
<i>doxepin hcl conc 10 mg/ml</i> .....	41
<i>doxercalciferol cap 0.5 mcg</i> .....	77
<i>doxercalciferol cap 1 mcg</i> .....	77
<i>doxercalciferol cap 2.5 mcg</i> .....	77
<i>doxorubicin hcl inj 2 mg/ml</i> .....	16
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i> .....	16
<i>doxy 100</i> .....	15
<i>doxycycline hyclate cap 100 mg</i> .....	15
<i>doxycycline hyclate cap 50 mg</i> .....	15
<i>doxycycline hyclate tab 100 mg</i> .....	15
<i>doxycycline hyclate tab 20 mg</i> .....	15
<i>doxycycline monohydrate cap 100 mg</i> .....	15
<i>doxycycline monohydrate cap 50 mg</i> 15	
<i>doxycycline monohydrate cap 75 mg</i> 15	
<i>doxycycline monohydrate for susp 25 mg/5ml</i> .....	15
<i>doxycycline monohydrate tab 100 mg</i> .....	15
<i>doxycycline monohydrate tab 150 mg</i> .....	15
<i>doxycycline monohydrate tab 50 mg</i> 15	
<i>doxycycline monohydrate tab 75 mg</i> 15	
<i>DRIZALMA CAP 20MG DR</i> .....	41
<i>DRIZALMA CAP 30MG DR</i> .....	41
<i>DRIZALMA CAP 40MG DR</i> .....	41
<i>DRIZALMA CAP 60MG DR</i> .....	41
<i>dronabinol cap 10 mg</i> .....	77
<i>dronabinol cap 2.5 mg</i> .....	77
<i>dronabinol cap 5 mg</i> .....	77
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> .....	66
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> .....	66
<i>DROXIA CAP 200MG</i> .....	84
<i>DROXIA CAP 300MG</i> .....	84
<i>DROXIA CAP 400MG</i> .....	84
<i>droxidopa cap 100 mg</i> .....	37

<i>droxidopa cap 200 mg</i>	37	<i>eluryng mis</i>	66
<i>droxidopa cap 300 mg</i>	37	EMCYT CAP 140MG	17
DULERA AER 100-5MCG	97	EMGALITY INJ 100MG/ML	56
DULERA AER 200-5MCG	97	EMGALITY INJ 120MG/ML	56
DULERA AER 50-5MCG	97	EMPLICITI INJ 300MG	20
<i>duloxetine hcl enteric coated pellets</i>		EMPLICITI INJ 400MG	21
<i>cap 20 mg (base eq)</i>	41	EMSAM DIS 12MG/24H	41
<i>duloxetine hcl enteric coated pellets</i>		EMSAM DIS 6MG/24HR	41
<i>cap 30 mg (base eq)</i>	41	EMSAM DIS 9MG/24HR	41
<i>duloxetine hcl enteric coated pellets</i>		<i>emtricitabine caps 200 mg</i>	7
<i>cap 40 mg (base eq)</i>	41	<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	9
<i>duloxetine hcl enteric coated pellets</i>		<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	9
<i>cap 60 mg (base eq)</i>	41	<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	9
DUPIXENT INJ 100/0.67	84	<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	9
DUPIXENT INJ 200/1.14	84	EMTRIVA SOL 10MG/ML	7
DUPIXENT INJ 200MG	84	EMVERM CHW 100MG	4
DUPIXENT INJ 300/2ML	84	<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	27
dutasteride cap 0.5 mg	80	<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	27
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	80	<i>enalapril maleate tab 10 mg</i>	27
<b>E</b>		<i>enalapril maleate tab 2.5 mg</i>	27
e.e.s. 400	12	<i>enalapril maleate tab 20 mg</i>	27
EDURANT TAB 25MG	7	<i>enalapril maleate tab 5 mg</i>	27
efavirenz cap 200 mg	7	ENBREL INJ 25/0.5ML	84
efavirenz cap 50 mg	7	ENBREL INJ 25MG	84
efavirenz tab 600 mg	7	ENBREL INJ 50MG/ML	85
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	9	ENBREL MINI INJ 50MG/ML	85
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	9	ENBREL SRCLK INJ 50MG/ML	85
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	9	ENDARI POW 5GM	72
effervescent pot chloride	90	<i>endocet tab 10-325mg</i>	3
EGRIFTA SV INJ 2MG	72	<i>endocet tab 2.5-325</i>	2
eletriptan hydrobromide tab 20 mg (base equivalent)	56	<i>endocet tab 5-325mg</i>	2
eletriptan hydrobromide tab 40 mg (base equivalent)	56	<i>endocet tab 7.5-325mg</i>	2
ELIGARD INJ 22.5MG	17	INGERIX-B INJ 10/0.5ML	88
ELIGARD INJ 30MG	17	INGERIX-B INJ 20MCG/ML	88
ELIGARD INJ 45MG	17	<i>enilloring mis</i>	66
ELIGARD INJ 7.5MG	17	<i>exoxaparin sodium inj 300 mg/3ml</i>	82
ELIQUIS ST P TAB 5MG	82	<i>exoxaparin sodium inj soln pref syr 100 mg/ml</i>	82
ELIQUIS TAB 2.5MG	82	<i>exoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	82
ELIQUIS TAB 5MG	82		
ELITEK INJ 1.5MG	26		
ELITEK INJ 7.5MG	26		

<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i> .....	82	<i>ergotamine w/ caffeine tab 1-100 mg</i> .....	56
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i> .....	82	ERIVEDGE CAP 150MG.....	21
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i> .....	82	ERLEADA TAB 240MG .....	17
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i> .....	82	ERLEADA TAB 60MG .....	17
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i> .....	82	<i>erlotinib hcl tab 100 mg (base equivalent)</i> .....	21
<i>enpresse-28</i> .....	66	<i>erlotinib hcl tab 150 mg (base equivalent)</i> .....	21
<i>enskyce</i> .....	66	<i>erlotinib hcl tab 25 mg (base equivalent)</i> .....	21
<i>ENSPRYNG INJ</i> .....	57	<i>errin</i> .....	66
<i>entacapone tab 200 mg</i> .....	44	<i>ertapenem sodium for inj 1 gm (base equivalent)</i> .....	4
<i>entecavir tab 0.5 mg</i> .....	10	ERWINAZE INJ 10000UNT .....	18
<i>entecavir tab 1 mg</i> .....	10	<i>ery</i> .....	98
<i>ENTRESTO CAP 15-16MG</i> .....	29	<i>ery-tab</i> .....	12
<i>ENTRESTO CAP 6-6MG</i> .....	29	<i>ERYTHROCIN INJ 500MG</i> .....	12
<i>ENTRESTO TAB 24-26MG</i> .....	29	<i>erythromycin ethylsuccinate tab 400 mg</i> .....	12
<i>ENTRESTO TAB 49-51MG</i> .....	29	<i>erythromycin gel 2%</i> .....	98
<i>ENTRESTO TAB 97-103MG</i> .....	29	<i>erythromycin ophth oint 5 mg/gm</i> .....	91
<i>enulose</i> .....	79	<i>erythromycin soln 2%</i> .....	98
<i>ENVARSUS XR TAB 0.75MG</i> .....	87	<i>erythromycin tab 250 mg</i> .....	12
<i>ENVARSUS XR TAB 1MG</i> .....	87	<i>erythromycin tab 500 mg</i> .....	12
<i>ENVARSUS XR TAB 4MG</i> .....	87	<i>erythromycin tab delayed release 250 mg</i> .....	12
<i>EPCLUSA PAK 150-37.5</i> .....	10	<i>erythromycin tab delayed release 333 mg</i> .....	12
<i>EPCLUSA PAK 200-50MG</i> .....	10	<i>erythromycin tab delayed release 500 mg</i> .....	12
<i>EPCLUSA TAB 200-50MG</i> .....	10	<i>erythromycin w/ delayed release particles cap 250 mg</i> .....	13
<i>EPCLUSA TAB 400-100</i> .....	10	ESBRIET CAP 267MG .....	96
<i>EPIDIOLEX SOL 100MG/ML</i> .....	51	ESBRIET TAB 267MG .....	96
<i>epinastine hcl ophth soln 0.05%</i> .....	92	ESBRIET TAB 801MG .....	96
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i> .....	96	<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i> .....	41
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i> .....	96	<i>escitalopram oxalate tab 10 mg (base equiv)</i> .....	41
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i> .....	96	<i>escitalopram oxalate tab 20 mg (base equiv)</i> .....	41
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i> .....	16	<i>escitalopram oxalate tab 5 mg (base equiv)</i> .....	41
<i>epitol</i> .....	51	<i>estarrylla tab 0.25-35</i> .....	66
<i>eplerenone tab 25 mg</i> .....	28	<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i> .....	69
<i>eplerenone tab 50 mg</i> .....	28		
<i>EPRONTIA SOL 25MG/ML</i> .....	51		
<i>ERBITUX INJ 100MG</i> .....	21		
<i>ERBITUX INJ 200MG</i> .....	21		
<i>ergoloid mesylates tab 1 mg</i> .....	39		

<i>estradiol &amp; norethindrone acetate tab</i>	
<i>1-0.5 mg</i>	70
<i>estradiol tab 0.5 mg</i>	70
<i>estradiol tab 1 mg</i>	70
<i>estradiol tab 2 mg</i>	70
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	70
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	70
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	70
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	70
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	70
<i>estradiol td patch weekly 0.025 mg/24hr</i>	70
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	70
<i>estradiol td patch weekly 0.05 mg/24hr</i>	70
<i>estradiol td patch weekly 0.06 mg/24hr</i>	70
<i>estradiol td patch weekly 0.075 mg/24hr</i>	70
<i>estradiol td patch weekly 0.1 mg/24hr</i>	70
<i>estradiol vaginal cream 0.1 mg/gm</i>	70
<i>estradiol vaginal tab 10 mcg</i>	70
<i>estradiol valerate im in oil 10 mg/ml</i>	70
<i>estradiol valerate im in oil 20 mg/ml</i>	70
<i>estropipate tab 1.5 mg</i>	70
<i>estropipate tab 3 mg</i>	70
<i>ethambutol hcl tab 100 mg</i>	9
<i>ethambutol hcl tab 400 mg</i>	9
<i>ethosuximide cap 250 mg</i>	51
<i>ethosuximide soln 250 mg/5ml</i>	51
<i>ethynodiol diacetate &amp; ethynodiol estradiol tab 1 mg-35 mcg</i>	66
<i>ethynodiol diacetate &amp; ethynodiol estradiol tab 1 mg-50 mcg</i>	66
<i>etonogestrel-ethynodiol estradiol va ring 0.12-0.015 mg/24hr</i>	66
<i>ETOPOPHOS INJ 100MG</i>	19
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	19
<i>etravirine tab 100 mg</i>	7

<i>etravirine tab 200 mg</i>	7
<i>EUCRISA OIN 2%</i>	102
<i>EULEXIN CAP 125MG</i>	17
<i>euthyrox</i>	75
<i>everolimus tab 0.25 mg</i>	87
<i>everolimus tab 0.5 mg</i>	87
<i>everolimus tab 0.75 mg</i>	87
<i>everolimus tab 1 mg</i>	87
<i>everolimus tab 10 mg</i>	21
<i>everolimus tab 2.5 mg</i>	21
<i>everolimus tab 5 mg</i>	21
<i>everolimus tab 7.5 mg</i>	21
<i>everolimus tab for oral susp 2 mg</i>	21
<i>everolimus tab for oral susp 3 mg</i>	21
<i>everolimus tab for oral susp 5 mg</i>	21
<i>EVOTAZ TAB 300-150</i>	9
<i>EVRYSDI SOL</i>	57
<i>exemestane tab 25 mg</i>	17
<i>EXSERVAN MIS 50MG</i>	57
<i>EYLEA INJ 2/0.05ML</i>	93
<i>EYSUVIS DRO 0.25%</i>	92
<i>ezetimibe tab 10 mg</i>	32
<i>ezetimibe-simvastatin tab 10-10 mg</i>	32
<i>ezetimibe-simvastatin tab 10-20 mg</i>	32
<i>ezetimibe-simvastatin tab 10-40 mg</i>	32
<i>ezetimibe-simvastatin tab 10-80 mg</i>	32
<b>F</b>	
<i>falmina</i>	67
<i>famciclovir tab 125 mg</i>	10
<i>famciclovir tab 250 mg</i>	10
<i>famciclovir tab 500 mg</i>	10
<i>famotidine for susp 40 mg/5ml</i>	78
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	78
<i>famotidine preservative free inj 20 mg/2ml</i>	78
<i>famotidine tab 20 mg</i>	78
<i>famotidine tab 40 mg</i>	78
<i>FANAPT TAB 10MG</i>	46
<i>FANAPT TAB 12MG</i>	46
<i>FANAPT TAB 1MG</i>	46
<i>FANAPT TAB 2MG</i>	46
<i>FANAPT TAB 4MG</i>	46
<i>FANAPT TAB 6MG</i>	46
<i>FANAPT TAB 8MG</i>	46
<i>FARXIGA TAB 10MG</i>	61
<i>FARXIGA TAB 5MG</i>	61

FARYDAK CAP 10MG .....	21
FARYDAK CAP 15MG .....	21
FARYDAK CAP 20MG .....	21
FASENRA INJ 10MG/0.5 .....	96
FASENRA INJ 30MG/ML .....	96
FASENRA PEN INJ 30MG/ML .....	96
FASLODEX INJ 250/5ML .....	17
<i>febuxostat tab 40 mg</i> .....	1
<i>febuxostat tab 80 mg</i> .....	1
<i>felbamate susp 600 mg/5ml</i> .....	51
<i>felbamate tab 400 mg</i> .....	51
<i>felbamate tab 600 mg</i> .....	51
<i>felodipine tab er 24hr 10 mg</i> .....	35
<i>felodipine tab er 24hr 2.5 mg</i> .....	35
<i>felodipine tab er 24hr 5 mg</i> .....	35
<i>fenofibrate micronized cap 134 mg</i> ...	31
<i>fenofibrate micronized cap 200 mg</i> ...	31
<i>fenofibrate micronized cap 43 mg</i> ....	31
<i>fenofibrate micronized cap 67 mg</i> ....	31
<i>fenofibrate tab 145 mg</i> .....	31
<i>fenofibrate tab 160 mg</i> .....	31
<i>fenofibrate tab 48 mg</i> .....	31
<i>fenofibrate tab 54 mg</i> .....	31
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i> .....	3
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i> .....	3
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i> .....	3
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i> .....	3
<i>fentanyl citrate lozenge on a handle 1200 mcg</i> .....	3
<i>fentanyl citrate lozenge on a handle 1600 mcg</i> .....	3
<i>fentanyl citrate lozenge on a handle 200 mcg</i> .....	3
<i>fentanyl citrate lozenge on a handle 400 mcg</i> .....	3
<i>fentanyl citrate lozenge on a handle 600 mcg</i> .....	3
<i>fentanyl citrate lozenge on a handle 800 mcg</i> .....	3
<i>fentanyl td patch 72hr 100 mcg/hr</i> ....	2
<i>fentanyl td patch 72hr 12 mcg/hr</i> ....	2
<i>fentanyl td patch 72hr 25 mcg/hr</i> ....	2
<i>fentanyl td patch 72hr 50 mcg/hr</i> ....	2
<i>fentanyl td patch 72hr 75 mcg/hr</i> .....	2
<i>fesoterodine fumarate tab er 24hr 4 mg</i> .....	81
<i>fesoterodine fumarate tab er 24hr 8 mg</i> .....	81
<i>FETZIMA CAP 120MG</i> .....	41
<i>FETZIMA CAP 20MG</i> .....	41
<i>FETZIMA CAP 40MG</i> .....	41
<i>FETZIMA CAP 80MG</i> .....	41
<i>FETZIMA CAP TITRATIO</i> .....	41
<i>finasteride tab 5 mg</i> .....	80
<i> fingolimod hcl cap 0.5 mg (base equiv)</i> .....	58
<i>FINTEPLA SOL 2.2MG/ML</i> .....	51
<i>FIRDAPSE TAB 10MG</i> .....	57
<i>FIRMAGON INJ 120MG</i> .....	17
<i>FIRMAGON INJ 80MG</i> .....	17
<i>FIRVANQ SOL 25MG/ML</i> .....	4
<i>FIRVANQ SOL 50MG/ML</i> .....	4
<i>flac oil 0.01%</i> .....	94
<i>flavoxate hcl tab 100 mg</i> .....	81
<i>flecainide acetate tab 100 mg</i> .....	30
<i>flecainide acetate tab 150 mg</i> .....	30
<i>flecainide acetate tab 50 mg</i> .....	30
<i>fluconazole for susp 10 mg/ml</i> .....	6
<i>fluconazole for susp 40 mg/ml</i> .....	6
<i>fluconazole in dextrose</i> .....	6
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i> .....	6
<i>fluconazole tab 100 mg</i> .....	6
<i>fluconazole tab 150 mg</i> .....	6
<i>fluconazole tab 200 mg</i> .....	6
<i>fluconazole tab 50 mg</i> .....	6
<i>flucytosine cap 250 mg</i> .....	6
<i>flucytosine cap 500 mg</i> .....	6
<i>fludarabine phosphate for inj 50 mg</i> .16	
<i>fludrocortisone acetate tab 0.1 mg</i> ...71	
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i> .....	97
<i>fluocinolone acetonide (otic) oil 0.01%</i> .....	94
<i>fluocinolone acetonide cream 0.01%</i> .....	100
<i>fluocinolone acetonide cream 0.025%</i> .....	100
<i>fluocinolone acetonide oint 0.025%</i> 100	
<i>fluocinolone acetonide sc</i> .....	100

<i>fluocinolone acetonide soln 0.01%..</i>	100
<i>fluocinonide cream 0.05% .....</i>	100
<i>fluocinonide emulsified base cream 0.05%.....</i>	100
<i>fluocinonide gel 0.05% .....</i>	101
<i>fluocinonide oint 0.05% .....</i>	101
<i>fluocinonide soln 0.05% .....</i>	101
<i>fluorometholone ophth susp 0.1% ....</i>	92
<b>FLUOROPLEX CRE 1% .....</b>	102
<i>fluorouracil cream 5%.....</i>	102
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml) .....</i>	16
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml) .....</i>	16
<i>fluorouracil soln 2%.....</i>	102
<i>fluorouracil soln 5%.....</i>	102
<i>fluoxetine hcl cap 10 mg .....</i>	41
<i>fluoxetine hcl cap 20 mg .....</i>	42
<i>fluoxetine hcl cap 40 mg .....</i>	42
<i>fluoxetine hcl solution 20 mg/5ml....</i>	42
<i>fluphenazine decanoate inj 25 mg/ml</i>	46
<i>fluphenazine hcl elixir 2.5 mg/5ml ...</i>	46
<i>fluphenazine hcl inj 2.5 mg/ml .....</i>	46
<i>fluphenazine hcl oral conc 5 mg/ml... </i>	46
<i>fluphenazine hcl tab 1 mg .....</i>	46
<i>fluphenazine hcl tab 10 mg.....</i>	46
<i>fluphenazine hcl tab 2.5 mg.....</i>	46
<i>fluphenazine hcl tab 5 mg .....</i>	46
<i>flurazepam hcl cap 15 mg .....</i>	56
<i>flurazepam hcl cap 30 mg .....</i>	56
<i>flurbiprofen sodium ophth soln 0.03% .....</i>	92
<i>flutamide cap 125 mg .....</i>	17
<i>fluticasone propionate aer pow ba 100 mcg/act .....</i>	97
<i>fluticasone propionate aer pow ba 250 mcg/act .....</i>	97
<i>fluticasone propionate aer pow ba 50 mcg/act .....</i>	97
<i>fluticasone propionate cream 0.05% .....</i>	101
<i>fluticasone propionate hfa inhal aer 110 mcg/act .....</i>	97
<i>fluticasone propionate hfa inhal aer 220 mcg/act .....</i>	97
<i>fluticasone propionate hfa inhal aero 44 mcg/act .....</i>	97
<i>fluticasone propionate nasal susp 50 mcg/act .....</i>	97
<i>fluticasone propionate oint 0.005% 101</i>	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act .....</i>	97
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act .....</i>	98
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act .....</i>	98
<i>fluvastatin sodium cap 20 mg (base equivalent) .....</i>	31
<i>fluvastatin sodium cap 40 mg (base equivalent) .....</i>	31
<i>fluvoxamine maleate tab 100 mg .....</i>	39
<i>fluvoxamine maleate tab 25 mg .....</i>	39
<i>fluvoxamine maleate tab 50 mg .....</i>	39
<b>FML FORTE SUS 0.25% OP .....</b>	92
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml.....</i>	82
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml.....</i>	82
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml .....</i>	82
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml.....</i>	82
<i>formoterol fumarate soln nebu 20 mcg/2ml .....</i>	95
<b>FORTEO INJ 600/2.4.....</b>	65
<i>fosamprenavir calcium tab 700 mg (base equiv) .....</i>	7
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent) .....</i>	5
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg .....</i>	27
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg .....</i>	27
<i>fosinopril sodium tab 10 mg .....</i>	27
<i>fosinopril sodium tab 20 mg .....</i>	27
<i>fosinopril sodium tab 40 mg .....</i>	27
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv) .....</i>	51
<b>FOTIVDA CAP 0.89MG.....</b>	21
<b>FOTIVDA CAP 1.34MG.....</b>	21
<b>FRAGMIN INJ 10000/ML.....</b>	82
<b>FRAGMIN INJ 12500UNT .....</b>	82
<b>FRAGMIN INJ 15000UNT .....</b>	82
<b>FRAGMIN INJ 18000UNT .....</b>	82

FRAGMIN INJ 2500/0.2 .....	82
FRAGMIN INJ 5000/0.2 .....	82
FRAGMIN INJ 7500/0.3 .....	82
FRAGMIN INJ 95000UNT .....	82
FRUZAQLA CAP 1MG .....	21
FRUZAQLA CAP 5MG .....	21
<i>furosemide inj 10 mg/ml</i> .....	36
<i>furosemide oral soln 10 mg/ml</i> .....	36
<i>furosemide tab 20 mg</i> .....	36
<i>furosemide tab 40 mg</i> .....	36
<i>furosemide tab 80 mg</i> .....	36
FUZEON INJ 90MG.....	7
<i>fyavolv tab 0.5-2.5</i> .....	70
<i>fyavolv tab 1-5</i> .....	70
FYCOMPA SUS 0.5MG/ML .....	51
FYCOMPA TAB 10MG .....	51
FYCOMPA TAB 12MG .....	51
FYCOMPA TAB 2MG.....	51
FYCOMPA TAB 4MG.....	51
FYCOMPA TAB 6MG.....	51
FYCOMPA TAB 8MG.....	51
<b>G</b>	
<i> gabapentin cap 100 mg</i> .....	51
<i> gabapentin cap 300 mg</i> .....	51
<i> gabapentin cap 400 mg</i> .....	51
<i> gabapentin oral soln 250 mg/5ml</i> ....	51
<i> gabapentin tab 600 mg</i> .....	51
<i> gabapentin tab 800 mg</i> .....	51
GALAFOLD CAP 123MG .....	72
<i> galantamine hydrobromide cap er 24hr 16 mg</i> .....	39
<i> galantamine hydrobromide cap er 24hr 24 mg</i> .....	39
<i> galantamine hydrobromide cap er 24hr 8 mg</i> .....	39
<i> galantamine hydrobromide oral soln 4 mg/ml</i> .....	39
<i> galantamine hydrobromide tab 12 mg</i> .....	40
<i> galantamine hydrobromide tab 4 mg</i> 39	
<i> galantamine hydrobromide tab 8 mg</i> 39	
GAMASTAN INJ .....	86
GAMMAGARD INJ 10GM/100 .....	86
GAMMAGARD INJ 2.5GM/25.....	86
GAMMAGARD INJ 20GM/200.....	86
GAMMAGARD INJ 30GM/300.....	86
GAMMAGARD INJ 5GM/50ML .....	86
GAMMAGARD SD INJ 10GM HU .....	86
GAMMAGARD SD INJ 5GM HU .....	86
GAMMAKED INJ 10GM/100 .....	86
GAMMAKED INJ 1GM/10ML.....	86
GAMMAKED INJ 20GM/200 .....	86
GAMMAKED INJ 5GM/50ML.....	86
GAMMAPLEX INJ 10% .....	86
GAMMAPLEX INJ 5%.....	86
GAMUNEX-C INJ 10GM/100 .....	86
GAMUNEX-C INJ 1GM/10ML.....	86
GAMUNEX-C INJ 20GM/200 .....	86
GAMUNEX-C INJ 40/400ML.....	86
GAMUNEX-C INJ 5GM/50ML.....	86
GARDASIL 9 INJ.....	88
<i> gatifloxacin ophth soln 0.5%</i> .....	91
GATTEX KIT 5MG .....	79
GAUZE PADS & DRESSINGS - PADS 2 X 2 .....	63
<i> gavilyte-c</i> .....	79
<i> gavilyte-g</i> .....	79
<i> gavilyte-n sol flav pk</i> .....	79
GAVRETO CAP 100MG.....	21
<i> gefitinib tab 250 mg</i> .....	21
<i> gemcitabine hcl for inj 1 gm</i> .....	16
<i> gemcitabine hcl for inj 2 gm</i> .....	16
<i> gemcitabine hcl for inj 200 mg</i> .....	16
<i> gemfibrozil tab 600 mg</i> .....	31
<i> gemmily</i> .....	67
GEMTESA TAB 75MG .....	81
<i> generlac</i> .....	79
<i> gengraf</i> .....	87
<i> gentamicin in saline inj 0.8 mg/ml</i> ....	5
<i> gentamicin in saline inj 1 mg/ml</i> .....	5
<i> gentamicin in saline inj 1.2 mg/ml</i> ....	5
<i> gentamicin in saline inj 1.6 mg/ml</i> ....	5
<i> gentamicin sulfate cream 0.1%</i> .....	99
<i> gentamicin sulfate inj 40 mg/ml</i> .....	5
<i> gentamicin sulfate oint 0.1%</i> .....	99
<i> gentamicin sulfate ophth soln 0.3%</i> ..	91
GENVOYA TAB .....	9
GEODON INJ 20MG.....	46
GILENYA CAP 0.25MG .....	58
GILENYA CAP 0.5MG .....	58
GILOTTRIF TAB 20MG.....	21
GILOTTRIF TAB 30MG.....	21
GILOTTRIF TAB 40MG.....	21
GLASSIA INJ.....	96

<i>glatiramer acetate soln prefilled syringe</i>	
<i>20 mg/ml</i> .....	58
<i>glatiramer acetate soln prefilled syringe</i>	
<i>40 mg/ml</i> .....	58
<i>glatopa</i> .....	58
<i>GLEOSTINE CAP 100MG</i> .....	15
<i>GLEOSTINE CAP 10MG</i> .....	15
<i>GLEOSTINE CAP 40MG</i> .....	15
<i>glimepiride tab 1 mg</i> .....	61
<i>glimepiride tab 2 mg</i> .....	61
<i>glimepiride tab 4 mg</i> .....	61
<i>glip/metform tab 2.5-250m</i> .....	61
<i>glip/metform tab 2.5-500m</i> .....	61
<i>glip/metform tab 5-500mg</i> .....	61
<i>glipizide tab 10 mg</i> .....	61
<i>glipizide tab 5 mg</i> .....	61
<i>glipizide tab er 24hr 10 mg</i> .....	61
<i>glipizide tab er 24hr 2.5 mg</i> .....	61
<i>glipizide tab er 24hr 5 mg</i> .....	61
<i>glucagon (rdna) for inj kit 1 mg</i> .....	72
<i>GLUCAGON KIT 1MG</i> .....	72
<i>glycopyrrolate inj 0.2 mg/ml</i> .....	78
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i> .....	78
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i> .....	78
<i>glycopyrrolate tab 1 mg</i> .....	78
<i>glycopyrrolate tab 2 mg</i> .....	78
<i>GLYXAMBI TAB 10-5 MG</i> .....	61
<i>GLYXAMBI TAB 25-5 MG</i> .....	61
<i>gransetron hcl tab 1 mg</i> .....	77
<i>GRANIX INJ 300/0.5</i> .....	83
<i>GRANIX INJ 300/1ML</i> .....	83
<i>GRANIX INJ 480/0.8</i> .....	83
<i>GRANIX INJ 480/1.6</i> .....	83
<i>GRASTEK SUB 2800BAU</i> .....	86
<i>griseofulvin microsize susp 125 mg/5ml</i> .....	6
<i>griseofulvin microsize tab 500 mg</i> .....	6
<i>griseofulvin ultramicrosize tab 125 mg</i> .....	6
<i>griseofulvin ultramicrosize tab 250 mg</i> .....	6
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i> .....	55
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i> .....	55
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i> .....	55
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i> .....	55
<i>GVOKE HYPO 2 INJ 0.5/.1ML</i> .....	72
<i>GVOKE HYPO 2 INJ 1MG/.2ML</i> .....	72
<i>GVOKE PFS INJ</i> .....	72
<b>H</b>	
<i>hailey 24 tab fe</i> .....	67
<i>HALAVEN INJ 1MG/2ML</i> .....	19
<i>halobetasol propionate cream 0.05%</i> .....	101
<i>halobetasol propionate oint 0.05%</i> .....	101
<i>haloperidol decanoate im soln 100 mg/ml</i> .....	46
<i>haloperidol decanoate im soln 50 mg/ml</i> .....	46
<i>haloperidol lactate inj 5 mg/ml</i> .....	46
<i>haloperidol lactate oral conc 2 mg/m</i> .....	46
<i>haloperidol tab 0.5 mg</i> .....	46
<i>haloperidol tab 1 mg</i> .....	46
<i>haloperidol tab 10 mg</i> .....	46
<i>haloperidol tab 2 mg</i> .....	46
<i>haloperidol tab 20 mg</i> .....	46
<i>haloperidol tab 5 mg</i> .....	46
<i>HARVONI PAK 33.75-150MG</i> .....	10
<i>HARVONI PAK 45-200MG</i> .....	10
<i>HARVONI TAB 90-400MG</i> .....	10
<i>HAVRIX INJ 1440UNIT</i> .....	88
<i>HAVRIX INJ 720UNIT</i> .....	88
<i>heather tab 0.35mg</i> .....	67
<i>HELIDAC MIS THERAPY</i> .....	79
<i>HEP SOD/D5W INJ 25000UNT</i> .....	82
<i>heparin sodium (porcine) inj 1000 unit/ml</i> .....	82
<i>heparin sodium (porcine) inj 10000 unit/ml</i> .....	83
<i>heparin sodium (porcine) inj 20000 unit/ml</i> .....	83
<i>heparin sodium (porcine) inj 5000 unit/ml</i> .....	83
<i>HEPLISAV-B INJ 20/0.5ML</i> .....	88
<i>HERCEPTIN INJ 150MG</i> .....	21
<i>HERCEPTIN INJ 440MG</i> .....	21
<i>HETLIOZ CAP 20MG</i> .....	56
<i>HIBERIX SOL 10MCG</i> .....	88
<i>HUMALOG INJ 100/ML</i> .....	63
<i>HUMALOG JR INJ 100/ML</i> .....	63
<i>HUMALOG KWIK INJ 100/ML</i> .....	63

HUMALOG KWIK INJ 200/ML.....	63
HUMALOG MIX INJ 50/50 .....	63
HUMALOG MIX INJ 50/50KWP .....	63
HUMALOG MIX INJ 75/25KWP .....	63
HUMALOG MIX SUS 75/25 .....	63
HUMATROPE INJ 12MG.....	72
HUMATROPE INJ 24MG.....	72
HUMATROPE INJ 6MG .....	72
HUMIRA INJ 10/0.1ML .....	85
HUMIRA INJ 20/0.2ML .....	85
HUMIRA INJ 40/0.4ML .....	85
HUMIRA KIT 40MG/0.8.....	85
HUMIRA PEN INJ 40/0.4ML .....	85
HUMIRA PEN INJ 40MG/0.8 .....	85
HUMIRA PEN INJ 80/0.8ML .....	85
HUMIRA PEN INJ CD/UC/HS.....	85
HUMIRA PEN KIT CD/UC/HS .....	85
HUMIRA PEN KIT PED UC .....	85
HUMIRA PEN KIT PS/UV .....	85
HUMULIN INJ 70/30.....	63
HUMULIN INJ 70/30KWP .....	63
HUMULIN N INJ U-100 .....	63
HUMULIN N INJ U-100KWP .....	63
HUMULIN R INJ U-100 .....	64
HUMULIN R INJ U-500 .....	64
<i>hydralazine hcl tab 10 mg .....</i>	37
<i>hydralazine hcl tab 100 mg .....</i>	37
<i>hydralazine hcl tab 25 mg .....</i>	37
<i>hydralazine hcl tab 50 mg .....</i>	37
<i>hydrochlorothiazide cap 12.5 mg.....</i>	36
<i>hydrochlorothiazide tab 12.5 mg .....</i>	36
<i>hydrochlorothiazide tab 25 mg .....</i>	36
<i>hydrochlorothiazide tab 50 mg .....</i>	36
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml .....</i>	3
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml .....</i>	3
<i>hydrocodone-acetaminophen tab 10-325 mg .....</i>	3
<i>hydrocodone-acetaminophen tab 5-300 mg .....</i>	3
<i>hydrocodone-acetaminophen tab 5-325 mg .....</i>	3
<i>hydrocodone-acetaminophen tab 7.5-325 mg .....</i>	3
<i>hydrocortisone butyrate cream 0.1% .....</i>	101
<i>hydrocortisone butyrate oint 0.1% .</i>	101
<i>hydrocortisone butyrate soln 0.1%.</i>	101
<i>hydrocortisone enema 100 mg/60ml</i>	79
<i>hydrocortisone lotion 2.5%.....</i>	101
<i>hydrocortisone oint 2.5% .....</i>	101
<i>hydrocortisone perianal cream 2.5%</i>	
	102
<i>hydrocortisone tab 10 mg .....</i>	71
<i>hydrocortisone tab 20 mg .....</i>	71
<i>hydrocortisone tab 5 mg .....</i>	71
<i>hydrocortisone valerate cream 0.2%</i>	
	101
<i>hydrocortisone valerate oint 0.2%..</i>	101
<i>hydromorphone hcl liqd 1 mg/ml.....</i>	3
<i>hydromorphone hcl tab 2 mg .....</i>	3
<i>hydromorphone hcl tab 4 mg .....</i>	3
<i>hydromorphone hcl tab 8 mg .....</i>	3
<i>hydroxychloroquine sulfate tab 200 mg .....</i>	85
<i>hydroxyurea cap 500 mg .....</i>	18
<i>hydroxyzine hcl tab 10 mg .....</i>	94
<i>hydroxyzine hcl tab 25 mg .....</i>	94
<i>hydroxyzine hcl tab 50 mg .....</i>	94
<i>hydroxyzine pamoate cap 100 mg .....</i>	95
<i>hydroxyzine pamoate cap 25 mg.....</i>	94
<i>hydroxyzine pamoate cap 50 mg .....</i>	94
<i>HYFTOR GEL 0.2% .....</i>	102
<b>I</b>	
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent) .....</i>	65
<i>ibandronate sodium tab 150 mg (base equivalent) .....</i>	65
IBRANCE CAP 100MG.....	21
IBRANCE CAP 125MG.....	21
IBRANCE CAP 75MG .....	21
IBRANCE TAB 100MG.....	21
IBRANCE TAB 125MG.....	21
IBRANCE TAB 75MG .....	21
<i>ibu tab 600mg .....</i>	1
<i>ibu tab 800mg .....</i>	1
<i>ibuprofen tab 400 mg .....</i>	1
<i>ibuprofen tab 600 mg .....</i>	1
<i>ibuprofen tab 800 mg .....</i>	1
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml.....</i>	84
<i>iclevia .....</i>	67
ICLUSIG TAB 10MG .....	21

ICLUSIG TAB 15MG .....	21
ICLUSIG TAB 30MG .....	21
ICLUSIG TAB 45MG .....	21
<i>icosapent ethyl cap 0.5 gm</i> .....	32
<i>icosapent ethyl cap 1 gm</i> .....	32
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i> .....	16
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i> .....	16
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i> .....	16
IDHIFA TAB 100MG .....	21
IDHIFA TAB 50MG .....	21
<i>ifosfamide for inj 1 gm</i> .....	16
<i>imatinib mesylate tab 100 mg (base equivalent)</i> .....	21
<i>imatinib mesylate tab 400 mg (base equivalent)</i> .....	21
IMBRUICA CAP 140MG .....	22
IMBRUICA CAP 70MG .....	22
IMBRUICA SUS 70MG/ML .....	22
IMBRUICA TAB 140MG .....	22
IMBRUICA TAB 280MG .....	22
IMBRUICA TAB 420MG .....	22
IMBRUICA TAB 560MG .....	22
IMDELLTRA INJ 10MG .....	22
IMDELLTRA INJ 1MG .....	22
<i>imipenem-cilastatin intravenous for soln 250 mg</i> .....	5
<i>imipenem-cilastatin intravenous for soln 500 mg</i> .....	5
imipramine hcl tab 10 mg.....	42
imipramine hcl tab 25 mg.....	42
imipramine hcl tab 50 mg.....	42
imiquimod cream 5%.....	102
IMOVAX RABIE INJ 2.5/ML .....	88
IMPAVIDO CAP 50MG.....	5
INBRIJA CAP 42MG.....	44
<i>incassia tab 0.35mg</i> .....	67
INCRELEX INJ 40MG/4ML .....	72
INCRUSE ELPT INH 62.5MCG .....	94
<i>indapamide tab 1.25 mg</i> .....	36
<i>indapamide tab 2.5 mg</i> .....	36
INFANRIX INJ .....	88
INGREZZA CAP 40-80MG.....	57
INGREZZA CAP 40MG .....	57
INGREZZA CAP 60MG .....	57
INGREZZA CAP 80MG .....	57
INLYTA TAB 1MG.....	22
INLYTA TAB 5MG.....	22
INQOVI TAB 35-100MG.....	16
INREBIC CAP 100MG .....	22
INSULIN LISP INJ 100/ML .....	64
INSULIN LISP INJ JUNIOR .....	64
INSULIN LISP INJ PROTAMIN.....	64
INSULIN PEN NEEDLE .....	64
INSULIN SYRINGE (DISP) U-100 0.3 ML.....	64
INSULIN SYRINGE (DISP) U-100 1 ML .....	64
INSULIN SYRINGE (DISP) U-100 1/2 ML.....	64
INTELENCE TAB 25MG .....	7
INTRALIPID INJ 20% .....	91
INTRALIPID INJ 30% .....	91
INTRON A INJ 10MU .....	86
INTRON A INJ 18MU .....	86
INTRON A INJ 25MU .....	86
INTRON A INJ 50MU .....	86
<i>intovale</i> .....	67
INVEGA HAFYE INJ 1092MG.....	46
INVEGA HAFYE INJ 1560MG.....	46
INVEGA SUST INJ 117/0.75.....	46
INVEGA SUST INJ 156MG/ML.....	47
INVEGA SUST INJ 234/1.5 .....	47
INVEGA SUST INJ 39/0.25 .....	46
INVEGA SUST INJ 78/0.5ML .....	46
INVEGA TRINZ INJ 273MG.....	47
INVEGA TRINZ INJ 410MG.....	47
INVEGA TRINZ INJ 546MG.....	47
INVEGA TRINZ INJ 819MG.....	47
INVIRASE TAB 500MG .....	7
INVOKAMET TAB 150-1000 .....	61
INVOKAMET TAB 150-500 .....	61
INVOKAMET TAB 50-1000 .....	61
INVOKAMET TAB 50-500MG .....	61
INVOKAMET XR TAB 150-1000.....	61
INVOKAMET XR TAB 150-500 .....	61
INVOKAMET XR TAB 50-1000 .....	61
INVOKAMET XR TAB 50-500MG .....	61
INVOKANA TAB 100MG .....	61
INVOKANA TAB 300MG .....	61
IOPIDINE SOL 1% OP .....	93
IPOL INJ INACTIVE .....	88

<i>ipratropium bromide inhal soln 0.02%</i>	94
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	94
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	94
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	94
<i>irbesartan tab 150 mg</i>	30
<i>irbesartan tab 300 mg</i>	30
<i>irbesartan tab 75 mg</i>	30
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	29
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	29
<b>IRESSA TAB 250MG</b>	22
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	18
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	18
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	18
<b>ISENTRESS CHW 100MG</b>	7
<b>ISENTRESS CHW 25MG</b>	7
<b>ISENTRESS HD TAB 600MG</b>	7
<b>ISENTRESS POW 100MG</b>	7
<b>ISENTRESS TAB 400MG</b>	7
<i>isibloom</i>	67
<b>ISOLYTE-P INJ /D5W</b>	89
<b>ISOLYTE-S INJ PH 7.4</b>	89
<i>isoniazid inj 100 mg/ml</i>	9
<i>isoniazid syrup 50 mg/5ml</i>	9
<i>isoniazid tab 100 mg</i>	9
<i>isoniazid tab 300 mg</i>	9
<b>ISOPROPYL ALCOHOL 0.7 ML/ML</b>	64
<i>isosorbide dinitrate tab 10 mg</i>	37
<i>isosorbide dinitrate tab 20 mg</i>	37
<i>isosorbide dinitrate tab 30 mg</i>	37
<i>isosorbide dinitrate tab 5 mg</i>	37
<i>isosorbide mononitrate tab 10 mg</i>	37
<i>isosorbide mononitrate tab 20 mg</i>	37
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	37
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	37
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	37

<i>isotretinoin cap 10 mg</i>	98
<i>isotretinoin cap 20 mg</i>	98
<i>isotretinoin cap 30 mg</i>	98
<i>isotretinoin cap 40 mg</i>	98
<i>isradipine cap 2.5 mg</i>	35
<i>isradipine cap 5 mg</i>	35
<b>ISTODAX INJ 10MG</b>	22
<b>ISTURISA TAB 1MG</b>	72
<b>ISTURISA TAB 5MG</b>	72
<i>itraconazole cap 100 mg</i>	6
<i>ivermectin tab 3 mg</i>	5
<b>IWLFIN TAB 192MG</b>	19
<b>IXCHIQ INJ</b>	88
<b>IXEMPRA KIT INJ 15MG</b>	19
<b>IXIARO INJ</b>	88
<b>J</b>	
<b>JAKAFI TAB 10MG</b>	22
<b>JAKAFI TAB 15MG</b>	22
<b>JAKAFI TAB 20MG</b>	22
<b>JAKAFI TAB 25MG</b>	22
<b>JAKAFI TAB 5MG</b>	22
<i>jantoven</i>	83
<b>JANUMET TAB 50-1000</b>	61
<b>JANUMET TAB 50-500MG</b>	61
<b>JANUMET XR TAB 100-1000</b>	61
<b>JANUMET XR TAB 50-1000</b>	61
<b>JANUMET XR TAB 50-500MG</b>	61
<b>JANUVIA TAB 100MG</b>	62
<b>JANUVIA TAB 25MG</b>	61
<b>JANUVIA TAB 50MG</b>	62
<b>JARDIANCE TAB 10MG</b>	62
<b>JARDIANCE TAB 25MG</b>	62
<i>jasmiel</i>	67
<b>JAYPIRCA TAB 100MG</b>	22
<b>JAYPIRCA TAB 50MG</b>	22
<b>JENTADUETO TAB 2.5-1000</b>	62
<b>JENTADUETO TAB 2.5-500</b>	62
<b>JENTADUETO TAB 2.5-850</b>	62
<b>JENTADUETO TAB XR 2.5-1000MG</b>	62
<b>JENTADUETO TAB XR 5-1000MG</b>	62
<b>JEVTANA INJ 60/1.5ML</b>	19
<i>jinteli tab 1mg-5mcg</i>	70
<i>joyeaux tab 0.1-20</i>	67
<i>juleber</i>	67
<b>JULUCA TAB 50-25MG</b>	9
<i>junel 1.5/30</i>	67
<i>junel 1/20</i>	67

<i>junel fe 1.5/30</i>	67	KESIMPTA INJ 20/.4ML	58
<i>junel fe 1/20</i>	67	<i>ketoconazole cream 2%</i>	99
<i>junel fe 24</i>	67	<i>ketoconazole shampoo 2%</i>	99
JYLAMVO SOL 2MG/ML	85	<i>ketoconazole tab 200 mg</i>	6
JYNARQUE PAK 15MG	73	<i>ketorolac tromethamine ophth soln 0.4%</i>	92
JYNARQUE PAK 30-15MG	73	<i>ketorolac tromethamine ophth soln 0.5%</i>	92
JYNARQUE PAK 45-15MG	73	KEYTRUDA INJ 100MG/4M	22
JYNARQUE PAK 60-30MG	73	KINERET INJ	85
JYNARQUE PAK 90-30MG	73	KINRIX INJ	88
JYNARQUE TAB 15MG	73	<i>kionex sus 15gm/60</i>	65
JYNARQUE TAB 30MG	73	KISQALI 200 DOSE	22
JYNNEOS INJ	88	KISQALI 200 PAK FEMARA	19
<b>K</b>		KISQALI 400 DOSE	22
KADCYLA INJ 100MG	22	KISQALI 400 PAK FEMARA	19
KADCYLA INJ 160MG	22	KISQALI 600 DOSE	22
<i>kaitlib fe</i>	67	KISQALI 600 PAK FEMARA	19
KALYDECO GRA 13.4MG	96	<i>klor-con</i>	90
KALYDECO GRA 5.8MG	96	<i>klor-con 10</i>	90
KALYDECO PAK 25MG	96	<i>klor-con 8</i>	90
KALYDECO PAK 50MG	96	<i>klor-con m10</i>	90
KALYDECO PAK 75MG	96	<i>klor-con m15</i>	90
KALYDECO TAB 150MG	96	<i>klor-con m20</i>	90
<i>kariva</i>	67	<i>klor-con/ef</i>	90
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>	89	KLOXXADO SPR 8MG	60
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i>	89	KORLYM TAB 300MG	73
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i>	90	KOSELUGO CAP 10MG	22
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	89	KOSELUGO CAP 25MG	22
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	90	KRAZATI TAB 200MG	22
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	90	<i>kurvelo</i>	67
<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>	90	KYPROLIS SOL 30MG	22
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>	90	KYPROLIS SOL 60MG	22
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.9% inj</i>	90	<b>L</b>	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	90	<i>labetalol hcl iv soln 5 mg/ml</i>	33
KCL/D5W/LACT INJ 20MEQ/L	90	<i>labetalol hcl tab 100 mg</i>	33
<i>kelnor 1/35</i>	67	<i>labetalol hcl tab 200 mg</i>	33
<i>kelnor 1/50</i>	67	<i>labetalol hcl tab 300 mg</i>	33
KERENDIA TAB 10MG	28	<i>lacosamide oral solution 10 mg/ml</i>	51
KERENDIA TAB 20MG	28	<i>lacosamide tab 100 mg</i>	51
		<i>lacosamide tab 150 mg</i>	51
		<i>lacosamide tab 200 mg</i>	52
		<i>lacosamide tab 50 mg</i>	51
		<i>lactated ringer's for irrigation</i>	102
		<i>lactated ringer's solution</i>	90
		<i>lactic acid (ammonium lactate) cream 12%</i>	102

<i>lactic acid (ammonium lactate) lotion</i>	
12% .....	102
<i>lactulose solution 10 gm/15ml</i> .....	79
<i>LAGEVRIO CAP 200MG</i> .....	10
<i>lamivudine oral soln 10 mg/ml</i> .....	7
<i>lamivudine tab 100 mg (hbv)</i> .....	10
<i>lamivudine tab 150 mg</i> .....	7
<i>lamivudine tab 300 mg</i> .....	7
<i>lamivudine-zidovudine tab 150-300 mg</i> .....	9
<i>lamotrigine orally disintegrating tab</i>	
100 mg .....	52
<i>lamotrigine orally disintegrating tab</i>	
200 mg .....	52
<i>lamotrigine orally disintegrating tab 25 mg</i> .....	52
<i>lamotrigine orally disintegrating tab 50 mg</i> .....	52
<i>lamotrigine tab 100 mg</i> .....	52
<i>lamotrigine tab 150 mg</i> .....	52
<i>lamotrigine tab 200 mg</i> .....	52
<i>lamotrigine tab 25 mg</i> .....	52
<i>lamotrigine tab 25 mg (42) &amp; 100 mg (7) starter kit</i> .....	52
<i>lamotrigine tab 35 x 25 mg starter kit</i> .....	52
<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit</i> .....	52
<i>lamotrigine tab chewable dispersible 25 mg</i> .....	52
<i>lamotrigine tab chewable dispersible 5 mg</i> .....	52
<i>lamotrigine tab disint 21 x 25 mg &amp; 7 x 50 mg titration kit</i> .....	52
<i>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i> .....	52
<i>lamotrigine tab disint 42 x 50mg &amp; 14 x 100mg titration kit</i> .....	52
<i>lamotrigine tab er 24hr 100 mg</i> .....	52
<i>lamotrigine tab er 24hr 200 mg</i> .....	52
<i>lamotrigine tab er 24hr 25 mg</i> .....	52
<i>lamotrigine tab er 24hr 250 mg</i> .....	52
<i>lamotrigine tab er 24hr 300 mg</i> .....	52
<i>lamotrigine tab er 24hr 50 mg</i> .....	52
<i>lansoprazole cap delayed release 15 mg</i> .....	80
<i>lansoprazole cap delayed release 30 mg</i> .....	80
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i> .....	74
<i>lanthanum carbonate chew tab 500 mg (elemental)</i> .....	74
<i>lanthanum carbonate chew tab 750 mg (elemental)</i> .....	74
<i>LANTUS INJ 100/ML</i> .....	64
<i>LANTUS SOLOS INJ 100/ML</i> .....	64
<i>lapatinib ditosylate tab 250 mg (base equiv)</i> .....	22
<i>larin 1.5/30</i> .....	67
<i>larin 1/20</i> .....	67
<i>larin fe 1.5/30</i> .....	67
<i>larin fe 1/20</i> .....	67
<i>LARTRUVO INJ 10MG/ML</i> .....	22
<i>LARTRUVO INJ 190/19ML</i> .....	22
<i>latanoprost ophth soln 0.005%</i> .....	93
<i>layolis fe</i> .....	67
<i>LAZCLUZE TAB 240MG</i> .....	22
<i>LAZCLUZE TAB 80MG</i> .....	22
<i>leena</i> .....	67
<i>leflunomide tab 10 mg</i> .....	85
<i>leflunomide tab 20 mg</i> .....	85
<i>lenalidomide cap 10 mg</i> .....	18
<i>lenalidomide cap 15 mg</i> .....	18
<i>lenalidomide cap 20 mg</i> .....	18
<i>lenalidomide cap 25 mg</i> .....	18
<i>lenalidomide cap 5 mg</i> .....	18
<i>lenalidomide caps 2.5 mg</i> .....	18
<i>LENVIMA CAP 10 MG</i> .....	23
<i>LENVIMA CAP 12MG</i> .....	23
<i>LENVIMA CAP 14 MG</i> .....	23
<i>LENVIMA CAP 18 MG</i> .....	23
<i>LENVIMA CAP 20 MG</i> .....	23
<i>LENVIMA CAP 24 MG</i> .....	23
<i>LENVIMA CAP 4MG</i> .....	22
<i>LENVIMA CAP 8 MG</i> .....	22
<i>lessina</i> .....	67
<i>letrozole tab 2.5 mg</i> .....	17
<i>leucovorin calcium for inj 100 mg</i> .....	26
<i>leucovorin calcium for inj 200 mg</i> .....	26
<i>leucovorin calcium for inj 350 mg</i> .....	26
<i>leucovorin calcium for inj 50 mg</i> .....	26
<i>leucovorin calcium tab 10 mg</i> .....	26
<i>leucovorin calcium tab 15 mg</i> .....	26

leucovorin calcium tab 25 mg .....	26
leucovorin calcium tab 5 mg .....	26
LEUKERAN TAB 2MG .....	16
leuprolide inj 1mg/0.2.....	17
LEUPROLIDE INJ 22.5MG.....	17
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv) .....	95
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv) .....	95
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv) .....	95
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv).....	95
levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv) .....	95
LEVEMIR INJ.....	64
LEVEMIR INJ FLEXPEN .....	64
levetiracetam in sodium chloride iv soln 500 mg/100ml .....	52
levetiracetam inj 500 mg/5ml (100 mg/ml) .....	52
levetiracetam oral soln 100 mg/ml ..	52
levetiracetam tab 1000 mg .....	52
levetiracetam tab 250 mg .....	52
levetiracetam tab 500 mg .....	52
levetiracetam tab 750 mg .....	52
levetiracetam tab er 24hr 500 mg ....	52
levetiracetam tab er 24hr 750 mg ....	52
levobunolol hcl ophth soln 0.5%.....	93
levocarnitine oral soln 1 gm/10ml (10%).....	73
levocarnitine tab 330 mg.....	73
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml) .....	95
levocetirizine dihydrochloride tab 5 mg .....	95
levofloxacin in d5w iv soln 250 mg/50ml .....	13
levofloxacin in d5w iv soln 500 mg/100ml .....	13
levofloxacin in d5w iv soln 750 mg/150ml .....	13
levofloxacin ophth soln 0.5% .....	91
levofloxacin oral soln 25 mg/ml.....	13
levofloxacin tab 250 mg .....	13
levofloxacin tab 500 mg .....	13
levofloxacin tab 750 mg .....	13
levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv) .....	26
levonest .....	67
levonorgestrel & ethinyl estradiol (91- day) tab 0.15-0.03 mg .....	67
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg .....	67
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg .....	67
levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg .....	67
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg .....	67
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7).....	67
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7).....	67
levora 0.15/30-28 .....	67
levothyroxine sodium cap 100 mcg....	75
levothyroxine sodium cap 112 mcg....	75
levothyroxine sodium cap 125 mcg....	75
levothyroxine sodium cap 13 mcg ....	75
levothyroxine sodium cap 137 mcg....	75
levothyroxine sodium cap 150 mcg....	75
levothyroxine sodium cap 175 mcg....	75
levothyroxine sodium cap 200 mcg....	75
levothyroxine sodium cap 25 mcg ....	75
levothyroxine sodium cap 50 mcg ....	75
levothyroxine sodium cap 75 mcg ....	75
levothyroxine sodium cap 88 mcg ....	75
levothyroxine sodium tab 100 mcg ...	75
levothyroxine sodium tab 112 mcg ...	75
levothyroxine sodium tab 125 mcg ...	75
levothyroxine sodium tab 137 mcg ...	75
levothyroxine sodium tab 150 mcg ...	75
levothyroxine sodium tab 175 mcg ...	75
levothyroxine sodium tab 200 mcg ...	75
levothyroxine sodium tab 25 mcg ....	75
levothyroxine sodium tab 300 mcg ...	75
levothyroxine sodium tab 50 mcg ....	75
levothyroxine sodium tab 75 mcg ....	75
levothyroxine sodium tab 88 mcg ....	75
levoxyl.....	75
LIBERVANT MIS 10MG .....	52
LIBERVANT MIS 12.5MG .....	52
LIBERVANT MIS 15MG .....	52
LIBERVANT MIS 5MG .....	52

<i>LIBERVANT MIS 7.5MG</i> .....	52
<i>lidocaine hcl local inj 2%</i> .....	4
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i> .....	4
<i>lidocaine hcl viscous soln 2%</i> .....	103
<i>lidocaine oint 5%</i> .....	101
<i>lidocaine patch 5%</i> .....	101
<i>lidocaine-prilocaine cream 2.5-2.5%</i> .....	101
<i>lidocan pad 5%</i> .....	101
<i>linezolid for susp 100 mg/5ml</i> .....	5
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i> .....	5
<i>linezolid tab 600 mg</i> .....	5
<i>LINZESS CAP 145MCG</i> .....	79
<i>LINZESS CAP 290MCG</i> .....	79
<i>LINZESS CAP 72MCG</i> .....	79
<i>liothyronine sodium iv soln 10 mcg/ml</i> .....	75
<i>liothyronine sodium tab 25 mcg</i> .....	75
<i>liothyronine sodium tab 5 mcg</i> .....	75
<i>liothyronine sodium tab 50 mcg</i> .....	75
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	27
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	27
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	27
<i>lisinopril tab 10 mg</i> .....	27
<i>lisinopril tab 2.5 mg</i> .....	27
<i>lisinopril tab 20 mg</i> .....	27
<i>lisinopril tab 30 mg</i> .....	27
<i>lisinopril tab 40 mg</i> .....	27
<i>lisinopril tab 5 mg</i> .....	27
<i>LITFULO CAP 50MG</i> .....	85
<i>lithium carbonate cap 150 mg</i> .....	57
<i>lithium carbonate cap 300 mg</i> .....	57
<i>lithium carbonate cap 600 mg</i> .....	57
<i>lithium carbonate tab 300 mg</i> .....	57
<i>lithium carbonate tab er 300 mg</i> .....	57
<i>lithium carbonate tab er 450 mg</i> .....	57
<i>lithium oral solution 8 meq/5ml</i> .....	57
<i>LITHIUM SOL 8MEQ/5ML</i> .....	57
<i>LIVALO TAB 1MG</i> .....	31
<i>LIVALO TAB 2MG</i> .....	31
<i>LIVALO TAB 4MG</i> .....	31
<i>LIVTENCITY TAB 200MG</i> .....	10
<i>loestrin 21 tab 1.5/30</i> .....	67
<i>loestrin fe tab 1.5/30</i> .....	68
<i>loestrin fe tab 1/20</i> .....	68
<i>loestrin tab 1/20-21</i> .....	68
<i>LONSURF TAB 15-6.14</i> .....	16
<i>LONSURF TAB 20-8.19</i> .....	16
<i>loperamide hcl cap 2 mg</i> .....	79
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i> .....	9
<i>lopinavir-ritonavir tab 100-25 mg</i> .....	9
<i>lopinavir-ritonavir tab 200-50 mg</i> .....	9
<i>lorazepam inj 2 mg/ml</i> .....	52
<i>lorazepam inj 4 mg/ml</i> .....	52
<i>lorazepam intensol</i> .....	39
<i>lorazepam tab 0.5 mg</i> .....	39
<i>lorazepam tab 1 mg</i> .....	39
<i>lorazepam tab 2 mg</i> .....	39
<i>LORBRENA TAB 100MG</i> .....	23
<i>LORBRENA TAB 25MG</i> .....	23
<i>LOREEV XR CAP 1.5MG</i> .....	39
<i>LOREEV XR CAP 1MG</i> .....	39
<i>LOREEV XR CAP 2MG</i> .....	39
<i>LOREEV XR CAP 3MG</i> .....	39
<i>loryna</i> .....	68
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i> .....	29
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i> .....	29
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i> .....	29
<i>losartan potassium tab 100 mg</i> .....	30
<i>losartan potassium tab 25 mg</i> .....	30
<i>losartan potassium tab 50 mg</i> .....	30
<i>LOTEMAX OIN 0.5%</i> .....	92
<i>LOTEMAX SM GEL 0.38%</i> .....	92
<i>loteprednol etabonate ophth gel 0.5%</i> .....	92
<i>loteprednol etabonate ophth susp 0.5%</i> .....	92
<i>lovastatin tab 10 mg</i> .....	31
<i>lovastatin tab 20 mg</i> .....	31
<i>lovastatin tab 40 mg</i> .....	31
<i>low-ogestrel</i> .....	68
<i>loxapine succinate cap 10 mg</i> .....	47
<i>loxapine succinate cap 25 mg</i> .....	47

<i>loxapine succinate cap 5 mg</i>	47	MATULANE CAP 50MG	19
<i>loxapine succinate cap 50 mg</i>	47	<i>matzim la tab 180mg/24</i>	35
<i>lubiprostone cap 24 mcg</i>	79	<i>matzim la tab 240mg/24</i>	35
<i>lubiprostone cap 8 mcg</i>	79	<i>matzim la tab 300mg/24</i>	35
<i>LUCENTIS SOL 0.3MG</i>	93	<i>matzim la tab 360mg/24</i>	35
<i>LUCENTIS SOL 0.5MG</i>	93	<i>matzim la tab 420mg/24</i>	35
<i>luliconazole cream 1%</i>	99	MAVYRET PAK 50-20MG	10
LUMAKRAS TAB 120MG	23	MAVYRET TAB 100-40MG	10
LUMAKRAS TAB 320MG	23	MAYZENT STARTER PACK (12)	58
LUMIGAN SOL 0.01% OP	93	MAYZENT STARTER PACK (7)	58
LUPKYNIS CAP 7.9MG	87	MAYZENT TAB 0.25MG	58
LUPR DEP-PED INJ 11.25MG	73	MAYZENT TAB 1MG	58
LUPR DEP-PED INJ 15MG	73	MAYZENT TAB 2MG	58
LUPR DEP-PED INJ 7.5MG	73	<i>meclizine hcl tab 12.5 mg</i>	77
LUPRON DEPOT INJ 11.25MG	17	<i>meclizine hcl tab 25 mg</i>	77
LUPRON DEPOT INJ 22.5MG	17	<i>medroxyprogesterone acetate im susp</i>	
LUPRON DEPOT INJ 3.75MG	17	<i>150 mg/ml</i>	68
LUPRON DEPOT INJ 30MG	17	<i>medroxyprogesterone acetate im susp</i>	
LUPRON DEPOT INJ 45MG	17, 73	<i>prefilled syr 150 mg/ml</i>	68
LUPRON DEPOT INJ 7.5MG	17	<i>medroxyprogesterone acetate tab 10</i>	
<i>lurasidone hcl tab 120 mg</i>	47	<i>mg</i>	74
<i>lurasidone hcl tab 20 mg</i>	47	<i>medroxyprogesterone acetate tab 2.5</i>	
<i>lurasidone hcl tab 40 mg</i>	47	<i>mg</i>	74
<i>lurasidone hcl tab 60 mg</i>	47	<i>medroxyprogesterone acetate tab 5 mg</i>	
<i>lurasidone hcl tab 80 mg</i>	47		74
<i>lultera</i>	68	<i>mefloquine hcl tab 250 mg</i>	7
LYBALVI TAB 10-10MG	47	<i>megestrol acetate susp 40 mg/ml</i>	74
LYBALVI TAB 15-10MG	47	<i>megestrol acetate susp 625 mg/5ml</i>	74
LYBALVI TAB 20-10MG	47	<i>megestrol acetate tab 20 mg</i>	17
LYBALVI TAB 5-10MG	47	<i>megestrol acetate tab 40 mg</i>	17
<i>lyleq</i>	68	MEKINIST SOL 0.05/ML	23
<i>lyllana</i>	70	MEKINIST TAB 0.5MG	23
LYNPARZA TAB 100MG	23	MEKINIST TAB 2MG	23
LYNPARZA TAB 150MG	23	MEKTOVI TAB 15MG	23
LYSODREN TAB 500MG	17	<i>meloxicam tab 15 mg</i>	1
LYTGOBI TAB 4MG	23	<i>meloxicam tab 7.5 mg</i>	1
LYUMJEV INJ 100UT/ML	64	<i>melphalan hcl for inj 50 mg (base</i>	
LYUMJEV KWPN INJ 100UT/ML	64	<i>equiv)</i>	16
LYUMJEV KWPN INJ 200UT/ML	64	<i>memantine hcl cap er 24hr 14 mg</i>	40
<i>lyza</i>	68	<i>memantine hcl cap er 24hr 21 mg</i>	40
<b>M</b>		<i>memantine hcl cap er 24hr 28 mg</i>	40
<i>magnesium sulfate inj 50%</i>	90	<i>memantine hcl cap er 24hr 7 mg</i>	40
<i>malathion lotion 0.5%</i>	102	<i>memantine hcl oral solution 2 mg/ml</i>	40
<i>maraviroc tab 150 mg</i>	7	<i>memantine hcl tab 10 mg</i>	40
<i>maraviroc tab 300 mg</i>	8	<i>memantine hcl tab 28 x 5 mg &amp; 21 x</i>	
<i>marlissa</i>	68	<i>10 mg titration pack</i>	40
MARPLAN TAB 10MG	42	<i>memantine hcl tab 5 mg</i>	40

MENACTRA INJ.....	88
MENQUADFI INJ .....	88
MENVEO INJ .....	88
MENVEO SOL.....	88
mercaptopurine tab 50 mg .....	16
meropenem iv for soln 1 gm .....	5
meropenem iv for soln 500 mg .....	5
merzee .....	68
mesalamine cap dr 400 mg .....	79
mesalamine cap er 24hr 0.375 gm .....	79
mesalamine enema 4 gm .....	79
mesalamine suppos 1000 mg.....	79
mesalamine tab delayed release 1.2 gm .....	79
mesalamine tab delayed release 800 mg .....	79
mesna inj 100 mg/ml.....	26
MESNEX TAB 400MG.....	26
metaxalone tab 800 mg .....	59
metformin hcl tab 1000 mg .....	62
metformin hcl tab 500 mg .....	62
metformin hcl tab 850 mg .....	62
metformin hcl tab er 24hr 500 mg....	62
metformin hcl tab er 24hr 750 mg....	62
methazolamide tab 25 mg .....	36
methazolamide tab 50 mg .....	36
methenamine hippurate tab 1 gm.....	5
methimazole tab 10 mg .....	75
methimazole tab 5 mg .....	75
methitest tab 10mg .....	60
methocarbamol tab 1000 mg .....	59
methocarbamol tab 500 mg .....	59
methocarbamol tab 750 mg.....	59
methotrexate sodium for inj 1 gm .....	16
methotrexate sodium inj 50 mg/2ml (25 mg/ml).....	17
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml).....	17
methotrexate sodium tab 2.5 mg (base equiv) .....	86
methoxsalen rapid cap 10 mg .....	99
methscopolamine bromide tab 2.5 mg .....	78
methscopolamine bromide tab 5 mg .	78
methsuximide cap 300 mg .....	53
methylphenidate hcl soln 10 mg/5ml	55
methylphenidate hcl soln 5 mg/5ml ..	55
methylphenidate hcl tab 10 mg .....	55
methylphenidate hcl tab 20 mg .....	56
methylphenidate hcl tab 5 mg .....	55
methylprednisolone acetate inj susp 40 mg/ml.....	71
methylprednisolone acetate inj susp 80 mg/ml.....	71
methylprednisolone sod succ for inj 125 mg (base equiv).....	71
methylprednisolone sod succ for inj 40 mg (base equiv) .....	71
methylprednisolone tab 16 mg.....	71
methylprednisolone tab 32 mg.....	71
methylprednisolone tab 4 mg .....	71
methylprednisolone tab 8 mg .....	71
methylprednisolone tab therapy pack 4 mg (21) .....	71
methyltestosterone cap 10 mg.....	60
metoclopramide hcl inj 5 mg/ml (base equivalent) .....	77
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv) .....	77
metoclopramide hcl tab 10 mg (base equivalent) .....	77
metoclopramide hcl tab 5 mg (base equivalent) .....	77
metolazone tab 10 mg .....	36
metolazone tab 2.5 mg .....	36
metolazone tab 5 mg .....	36
metoprolol & hydrochlorothiazide tab 100-25 mg .....	33
metoprolol & hydrochlorothiazide tab 100-50 mg .....	33
metoprolol & hydrochlorothiazide tab 50-25 mg .....	33
metoprolol succinate tab er 24hr 100 mg (tartrate equiv) .....	33
metoprolol succinate tab er 24hr 200 mg (tartrate equiv) .....	33
metoprolol succinate tab er 24hr 25 mg (tartrate equiv) .....	33
metoprolol succinate tab er 24hr 50 mg (tartrate equiv) .....	33
metoprolol tartrate tab 100 mg .....	33
metoprolol tartrate tab 25 mg.....	33
metoprolol tartrate tab 37.5 mg .....	33
metoprolol tartrate tab 50 mg.....	33

<i>metoprolol tartrate tab 75 mg</i> .....	33
<i>metronidazole cream 0.75%</i> .....	102
<i>metronidazole gel 0.75%</i> .....	102
<i>metronidazole in nacl</i> .....	5
<i>metronidazole lotion 0.75%</i> .....	102
<i>metronidazole tab 250 mg</i> .....	5
<i>metronidazole tab 500 mg</i> .....	5
<i>metronidazole vaginal gel 0.75%</i> .....	82
<i>metyrosine cap 250 mg</i> .....	37
<i>mexiletine hcl cap 150 mg</i> .....	30
<i>mexiletine hcl cap 200 mg</i> .....	30
<i>mexiletine hcl cap 250 mg</i> .....	30
<i>micafungin sodium for iv soln 100 mg</i> 6	
<i>micafungin sodium for iv soln 50 mg</i> . 6	
<i>microgestin 1.5/30</i> .....	68
<i>microgestin 1/20</i> .....	68
<i>microgestin 24 fe</i> .....	68
<i>microgestin fe 1.5/30</i> .....	68
<i>microgestin fe 1/20</i> .....	68
<i>midodrine hcl tab 10 mg</i> .....	37
<i>midodrine hcl tab 2.5 mg</i> .....	37
<i>midodrine hcl tab 5 mg</i> .....	37
<i>mifepristone tab 300 mg</i> .....	73
<i>miglitol tab 100 mg</i> .....	62
<i>miglitol tab 25 mg</i> .....	62
<i>miglitol tab 50 mg</i> .....	62
<i>miglustat cap 100 mg</i> .....	73
<i>mili tab 0.25/35</i> .....	68
<i>mimvey tab 1-0.5mg</i> .....	70
<i>minocycline hcl cap 100 mg</i> .....	15
<i>minocycline hcl cap 50 mg</i> .....	15
<i>minocycline hcl cap 75 mg</i> .....	15
<i>minocycline hcl tab 100 mg</i> .....	15
<i>minocycline hcl tab 50 mg</i> .....	15
<i>minocycline hcl tab 75 mg</i> .....	15
<i>minoxidil tab 10 mg</i> .....	37
<i>minoxidil tab 2.5 mg</i> .....	37
<i>mirabegron tab er 24 hr 25 mg</i> .....	81
<i>mirabegron tab er 24 hr 50 mg</i> .....	81
<i>mirtazapine orally disintegrating tab 15 mg</i> .....	42
<i>mirtazapine orally disintegrating tab 30 mg</i> .....	42
<i>mirtazapine orally disintegrating tab 45 mg</i> .....	42
<i>mirtazapine tab 15 mg</i> .....	42
<i>mirtazapine tab 30 mg</i> .....	42
<i>mirtazapine tab 45 mg</i> .....	42
<i>mirtazapine tab 7.5 mg</i> .....	42
<i>misoprostol tab 100 mcg</i> .....	79
<i>misoprostol tab 200 mcg</i> .....	79
<i>mitomycin for iv soln 20 mg</i> .....	16
<i>mitomycin for iv soln 40 mg</i> .....	16
<i>mitomycin for iv soln 5 mg</i> .....	16
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i> .....	19
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i> .....	19
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i> .....	19
<i>M-M-R II INJ</i> .....	88
<i>modafinil tab 100 mg</i> .....	59
<i>modafinil tab 200 mg</i> .....	59
<i>moexipril hcl tab 15 mg</i> .....	27
<i>moexipril hcl tab 7.5 mg</i> .....	27
<i>molindone hcl tab 10 mg</i> .....	47
<i>molindone hcl tab 25 mg</i> .....	47
<i>molindone hcl tab 5 mg</i> .....	47
<i>mometasone furoate cream 0.1%</i> ..	101
<i>mometasone furoate nasal susp 50 mcg/act</i> .....	97
<i>mometasone furoate oint 0.1%</i> .....	101
<i>mometasone furoate solution 0.1% (lotion)</i> .....	101
<i>montelukast sodium chew tab 4 mg (base equiv)</i> .....	95
<i>montelukast sodium chew tab 5 mg (base equiv)</i> .....	95
<i>montelukast sodium tab 10 mg (base equiv)</i> .....	95
<i>morphine sulfate oral soln 10 mg/5ml</i> 3	
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i> .....	3
<i>morphine sulfate oral soln 20 mg/5ml</i> 3	
<i>morphine sulfate suppos 10 mg</i> .....	3
<i>morphine sulfate tab 15 mg</i> .....	3
<i>morphine sulfate tab 30 mg</i> .....	3
<i>morphine sulfate tab er 100 mg</i> .....	2
<i>morphine sulfate tab er 15 mg</i> .....	2
<i>morphine sulfate tab er 200 mg</i> .....	2
<i>morphine sulfate tab er 30 mg</i> .....	2
<i>morphine sulfate tab er 60 mg</i> .....	2
<i>MOTPOLY XR CAP 100MG</i> .....	53
<i>MOTPOLY XR CAP 150MG</i> .....	53

MOTPOLY XR CAP 200MG .....	53
MOUNJARO INJ 10MG/0.5 .....	62
MOUNJARO INJ 12.5/0.5 .....	62
MOUNJARO INJ 15MG/0.5 .....	62
MOUNJARO INJ 2.5/0.5 .....	62
MOUNJARO INJ 5MG/0.5 .....	62
MOUNJARO INJ 7.5/0.5 .....	62
MOVANTIK TAB 12.5MG .....	79
MOVANTIK TAB 25MG .....	79
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj .....</i>	13
<i>moxifloxacin hcl ophth soln 0.5% (base equiv) .....</i>	91
<i>moxifloxacin hcl tab 400 mg (base equiv) .....</i>	13
MOZOBIL INJ .....	83
MRESVIA INJ 50MCG .....	88
MULPLETA TAB 3MG .....	84
<i>mult electro inj ph 5.5 .....</i>	90
MULTAQ TAB 400MG .....	30
<i>mupirocin calcium cream 2% .....</i>	99
<i>mupirocin oint 2% .....</i>	99
MYALEPT INJ 11.3MG .....	73
MYCAPSSA CAP 20MG .....	73
<i>mycophenolate mofetil cap 250 mg ..</i>	87
<i>mycophenolate mofetil for oral susp 200 mg/ml .....</i>	87
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv) .....</i>	87
<i>mycophenolate mofetil tab 500 mg ..</i>	87
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv) .....</i>	87
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv) .....</i>	87
MYHIBBIN SUS 200MG/ML .....	87
MYRBETRIQ TAB 25MG .....	81
MYRBETRIQ TAB 50MG .....	81
<b>N</b>	
<i>nabumetone tab 500 mg .....</i>	1
<i>nabumetone tab 750 mg .....</i>	1
<i>nadolol tab 20 mg .....</i>	33
<i>nadolol tab 40 mg .....</i>	33
<i>nadolol tab 80 mg .....</i>	33
<i>nafcillin sodium for inj 1 gm .....</i>	14
<i>nafcillin sodium for inj 2 gm .....</i>	14
<i>nafcillin sodium for iv soln 10 gm .....</i>	14
<i>naloxone hcl inj 0.4 mg/ml .....</i>	60

<i>naloxone hcl nasal spray 4 mg/0.1ml/60</i>	
<i>naloxone hcl soln cartridge 0.4 mg/ml .....</i>	60
<i>naloxone hcl soln prefilled syringe 2 mg/2ml .....</i>	60
<i>naltrexone hcl tab 50 mg .....</i>	60
NAMZARIC CAP 14-10MG .....	40
NAMZARIC CAP 21-10MG .....	40
NAMZARIC CAP 28-10MG .....	40
NAMZARIC CAP 7-10MG .....	40
NAMZARIC CAP PACK .....	40
<i>naproxen tab 250 mg .....</i>	1
<i>naproxen tab 375 mg .....</i>	1
<i>naproxen tab 500 mg .....</i>	1
<i>naratriptan hcl tab 1 mg (base equiv) .....</i>	56
<i>naratriptan hcl tab 2.5 mg (base equiv) .....</i>	56
NATACYN SUS 5% OP .....	91
<i>nateglinide tab 120 mg .....</i>	62
<i>nateglinide tab 60 mg .....</i>	62
NAYZILAM SPR 5MG .....	53
<i>nebivolol hcl tab 10 mg (base equivalent) .....</i>	34
<i>nebivolol hcl tab 2.5 mg (base equivalent) .....</i>	33
<i>nebivolol hcl tab 20 mg (base equivalent) .....</i>	34
<i>nebivolol hcl tab 5 mg (base equivalent) .....</i>	34
necon 0.5/35-28 .....	68
NEEDLES, INSULIN DISP., SAFETY ..	64
<i>nefazodone hcl tab 100 mg .....</i>	42
<i>nefazodone hcl tab 150 mg .....</i>	42
<i>nefazodone hcl tab 200 mg .....</i>	42
<i>nefazodone hcl tab 250 mg .....</i>	42
<i>nefazodone hcl tab 50 mg .....</i>	42
<i>neomycin sulfate tab 500 mg .....</i>	5
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin ..</i>	92
<i>neomycin-polomy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml ..</i>	92
<i>neomycin-polomyxin-dexamethasone ophth oint 0.1% .....</i>	91
<i>neomycin-polomyxin-dexamethasone ophth susp 0.1% .....</i>	91
<i>neomycin-polomyxin-hc ophth susp ..</i>	91

<i>neomycin-polymyxin-hc otic soln 1%</i>	94
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	94
<i>neo-polycin oin hc 1%op</i>	91
<i>neo-polycin oin op</i>	91
NERLYNX TAB 40MG	23
NEUPRO DIS 1MG/24HR	44
NEUPRO DIS 2MG/24HR	44
NEUPRO DIS 3MG/24HR	44
NEUPRO DIS 4MG/24HR	44
NEUPRO DIS 6MG/24HR	44
NEUPRO DIS 8MG/24HR	44
NEVANAC SUS 0.1% OP	92
<i>nevirapine susp 50 mg/5ml</i>	8
<i>nevirapine tab 200 mg</i>	8
<i>nevirapine tab er 24hr 400 mg</i>	8
NEXAVAR TAB 200MG	23
NEXTSTELLIS TAB 3-14.2MG	68
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	32
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	32
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	32
niacor	32
<i>nicardipine hcl cap 20 mg</i>	35
<i>nicardipine hcl cap 30 mg</i>	35
NICOTROL INH	60
NICOTROL NS SPR 10MG/ML	60
<i>nifedipine tab er 24hr 30 mg</i>	35
<i>nifedipine tab er 24hr 60 mg</i>	35
<i>nifedipine tab er 24hr 90 mg</i>	35
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	35
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	35
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	35
nikki	68
<i>nilutamide tab 150 mg</i>	17
<i>nimodipine cap 30 mg</i>	35
NINLARO CAP 2.3MG	23
NINLARO CAP 3MG	23
NINLARO CAP 4MG	23
NIPENT INJ 10MG	19
<i>nisoldipine tab er 24hr 17 mg</i>	35
<i>nisoldipine tab er 24hr 20 mg</i>	35

<i>nisoldipine tab er 24hr 25.5 mg</i>	35
<i>nisoldipine tab er 24hr 30 mg</i>	35
<i>nisoldipine tab er 24hr 34 mg</i>	35
<i>nisoldipine tab er 24hr 40 mg</i>	35
<i>nisoldipine tab er 24hr 8.5 mg</i>	35
<i>nitazoxanide tab 500 mg</i>	5
<i>nitisinone cap 10 mg</i>	73
<i>nitisinone cap 2 mg</i>	73
<i>nitisinone cap 20 mg</i>	73
<i>nitisinone cap 5 mg</i>	73
NITRO-BID OIN 2%	37
<i>nitrofur mac cap 50mg</i>	5
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	5
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	5
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	5
NITROGLYCER INJ 5MG/ML	37
<i>nitroglycerin oint 0.4%</i>	102
<i>nitroglycerin sl tab 0.3 mg</i>	37
<i>nitroglycerin sl tab 0.4 mg</i>	37
<i>nitroglycerin sl tab 0.6 mg</i>	37
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	37
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	37
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	37
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	38
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	38
NITROSTAT SUB 0.3MG	38
NITROSTAT SUB 0.4MG	38
NITROSTAT SUB 0.6MG	38
NIVESTYM INJ 300/0.5	83
NIVESTYM INJ 300MCG	83
NIVESTYM INJ 480/0.8	83
NIVESTYM INJ 480MCG	83
<i>nizatidine cap 150 mg</i>	78
<i>nizatidine cap 300 mg</i>	78
nora-be	68
NORDITROPIN INJ 10/1.5ML	73
NORDITROPIN INJ 15/1.5ML	73
NORDITROPIN INJ 30/3ML	73
NORDITROPIN INJ 5/1.5ML	73

<i>norelgestromin-ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 1 mg-20 mcg .....	68
<i>norethindrone &amp; ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> chew tab 0.4 mg-35 mcg .....	68
<i>norethindrone &amp; ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> chew tab 0.8 mg-25 mcg .....	68
<i>norethindrone acetate &amp; ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 1 mg-20 mcg .....	68
<i>norethindrone acetate &amp; ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 1 mg-20 mcg .....	68
<i>norethindrone acetate</i> acetate tab 5 mg .....	74
<i>norethindrone acetate-ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 0.5 mg-2.5 mcg .....	70
<i>norethindrone acetate-ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 1 mg-5 mcg .....	70
<i>norethindrone ac-ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 1-20/1-30/1-35 mg-mcg .....	68
<i>norethindrone</i> tab 0.35 mg .....	68
<i>norgestimate &amp; ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 0.25 mg-35 mcg .....	68
<i>norgestimate-ethynodiol-17<math>\beta</math>-d<sub>1</sub> acetate</i> tab 0.18-35/0.215-35/0.25-35 mg-mcg .....	68
<i>norlyroc</i> .....	68
NORPACE CAP 100MG CR .....	30
NORPACE CAP 150MG CR .....	31
<i>nortrel</i> 0.5/35 (28) .....	68
<i>nortrel</i> 1/35 .....	68
<i>nortrel</i> 7/7/7 .....	68
<i>nortriptyline hcl</i> cap 10 mg .....	42
<i>nortriptyline hcl</i> cap 25 mg .....	42
<i>nortriptyline hcl</i> cap 50 mg .....	42
<i>nortriptyline hcl</i> cap 75 mg .....	42
<i>nortriptyline hcl</i> soln 10 mg/5ml .....	42
NORVIR POW 100MG .....	8
NORVIR SOL 80MG/ML .....	8
NORVIR TAB 100MG .....	8
NOURIANZ TAB 20MG .....	44
NOURIANZ TAB 40MG .....	44
NOXAFIL SUS 40MG/ML .....	6
<i>np thyroid</i> 120 .....	76
<i>np thyroid</i> 15 .....	75
<i>np thyroid</i> 30 .....	75
<i>np thyroid</i> 60 .....	75
<i>np thyroid</i> 90 .....	76
NUBEQA TAB 300MG .....	17
NUEDEXTA CAP 20-10MG .....	58
NULOJIX INJ 250MG .....	87
NUPLAZID CAP 34MG .....	47
NUPLAZID TAB 10MG .....	47
NURTEC TAB 75MG ODT .....	56
NUTRILIPID EMU 20% .....	91
NUZYRA INJ 100MG .....	15
NUZYRA TAB 150MG .....	15
<i>nyamyc</i> .....	99
<i>nylia</i> 1/35 .....	68
<i>nylia</i> 7/7/7 .....	69
<i>nymyo</i> .....	69
<i>nystatin cream</i> 100000 unit/gm .....	99
<i>nystatin oint</i> 100000 unit/gm .....	99
<i>nystatin susp</i> 100000 unit/ml .....	103
<i>nystatin tab</i> 500000 unit .....	6
<i>nystatin topical powder</i> 100000 unit/gm .....	99
<i>nystatin-triamcinolone cream</i> 100000-0.1 unit/gm-% .....	99
<i>nystatin-triamcinolone oint</i> 100000-0.1 unit/gm-% .....	99
<i>nystop</i> .....	99
<b>O</b>	
<i>ocella</i> tab 3-0.03mg .....	69
OCTAGAM INJ 1GM .....	86
OCTAGAM INJ 2GM/20ML .....	86
<i>octreotide acetate</i> inj 100 mcg/ml (0.1 mg/ml) .....	73
<i>octreotide acetate</i> inj 1000 mcg/ml (1 mg/ml) .....	73
<i>octreotide acetate</i> inj 200 mcg/ml (0.2 mg/ml) .....	73
<i>octreotide acetate</i> inj 50 mcg/ml (0.05 mg/ml) .....	73
<i>octreotide acetate</i> inj 500 mcg/ml (0.5 mg/ml) .....	73
ODACTRA SUB .....	86
ODEFSEY TAB .....	9
ODOMZO CAP 200MG .....	23
OFEV CAP 100MG .....	96
OFEV CAP 150MG .....	96
<i>ofloxacin ophth</i> soln 0.3% .....	92
<i>ofloxacin otic</i> soln 0.3% .....	94
<i>ofloxacin</i> tab 300 mg .....	13
<i>ofloxacin</i> tab 400 mg .....	13
OGSIVEO TAB 100MG .....	23
OGSIVEO TAB 150MG .....	23
OGSIVEO TAB 50MG .....	23

OJEMDA SUS 25MG/ML .....	23
OJEMDA TAB 100MG.....	23
OJJAARA TAB 100MG .....	23
OJJAARA TAB 150MG .....	23
OJJAARA TAB 200MG .....	23
<i>olanzapine for im inj 10 mg .....</i>	47
<i>olanzapine orally disintegrating tab 10 mg .....</i>	47
<i>olanzapine orally disintegrating tab 15 mg .....</i>	47
<i>olanzapine orally disintegrating tab 20 mg .....</i>	47
<i>olanzapine orally disintegrating tab 5 mg .....</i>	47
<i>olanzapine tab 10 mg .....</i>	47
<i>olanzapine tab 15 mg .....</i>	47
<i>olanzapine tab 2.5 mg .....</i>	47
<i>olanzapine tab 20 mg .....</i>	47
<i>olanzapine tab 5 mg .....</i>	47
<i>olanzapine tab 7.5 mg .....</i>	47
<i>olmesartan medoxomil tab 20 mg ....</i>	30
<i>olmesartan medoxomil tab 40 mg ....</i>	30
<i>olmesartan medoxomil tab 5 mg ....</i>	30
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 20-12.5 mg .....</i>	29
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-12.5 mg .....</i>	29
<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide tab 40-25 mg .</i>	29
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 20-5-12.5 mg .....</i>	29
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-12.5 mg .....</i>	29
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-10-25 mg .....</i>	29
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-12.5 mg .....</i>	29
<i>olmesartan-amlodipine-</i> <i>hydrochlorothiazide tab 40-5-25 mg .....</i>	29
<i>olopatadine hcl nasal soln 0.6% .....</i>	95
<i>omega-3-acid ethyl esters cap 1 gm.</i>	32
<i>omeprazole cap delayed release 10 mg .....</i>	80
<i>omeprazole cap delayed release 20 mg .....</i>	80
<i>omeprazole cap delayed release 40 mg .....</i>	80
OMNIPOD 5 DX KIT INT G7G6 .....	64
OMNIPOD 5 DX MIS POD G7G6.....	64
OMNIPOD DASH MIS PODS .....	64
OMNIPOD GO KIT 10UNT/DY .....	64
OMNIPOD GO KIT 15UNT/DY .....	64
OMNIPOD GO KIT 20UNT/DY .....	64
OMNIPOD GO KIT 25UNT/DY .....	64
OMNIPOD GO KIT 30UNT/DY .....	64
OMNIPOD GO KIT 35UNT/DY .....	64
OMNIPOD GO KIT 40UNT/DY .....	64
OMNIPOD MIS CLASSIC .....	64
OMNIPOD PDM KIT CLASSIC.....	64
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml) .....</i>	77
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml) .....</i>	77
<i>ondansetron hcl oral soln 4 mg/5ml..</i>	77
<i>ondansetron hcl tab 4 mg.....</i>	77
<i>ondansetron hcl tab 8 mg.....</i>	77
<i>ondansetron tab 4mg odt .....</i>	77
<i>ondansetron tab 8mg odt .....</i>	78
ONUREG TAB 200MG .....	17
ONUREG TAB 300MG .....	17
OPSUMIT TAB 10MG .....	38
ORFADIN CAP 20MG .....	73
ORFADIN SUS 4MG/ML .....	73
ORGOVYX TAB 120MG .....	17
ORIAHNN CAP.....	73
ORKAMBI GRA 100-125 .....	96
ORKAMBI GRA 150-188 .....	96
ORKAMBI GRA 75-94MG .....	96
ORKAMBI TAB 100-125 .....	96
ORKAMBI TAB 200-125 .....	96
ORLADEYO CAP 110MG .....	84
ORLADEYO CAP 150MG .....	84
ORSERDU TAB 345MG .....	17
ORSERDU TAB 86MG .....	17
<i>oseltamivir phosphate cap 30 mg (base equiv) .....</i>	10

<i>oseltamivir phosphate cap 45 mg (base equiv) .....</i>	10
<i>oseltamivir phosphate cap 75 mg (base equiv) .....</i>	10
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv) .....</i>	10
OTEZLA TAB 10/20 .....	85
OTEZLA TAB 10/20/30 .....	85
OTEZLA TAB 20MG .....	85
OTEZLA TAB 30MG .....	85
<i>oxacillin sodium for inj 1 gm (base equivalent) .....</i>	14
<i>oxacillin sodium for inj 2 gm (base equivalent) .....</i>	14
<i>oxacillin sodium for iv soln 10 gm (base equivalent) .....</i>	14
<i>oxaliplatin for iv inj 100 mg .....</i>	16
<i>oxaliplatin iv soln 100 mg/20ml .....</i>	16
<i>oxaliplatin iv soln 50 mg/10ml .....</i>	16
<i>oxandrolone tab 10 mg .....</i>	60
<i>oxandrolone tab 2.5 mg .....</i>	60
<i>oxazepam cap 10 mg .....</i>	39
<i>oxazepam cap 15 mg .....</i>	39
<i>oxazepam cap 30 mg .....</i>	39
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml) .....</i>	53
<i>oxcarbazepine tab 150 mg .....</i>	53
<i>oxcarbazepine tab 300 mg .....</i>	53
<i>oxcarbazepine tab 600 mg .....</i>	53
<i>oxcarbazepine tab er 24hr 150 mg .....</i>	53
<i>oxcarbazepine tab er 24hr 300 mg .....</i>	53
<i>oxcarbazepine tab er 24hr 600 mg .....</i>	53
<i>OXERVATE SOL 20MCG/ML .....</i>	93
<i>oxybutynin chloride solution 5 mg/5ml .....</i>	81
<i>oxybutynin chloride tab 5 mg .....</i>	81
<i>oxybutynin chloride tab er 24hr 10 mg .....</i>	81
<i>oxybutynin chloride tab er 24hr 15 mg .....</i>	81
<i>oxybutynin chloride tab er 24hr 5 mg .....</i>	81
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml) .....</i>	3
<i>oxycodone hcl soln 5 mg/5ml .....</i>	3
<i>oxycodone hcl tab 10 mg .....</i>	3
<i>oxycodone hcl tab 15 mg .....</i>	3
<i>oxycodone hcl tab 20 mg .....</i>	3
<i>oxycodone hcl tab 30 mg .....</i>	3
<i>oxycodone hcl tab 5 mg .....</i>	3
<i>oxycodone hcl tab er 12hr deter 10 mg .....</i>	2
<i>oxycodone hcl tab er 12hr deter 20 mg .....</i>	2
<i>oxycodone hcl tab er 12hr deter 40 mg .....</i>	2
<i>oxycodone hcl tab er 12hr deter 80 mg .....</i>	2
<i>oxycodone w/ acetaminophen tab 10-325 mg .....</i>	4
<i>oxycodone w/ acetaminophen tab 2.5-325 mg .....</i>	4
<i>oxycodone w/ acetaminophen tab 5-325 mg .....</i>	4
<i>oxycodone w/ acetaminophen tab 7.5-325 mg .....</i>	4
OXYCONTIN TAB 10MG ER .....	2
OXYCONTIN TAB 15MG ER .....	2
OXYCONTIN TAB 20MG ER .....	2
OXYCONTIN TAB 30MG ER .....	2
OXYCONTIN TAB 40MG ER .....	2
OXYCONTIN TAB 60MG ER .....	2
OXYCONTIN TAB 80MG ER .....	2
<i>oxymorphone hcl tab 10 mg .....</i>	4
<i>oxymorphone hcl tab 5 mg .....</i>	4
OZEMPIC INJ 2MG/3ML .....	62
OZEMPIC INJ 4MG/3ML .....	62
OZEMPIC INJ 8MG/3ML .....	62
<b>P</b>	
<i>pacerone .....</i>	31
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml) .....</i>	19
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml) .....</i>	19
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml) .....</i>	19
<i>paliperidone tab er 24hr 1.5 mg .....</i>	47
<i>paliperidone tab er 24hr 3 mg .....</i>	47
<i>paliperidone tab er 24hr 6 mg .....</i>	47
<i>paliperidone tab er 24hr 9 mg .....</i>	47
<i>pamidronate disodium iv soln 3 mg/ml .....</i>	65
<i>pamidronate disodium iv soln 9 mg/ml .....</i>	65

PANRETIN GEL 0.1% .....	102
<i>pantoprazole sodium ec tab 20 mg (base equiv) .....</i>	80
<i>pantoprazole sodium ec tab 40 mg (base equiv) .....</i>	80
PANZYGA SOL 10/100ML.....	86
PANZYGA SOL 1GM/10ML.....	86
PANZYGA SOL 2.5/25ML.....	86
PANZYGA SOL 20/200ML.....	86
PANZYGA SOL 30/300ML.....	86
PANZYGA SOL 5GM/50ML.....	86
<i>paricalcitol cap 1 mcg .....</i>	77
<i>paricalcitol cap 2 mcg .....</i>	77
<i>paricalcitol cap 4 mcg .....</i>	77
<i>paricalcitol iv soln 2 mcg/ml .....</i>	77
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv) .....</i>	42
<i>paroxetine hcl tab 10 mg .....</i>	42
<i>paroxetine hcl tab 20 mg .....</i>	42
<i>paroxetine hcl tab 30 mg .....</i>	42
<i>paroxetine hcl tab 40 mg .....</i>	42
<i>paroxetine hcl tab er 24hr 12.5 mg ..</i>	42
<i>paroxetine hcl tab er 24hr 25 mg ..</i>	42
<i>paroxetine hcl tab er 24hr 37.5 mg ..</i>	42
PAXLOVID TAB 150-100.....	10
PAXLOVID TAB 300-100.....	10
<i>pazopanib hcl tab 200 mg (base equiv) .....</i>	23
PEDIARIX INJ 0.5ML .....	89
PEDVAX HIB INJ.....	89
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....</i>	79
<i>peg-3350/electrolytes/asc .....</i>	79
PEGASYS INJ .....	10
PEGASYS INJ 180MCG/M .....	10
PEMAZYRE TAB 13.5MG .....	23
PEMAZYRE TAB 4.5MG .....	23
PEMAZYRE TAB 9MG .....	23
PEN GK/DEXTR INJ 20000/ML .....	14
PEN GK/DEXTR INJ 40000/ML .....	14
PEN GK/DEXTR INJ 60000/ML .....	14
PENBRAYA INJ .....	89
<i> penciclovir cream 1% .....</i>	102
<i>penicillamine tab 250 mg .....</i>	65
<i>penicillin g potassium for inj 20000000 unit .....</i>	14
<i>penicillin g sodium for inj 5000000 unit .....</i>	14
<i>penicillin v potassium for soln 125 mg/5ml.....</i>	14
<i>penicillin v potassium for soln 250 mg/5ml.....</i>	14
<i>penicillin v potassium tab 250 mg .....</i>	14
<i>penicillin v potassium tab 500 mg .....</i>	14
PENTACEL INJ.....	89
<i>pentamidine isethionate inh.....</i>	5
<i>pentamidine isethionate inj .....</i>	5
<i>pentoxifylline tab er 400 mg .....</i>	84
<i>perindopril erbumine tab 2 mg .....</i>	28
<i>perindopril erbumine tab 4 mg .....</i>	28
<i>perindopril erbumine tab 8 mg .....</i>	28
<i>periogard .....</i>	103
PERJETA INJ 420/14ML .....	23
<i>permethrin cream 5%.....</i>	102
<i>perphenazine tab 16 mg .....</i>	48
<i>perphenazine tab 2 mg .....</i>	48
<i>perphenazine tab 4 mg .....</i>	48
<i>perphenazine tab 8 mg .....</i>	48
PERSERIS INJ 120MG .....	48
PERSERIS INJ 90MG .....	48
<i>pfizerpen.....</i>	14
<i>phenelzine sulfate tab 15 mg .....</i>	42
<i>phenobarbital elixir 20 mg/5ml .....</i>	53
<i>phenobarbital tab 100 mg .....</i>	53
<i>phenobarbital tab 15 mg .....</i>	53
<i>phenobarbital tab 16.2 mg .....</i>	53
<i>phenobarbital tab 30 mg .....</i>	53
<i>phenobarbital tab 32.4 mg .....</i>	53
<i>phenobarbital tab 60 mg .....</i>	53
<i>phenobarbital tab 64.8 mg .....</i>	53
<i>phenobarbital tab 97.2 mg .....</i>	53
<i>phenytoin chew tab 50 mg .....</i>	53
<i>phenytoin sodium extended cap 100 mg .....</i>	53
<i>phenytoin sodium extended cap 200 mg .....</i>	53
<i>phenytoin sodium extended cap 300 mg .....</i>	53
<i>phenytoin sodium inj 50 mg/ml .....</i>	53
<i>phenytoin susp 125 mg/5ml .....</i>	53
PIFELTRO TAB 100MG.....	8
<i>pilocarpine hcl ophth soln 1% .....</i>	93
<i>pilocarpine hcl ophth soln 2% .....</i>	93

<i>pilocarpine hcl ophth soln 4%</i>	93
<i>pilocarpine hcl tab 5 mg</i>	103
<i>pilocarpine hcl tab 7.5 mg</i>	103
<i>pimecrolimus cream 1%</i>	102
<i>pimozide tab 1 mg</i>	48
<i>pimozide tab 2 mg</i>	48
<i>pimtrea</i>	69
<i>pindolol tab 10 mg</i>	34
<i>pindolol tab 5 mg</i>	34
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	62
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	62
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	62
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	62
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	62
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	14
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	14
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	14
<i>PIQRAY 200MG TAB DOSE</i>	23
<i>PIQRAY 250MG TAB DOSE</i>	23
<i>PIQRAY 300MG TAB DOSE</i>	23
<i>pirfenidone cap 267 mg</i>	96
<i>pirfenidone tab 267 mg</i>	96
<i>pirfenidone tab 534 mg</i>	96
<i>pirfenidone tab 801 mg</i>	96
<i>pitavastatin calcium tab 1 mg</i>	31
<i>pitavastatin calcium tab 2 mg</i>	32
<i>pitavastatin calcium tab 4 mg</i>	32
<i>PLASMA-LYTE INJ -148</i>	90
<i>PLASMA-LYTE INJ -A</i>	90
<i>PLEGRIDY INJ</i>	59
<i>PLEGRIDY INJ PEN</i>	59
<i>podofilox soln 0.5%</i>	102
<i>polycin oin op</i>	92
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	92
<i>POMALYST CAP 1MG</i>	18
<i>POMALYST CAP 2MG</i>	18
<i>POMALYST CAP 3MG</i>	18
<i>POMALYST CAP 4MG</i>	18
<i>portia-28</i>	69
<i>posaconazole susp 40 mg/ml</i>	6
<i>posaconazole tab delayed release 100 mg</i>	7
<i>POT CHLORIDE INJ 10MEQ</i>	90
<i>POT CHLORIDE INJ 20MEQ</i>	90
<i>POT CHLORIDE INJ 40MEQ</i>	90
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	90
<i>potassium chloride cap er 10 meq</i>	90
<i>potassium chloride cap er 8 meq</i>	90
<i>potassium chloride inj 2 meq/ml</i>	90
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	90
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	90
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	90
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	90
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	91
<i>potassium chloride powder packet 20 meq</i>	91
<i>potassium chloride tab er 10 meq</i>	91
<i>potassium chloride tab er 20 meq (1500 mg)</i>	91
<i>potassium chloride tab er 8 meq (600 mg)</i>	91
<i>potassium citrate tab er 10 meq (1080 mg)</i>	81
<i>potassium citrate tab er 15 meq (1620 mg)</i>	81
<i>potassium citrate tab er 5 meq (540 mg)</i>	81
<i>PRADAXA CAP 110MG</i>	83
<i>PRADAXA CAP 150MG</i>	83
<i>PRADAXA CAP 75MG</i>	83
<i>PRALUENT INJ 150MG/ML</i>	32
<i>PRALUENT INJ 75MG/ML</i>	32
<i>pramipexole dihydrochloride tab 0.125 mg</i>	44
<i>pramipexole dihydrochloride tab 0.25 mg</i>	44
<i>pramipexole dihydrochloride tab 0.5 mg</i>	44

*pramipexole dihydrochloride tab 0.75*  
*mg .....*.....44  
*pramipexole dihydrochloride tab 1 mg*  
*.....*.....44  
*pramipexole dihydrochloride tab 1.5*  
*mg .....*.....44  
*prasugrel hcl tab 10 mg (base equiv)*84  
*prasugrel hcl tab 5 mg (base equiv)* .84  
*pravastatin sodium tab 10 mg .....*32  
*pravastatin sodium tab 20 mg .....*32  
*pravastatin sodium tab 40 mg .....*32  
*pravastatin sodium tab 80 mg .....*32  
*praziquantel tab 600 mg .....* 5  
*prazosin hcl cap 1 mg .....*28  
*prazosin hcl cap 2 mg .....*28  
*prazosin hcl cap 5 mg .....*28  
*PRED MILD SUS 0.12% OP .....*92  
*PRED SOD PHO SOL 1% OP.....*92  
*prednisolone acetate ophth susp 1%* 92  
*prednisolone sod phosph oral soln 6.7*  
*mg/5ml (5 mg/5ml base) .....*71  
*prednisolone sod phosphate oral soln*  
*15 mg/5ml (base equiv) .....*71  
*prednisolone sodium phosphate oral*  
*soln 25 mg/5ml (base eq) .....*71  
*prednisolone soln 15 mg/5ml.....*71  
*prednisolone tab 5 mg .....*71  
*PREDNISONE CON 5MG/ML .....*71  
*prednisone oral soln 5 mg/5ml.....*71  
*prednisone tab 1 mg .....*71  
*prednisone tab 10 mg .....*71  
*prednisone tab 2.5 mg .....*71  
*prednisone tab 20 mg .....*72  
*prednisone tab 5 mg .....*71  
*prednisone tab 50 mg .....*72  
*pregabalin cap 100 mg .....*53  
*pregabalin cap 150 mg .....*53  
*pregabalin cap 200 mg .....*53  
*pregabalin cap 225 mg .....*53  
*pregabalin cap 25 mg .....*53  
*pregabalin cap 300 mg .....*53  
*pregabalin cap 50 mg .....*53  
*pregabalin cap 75 mg .....*53  
*pregabalin soln 20 mg/ml.....*53  
*PREHEVBRIOSUS 10MCG/ML .....*89  
*PREMARIN INJ 25MG .....*70  
*PREMARIN TAB 0.3MG .....*70

*PREMARIN TAB 0.45MG .....*70  
*PREMARIN TAB 0.625MG.....*70  
*PREMARIN TAB 0.9MG .....*70  
*PREMARIN TAB 1.25MG .....*70  
*PREMARIN VAG CRE 0.625MG.....*70  
*PREMASOL SOL 10% .....*91  
*PREMPRO TAB 0.3-1.5 .....*70  
*PREMPRO TAB 0.45-1.5 .....*70  
*PREMPRO TAB 0.625-2.5.....*70  
*PREMPRO TAB 0.625-5 .....*70  
*PRETOMANID TAB 200MG .....* 9  
*prevalite .....*.....32  
*PREVYMIS TAB 240MG.....*10  
*PREVYMIS TAB 480MG .....*10  
*PREZCOBIX TAB 800-150.....* 9  
*PREZISTA SUS 100MG/ML.....* 8  
*PREZISTA TAB 150MG .....* 8  
*PREZISTA TAB 600MG .....* 8  
*PREZISTA TAB 75MG .....* 8  
*PREZISTA TAB 800MG .....* 8  
*PRIFTIN TAB 150MG .....* 9  
*PRIMAQUINE TAB 26.3MG .....* 7  
*primidone tab 125 mg .....*53  
*primidone tab 250 mg .....*53  
*primidone tab 50 mg .....*53  
*PRIORIX INJ .....*.....89  
*PRIVIGEN INJ 20GRAMS .....*86  
*probenecid tab 500 mg .....* 1  
*procainamide hcl inj 100 mg/ml .....*31  
*prochlorperazine edisylate inj 10*  
*mg/2ml .....*.....78  
*prochlorperazine maleate tab 10 mg*  
*(base equivalent) .....*.....78  
*prochlorperazine maleate tab 5 mg*  
*(base equivalent) .....*.....78  
*prochlorperazine suppos 25 mg.....*78  
*PROCRIT INJ 10000/ML.....*83  
*PROCRIT INJ 2000/ML .....*83  
*PROCRIT INJ 20000/ML.....*83  
*PROCRIT INJ 3000/ML .....*83  
*PROCRIT INJ 4000/ML .....*83  
*PROCRIT INJ 40000/ML.....*83  
*proto-med hc .....*.....102  
*proctosol hc.....*.....102  
*protozone-hc.....*.....102  
*PROCYSBI GRA 300MG .....*73  
*PROCYSBI GRA 75MG .....*73

progesterone cap 100 mg .....	74
progesterone cap 200 mg .....	74
PROGRAF GRA 0.2MG .....	88
PROGRAF GRA 1MG .....	88
PROGRAF INJ 5MG/ML .....	88
PROLASTIN-C INJ 1000MG .....	96
PROLENSA SOL 0.07% .....	92
PROLEUKIN INJ 22MU .....	19
PROLIA INJ 60MG/ML.....	65
PROMACTA PAK 25MG.....	84
PROMACTA POW 12.5MG.....	84
PROMACTA TAB 12.5MG.....	84
PROMACTA TAB 25MG.....	84
PROMACTA TAB 50MG.....	84
PROMACTA TAB 75MG.....	84
<i>promethazine hcl inj 25 mg/ml .....</i>	78
<i>promethazine hcl inj 50 mg/ml .....</i>	78
<i>promethazine hcl oral soln 6.25 mg/5ml .....</i>	78
<i>promethazine hcl suppos 12.5 mg .....</i>	78
<i>promethazine hcl suppos 25 mg .....</i>	78
<i>promethazine hcl tab 12.5 mg .....</i>	78
<i>promethazine hcl tab 25 mg .....</i>	78
<i>promethazine hcl tab 50 mg .....</i>	78
<i>promethegan .....</i>	78
<i>propafenone hcl cap er 12hr 225 mg</i>	31
<i>propafenone hcl cap er 12hr 325 mg</i>	31
<i>propafenone hcl cap er 12hr 425 mg</i>	31
<i>propafenone hcl tab 150 mg .....</i>	31
<i>propafenone hcl tab 225 mg .....</i>	31
<i>propafenone hcl tab 300 mg .....</i>	31
<i>propranolol hcl cap er 24hr 120 mg .....</i>	34
<i>propranolol hcl cap er 24hr 160 mg .....</i>	34
<i>propranolol hcl cap er 24hr 60 mg .....</i>	34
<i>propranolol hcl cap er 24hr 80 mg .....</i>	34
<i>propranolol hcl tab 10 mg .....</i>	34
<i>propranolol hcl tab 20 mg .....</i>	34
<i>propranolol hcl tab 40 mg .....</i>	34
<i>propranolol hcl tab 60 mg .....</i>	34
<i>propranolol hcl tab 80 mg .....</i>	34
<i>propylthiouracil tab 50 mg .....</i>	76
PROQUAD INJ .....	89
PROSOL INJ 20% .....	91
<i>protriptyline hcl tab 10 mg .....</i>	42
<i>protriptyline hcl tab 5 mg .....</i>	42
PULMICORT INH 180MCG .....	97
PULMICORT INH 90MCG .....	97
PULMOZYME SOL 1MG/ML .....	96
PURIXAN SUS 20MG/ML.....	17
<i>pyrazinamide tab 500 mg .....</i>	9
<i>pyridostigmine bromide tab 60 mg .....</i>	58
<i>pyridostigmine bromide tab er 180 mg .....</i>	58
<i>pyrimethamine tab 25 mg .....</i>	5
<b>Q</b>	
QBREXZA PAD 2.4% .....	102
QINLOCK TAB 50MG .....	23
QUADRACEL INJ .....	89
QUADRACEL INJ 0.5ML .....	89
<i>quetiapine fumarate tab 100 mg .....</i>	48
<i>quetiapine fumarate tab 150 mg .....</i>	48
<i>quetiapine fumarate tab 200 mg .....</i>	48
<i>quetiapine fumarate tab 25 mg .....</i>	48
<i>quetiapine fumarate tab 300 mg .....</i>	48
<i>quetiapine fumarate tab 400 mg .....</i>	48
<i>quetiapine fumarate tab 50 mg .....</i>	48
<i>quetiapine fumarate tab er 24hr 150 mg .....</i>	48
<i>quetiapine fumarate tab er 24hr 200 mg .....</i>	48
<i>quetiapine fumarate tab er 24hr 300 mg .....</i>	48
<i>quetiapine fumarate tab er 24hr 400 mg .....</i>	48
<i>quinapril hcl tab 10 mg .....</i>	28
<i>quinapril hcl tab 20 mg .....</i>	28
<i>quinapril hcl tab 40 mg .....</i>	28
<i>quinapril hcl tab 5 mg .....</i>	28
<i>quinidine gluconate tab er 324 mg .....</i>	31
<i>quinidine sulfate tab 200 mg .....</i>	31
<i>quinidine sulfate tab 300 mg .....</i>	31
<i>quinine sulfate cap 324 mg .....</i>	7
<b>R</b>	
RABAVERT INJ .....	89
<i>rabeprazole sodium ec tab 20 mg .....</i>	80
<i>raloxifene hcl tab 60 mg .....</i>	73
<i>ramelteon tab 8 mg .....</i>	56
<i>ramipril cap 1.25 mg .....</i>	28
<i>ramipril cap 10 mg .....</i>	28
<i>ramipril cap 2.5 mg .....</i>	28
<i>ramipril cap 5 mg .....</i>	28

<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i> .....	78
<i>ranolazine tab er 12hr 1000 mg</i> .....	37
<i>ranolazine tab er 12hr 500 mg</i> .....	37
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i> .....	44
<i>rasagiline mesylate tab 1 mg (base equiv)</i> .....	44
RAVICTI LIQ 1.1GM/ML .....	73
RAYALDEE CAP 30MCG.....	77
REBIF INJ 22/0.5 .....	59
REBIF INJ 44/0.5 .....	59
REBIF REBIDO INJ 22/0.5 .....	59
REBIF REBIDO INJ 44/0.5 .....	59
REBIF REBIDO INJ TITRATN.....	59
REBIF TITRTN INJ PACK .....	59
<i>reclipsen</i> .....	69
RECOMBIVA HB INJ 10MCG/ML .....	89
RECOMBIVA HB INJ 5MCG/0.5 .....	89
RECOMBIVA-HB INJ 40MCG/ML.....	89
RECTIV OIN 0.4% .....	102
REGRANEX GEL 0.01%.....	102
RELENZA MIS DISKHALE .....	10
RELISTOR INJ 12/0.6ML.....	79
RELISTOR INJ 8/0.4ML.....	79
<i>repaglinide tab 0.5 mg</i> .....	62
<i>repaglinide tab 1 mg</i> .....	62
<i>repaglinide tab 2 mg</i> .....	62
RESTASIS EMU 0.05% OP .....	94
RESTASIS MUL EMU 0.05% OP .....	94
RETEVMO CAP 40MG.....	23
RETEVMO CAP 80MG.....	23
RETEVMO TAB 120MG.....	24
RETEVMO TAB 160MG.....	24
RETEVMO TAB 40MG.....	23
RETEVMO TAB 80MG.....	23
RETROVIR INJ 10MG/ML .....	8
REVLIMID CAP 10MG .....	18
REVLIMID CAP 15MG .....	18
REVLIMID CAP 2.5MG .....	18
REVLIMID CAP 20MG .....	18
REVLIMID CAP 25MG .....	18
REVLIMID CAP 5MG .....	18
REXULTI TAB 0.25MG .....	48
REXULTI TAB 0.5MG .....	48
REXULTI TAB 1MG.....	48
REXULTI TAB 2MG .....	48
REXULTI TAB 3MG .....	48
REXULTI TAB 4MG .....	48
REYATAZ POW 50MG .....	8
REZLIDHIA CAP 150MG.....	24
REZUROCK TAB 200MG.....	88
RHOPRESA SOL 0.02% .....	93
<i>ribavirin cap 200 mg</i> .....	11
<i>ribavirin tab 200 mg</i> .....	11
RIDAURA CAP 3MG .....	86
<i>rifabutin cap 150 mg</i> .....	10
<i>rifampin cap 150 mg</i> .....	10
<i>rifampin cap 300 mg</i> .....	10
<i>rifampin for inj 600 mg</i> .....	10
<i>riluzole tab 50 mg</i> .....	58
<i>rimantadine hydrochloride tab 100 mg</i> .....	11
<i>ringer's solution</i> .....	90
<i>ringer's solution for irrigation</i> .....	102
RINVOQ TAB 15MG ER .....	85
RINVOQ TAB 30MG ER .....	85
RINVOQ TAB 45MG ER .....	85
<i>risedronate sodium tab 150 mg</i> .....	65
<i>risedronate sodium tab 30 mg</i> .....	65
<i>risedronate sodium tab 35 mg</i> .....	65
<i>risedronate sodium tab 5 mg</i> .....	65
<i>risedronate sodium tab delayed release 35 mg</i> .....	65
RISPERDAL INJ 12.5MG .....	48
RISPERDAL INJ 25MG .....	48
RISPERDAL INJ 37.5MG .....	48
RISPERDAL INJ 50MG .....	48
<i>risperidone microspheres for im extended rel susp 12.5 mg</i> .....	48
<i>risperidone microspheres for im extended rel susp 25 mg</i> .....	48
<i>risperidone microspheres for im extended rel susp 37.5 mg</i> .....	48
<i>risperidone microspheres for im extended rel susp 50 mg</i> .....	48
<i>risperidone orally disintegrating tab 0.25 mg</i> .....	48
<i>risperidone orally disintegrating tab 0.5 mg</i> .....	48
<i>risperidone orally disintegrating tab 1 mg</i> .....	48
<i>risperidone orally disintegrating tab 2 mg</i> .....	48

<i>risperidone orally disintegrating tab 3 mg</i> .....	48
<i>risperidone orally disintegrating tab 4 mg</i> .....	48
<i>risperidone soln 1 mg/ml</i> .....	49
<i>risperidone tab 0.25 mg</i> .....	49
<i>risperidone tab 0.5 mg</i> .....	49
<i>risperidone tab 1 mg</i> .....	49
<i>risperidone tab 2 mg</i> .....	49
<i>risperidone tab 3 mg</i> .....	49
<i>risperidone tab 4 mg</i> .....	49
<i>ritonavir tab 100 mg</i> .....	8
<i>RITUXAN INJ 100MG</i> .....	24
<i>RITUXAN INJ 500MG</i> .....	24
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i> .....	40
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i> .....	40
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i> .....	40
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i> .....	40
<i>rivastigmine transdermal</i> .....	40
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i> .....	56
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i> .....	56
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i> .....	56
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i> .....	56
<i>ROCKLATAN DRO</i> .....	93
<i>roflumilast tab 250 mcg</i> .....	96
<i>roflumilast tab 500 mcg</i> .....	96
<i>ropinirole hydrochloride tab 0.25 mg</i> 44	
<i>ropinirole hydrochloride tab 0.5 mg</i> ..44	
<i>ropinirole hydrochloride tab 1 mg</i> ....44	
<i>ropinirole hydrochloride tab 2 mg</i> ....44	
<i>ropinirole hydrochloride tab 3 mg</i> ....44	
<i>ropinirole hydrochloride tab 4 mg</i> ....44	
<i>ropinirole hydrochloride tab 5 mg</i> ....44	
<i>rosuvastatin calcium tab 10 mg</i> .....32	
<i>rosuvastatin calcium tab 20 mg</i> .....32	
<i>rosuvastatin calcium tab 40 mg</i> .....32	
<i>rosuvastatin calcium tab 5 mg</i> .....32	
<i>ROTARIX SUS</i> .....	89
<i>ROTATEQ SOL</i> .....	89
<i>roweepra</i> .....	53
<i>ROZLYTREK CAP 100MG</i> .....	24
<i>ROZLYTREK CAP 200MG</i> .....	24
<i>ROZLYTREK PAK 50MG</i> .....	24
<i>RUBRACA TAB 200MG</i> .....	24
<i>RUBRACA TAB 250MG</i> .....	24
<i>RUBRACA TAB 300MG</i> .....	24
<i>RUCONEST INJ 2100UNIT</i> .....	84
<i>rufinamide susp 40 mg/ml</i> .....	53
<i>rufinamide tab 200 mg</i> .....	53
<i>rufinamide tab 400 mg</i> .....	53
<i>RUKOBIA TAB 600MG ER</i> .....	8
<i>RYBELSUS TAB 14MG</i> .....	62
<i>RYBELSUS TAB 3MG</i> .....	62
<i>RYBELSUS TAB 7MG</i> .....	62
<i>RYDAPT CAP 25MG</i> .....	24
<i>RYTARY CAP 145MG</i> .....	45
<i>RYTARY CAP 195MG</i> .....	45
<i>RYTARY CAP 245MG</i> .....	45
<i>RYTARY CAP 95MG</i> .....	45
<b>S</b>	
<i>salsalate tab 500 mg</i> .....	1
<i>salsalate tab 750 mg</i> .....	1
<i>SANCUSO DIS 3.1MG</i> .....	78
<i>SANDOSTATIN KIT LAR 10MG</i> .....	73
<i>SANDOSTATIN KIT LAR 20MG</i> .....	73
<i>SANDOSTATIN KIT LAR 30MG</i> .....	73
<i>SANTYL OIN 250/GM</i> .....	102
<i>sapropterin dihydrochloride powder packet 100 mg</i> .....	73
<i>sapropterin dihydrochloride powder packet 500 mg</i> .....	74
<i>sapropterin dihydrochloride tab 100 mg</i> .....	74
<i>SCEMBLIX TAB 100MG</i> .....	24
<i>SCEMBLIX TAB 20MG</i> .....	24
<i>SCEMBLIX TAB 40MG</i> .....	24
<i>scopolamine td patch 72hr 1 mg/3days</i> .....	78
<i>SECUADO DIS 3.8MG</i> .....	49
<i>SECUADO DIS 5.7MG</i> .....	49
<i>SECUADO DIS 7.6MG</i> .....	49
<i>selegiline hcl cap 5 mg</i> .....	45
<i>selegiline hcl tab 5 mg</i> .....	45
<i>selenium sulfide lotion 2.5%</i> .....	99
<i>SELZENTRY SOL 20MG/ML</i> .....	8
<i>SELZENTRY TAB 25MG</i> .....	8

SELZENTRY TAB 75MG .....	8
SEREVENT DIS AER 50MCG .....	95
<i>sertraline hcl oral concentrate for solution 20 mg/ml .....</i>	42
<i>sertraline hcl tab 100 mg .....</i>	42
<i>sertraline hcl tab 25 mg .....</i>	42
<i>sertraline hcl tab 50 mg .....</i>	42
<i>setlakin .....</i>	69
<i>sevelamer carbonate packet 0.8 gm .74</i>	
<i>sevelamer carbonate packet 2.4 gm .74</i>	
<i>sevelamer carbonate tab 800 mg .....</i>	74
<i>sevelamer hcl tab 400 mg .....</i>	74
<i>sevelamer hcl tab 800 mg .....</i>	74
<i>sf 5000 plus .....</i>	103
<i>sharobel.....</i>	69
SHINGRIX INJ 50/0.5ML.....	89
SIGNIFOR INJ 0.3MG/ML.....	74
SIGNIFOR INJ 0.6MG/ML.....	74
SIGNIFOR INJ 0.9MG/ML.....	74
SIGNIFOR LAR INJ 20MG.....	74
SIGNIFOR LAR INJ 40MG.....	74
SIGNIFOR LAR INJ 60MG.....	74
<i>sildenafil citrate for suspension 10 mg/ml.....</i>	38
<i>sildenafil citrate tab 20 mg .....</i>	38
<i>silodosin cap 4 mg.....</i>	81
<i>silodosin cap 8 mg.....</i>	81
<i>silver sulfadiazine cream 1% .....</i>	99
SIMBRINZA SUS 1-0.2% .....	93
SIMULECT INJ 10MG.....	88
SIMULECT INJ 20MG.....	88
<i>simvastatin tab 10 mg .....</i>	32
<i>simvastatin tab 20 mg .....</i>	32
<i>simvastatin tab 40 mg .....</i>	32
<i>simvastatin tab 5 mg .....</i>	32
<i>simvastatin tab 80 mg .....</i>	32
<i>sirolimus oral soln 1 mg/ml .....</i>	88
<i>sirolimus tab 0.5 mg .....</i>	88
<i>sirolimus tab 1 mg .....</i>	88
<i>sirolimus tab 2 mg .....</i>	88
SIRTURO TAB 100MG .....	10
SIRTURO TAB 20MG .....	10
SKYRIZI INJ 150DOSE .....	85
SKYRIZI INJ 150MG/ML.....	85
SKYRIZI INJ 180/1.2 .....	85
SKYRIZI INJ 360/2.4 .....	85
SKYRIZI PEN INJ 150MG/ML .....	85
SLYND TAB 4MG .....	69
SOD OXYBATE SOL 500MG/ML.....	59
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....</i>	79
<i>sodium chloride irrigation soln 0.9%</i>	
<i>.....</i>	102
<i>sodium chloride iv soln 0.45% .....</i>	90
<i>sodium chloride iv soln 0.9% .....</i>	90
<i>sodium chloride iv soln 3%.....</i>	90
<i>sodium fluoride 2.2 mg .....</i>	91
<i>sodium polystyrene sulfonate powder .....</i>	65
<i>solifenacin succinate tab 10 mg .....</i>	81
<i>solifenacin succinate tab 5 mg .....</i>	81
SOLTAMOX SOL 10MG/5ML .....	17
SOLU-CORTEF INJ 1000MG .....	72
SOLU-CORTEF INJ 100MG .....	72
SOLU-CORTEF INJ 250MG .....	72
SOLU-CORTEF INJ 500MG .....	72
SOLU-MEDROL INJ 1000MG.....	72
SOLU-MEDROL INJ 125MG .....	72
SOLU-MEDROL INJ 2GM .....	72
SOLU-MEDROL INJ 40MG .....	72
SOLU-MEDROL INJ 500MG .....	72
SOMAVERT INJ 10MG .....	74
SOMAVERT INJ 15MG .....	74
SOMAVERT INJ 20MG .....	74
SOMAVERT INJ 25MG .....	74
SOMAVERT INJ 30MG .....	74
<i>sorafenib tosylate tab 200 mg (base equivalent) .....</i>	24
<i>sorine .....</i>	31
<i>sotalol hcl (afib/afl) tab 120 mg .....</i>	31
<i>sotalol hcl (afib/afl) tab 160 mg .....</i>	31
<i>sotalol hcl (afib/afl) tab 80 mg .....</i>	31
<i>sotalol hcl tab 120 mg .....</i>	31
<i>sotalol hcl tab 160 mg .....</i>	31
<i>sotalol hcl tab 240 mg .....</i>	31
<i>sotalol hcl tab 80 mg .....</i>	31
SOVALDI PAK 150MG.....	11
SOVALDI PAK 200MG.....	11
SOVALDI TAB 200MG .....	11
SOVALDI TAB 400MG .....	11
<i>spinosad susp 0.9% .....</i>	102
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg.....</i>	36
<i>spironolactone tab 100 mg .....</i>	28

<i>spironolactone tab 25 mg</i> .....	28
<i>spironolactone tab 50 mg</i> .....	28
<i>sprintec 28</i> .....	69
<i>SPRITAM TAB 1000MG</i> .....	54
<i>SPRITAM TAB 250MG</i> .....	53
<i>SPRITAM TAB 500MG</i> .....	54
<i>SPRITAM TAB 750MG</i> .....	54
<i>SPRYCEL TAB 100MG</i> .....	24
<i>SPRYCEL TAB 140MG</i> .....	24
<i>SPRYCEL TAB 20MG</i> .....	24
<i>SPRYCEL TAB 50MG</i> .....	24
<i>SPRYCEL TAB 70MG</i> .....	24
<i>SPRYCEL TAB 80MG</i> .....	24
<i>sps</i> .....	65
<i>sronyx</i> .....	69
<i>ssd</i> .....	99
<i>STELARA INJ 45MG/0.5</i> .....	85
<i>STELARA INJ 90MG/ML</i> .....	85
<i>STIVARGA TAB 40MG</i> .....	24
<i>streptomycin sulfate for inj 1 gm</i> .....	5
<i>STRIBILD TAB</i> .....	9
<i>subvenite</i> .....	54
<i>subvenite starter kit/blu</i> .....	54
<i>subvenite starter kit/gre</i> .....	54
<i>subvenite starter kit/ora</i> .....	54
<i>SUCRAID SOL 8500/ML</i> .....	80
<i>sucralfate susp 1 gm/10ml</i> .....	80
<i>sucralfate tab 1 gm</i> .....	80
<i>sulfacetamide sodium lotion 10% (acne)</i> .....	98
<i>sulfacetamide sodium ophth oint 10%</i> .....	92
<i>sulfacetamide sodium ophth soln 10%</i> .....	92
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i> .....	91
<i>sulfadiazine tab 500 mg</i> .....	5
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i> .....	5
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i> .....	5
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i> .....	5
<i>SULFAMYLYON CRE 85MG/GM</i> .....	99
<i>sulfasalazin tab 500mg dr</i> .....	79
<i>sulfasalazine tab 500 mg</i> .....	79
<i>sumatriptan nasal spray 20 mg/act</i> .....	57
<i>sumatriptan nasal spray 5 mg/act</i> .....	57
<i>sumatriptan succinate inj 6 mg/0.5ml</i> .....	57
<i>sumatriptan succinate tab 100 mg</i> .....	57
<i>sumatriptan succinate tab 25 mg</i> .....	57
<i>sumatriptan succinate tab 50 mg</i> .....	57
<i>sunitinib malate cap 12.5 mg (base equivalent)</i> .....	24
<i>sunitinib malate cap 25 mg (base equivalent)</i> .....	24
<i>sunitinib malate cap 37.5 mg (base equivalent)</i> .....	24
<i>sunitinib malate cap 50 mg (base equivalent)</i> .....	24
<i>SUNLENCA INJ</i> .....	8
<i>SUNLENCA TAB 300MG</i> .....	8
<i>syeda tab 3-0.03mg</i> .....	69
<i>SYMDEKO TAB 50-75MG</i> .....	96
<i>SYMLINPEN 60 INJ 1000MCG</i> .....	63
<i>SYMLNPEN 120 INJ 1000MCG</i> .....	63
<i>SYMPAZAN MIS 10MG</i> .....	54
<i>SYMPAZAN MIS 20MG</i> .....	54
<i>SYMPAZAN MIS 5MG</i> .....	54
<i>SYMPROIC TAB 0.2MG</i> .....	80
<i>SYMTUZA TAB</i> .....	9
<i>SYNAGIS INJ 100MG/ML</i> .....	87
<i>SYNAREL SOL 2MG/ML</i> .....	69
<i>SYNERCID INJ 500MG</i> .....	5
<i>SYNJARDY TAB 12.5-1000MG</i> .....	63
<i>SYNJARDY TAB 12.5-500</i> .....	63
<i>SYNJARDY TAB 5-1000MG</i> .....	63
<i>SYNJARDY TAB 5-500MG</i> .....	63
<i>SYNJARDY XR TAB 10-1000</i> .....	63
<i>SYNJARDY XR TAB 12.5-1000MG</i> .....	63
<i>SYNJARDY XR TAB 25-1000</i> .....	63
<i>SYNJARDY XR TAB 5-1000MG</i> .....	63
<i>SYNTHROID TAB 100MCG</i> .....	76
<i>SYNTHROID TAB 112MCG</i> .....	76
<i>SYNTHROID TAB 125MCG</i> .....	76
<i>SYNTHROID TAB 137MCG</i> .....	76
<i>SYNTHROID TAB 150MCG</i> .....	76
<i>SYNTHROID TAB 175MCG</i> .....	76
<i>SYNTHROID TAB 200MCG</i> .....	76
<i>SYNTHROID TAB 25MCG</i> .....	76
<i>SYNTHROID TAB 300MCG</i> .....	76
<i>SYNTHROID TAB 50MCG</i> .....	76
<i>SYNTHROID TAB 75MCG</i> .....	76

SYNTHROID TAB 88MCG .....	76
<b>T</b>	
TABLOID TAB 40MG.....	17
TABRECTA TAB 150MG.....	24
TABRECTA TAB 200MG.....	24
<i>tacrolimus cap 0.5 mg</i> .....	88
<i>tacrolimus cap 1 mg</i> .....	88
<i>tacrolimus cap 5 mg</i> .....	88
<i>tacrolimus oint 0.03%</i> .....	102
<i>tacrolimus oint 0.1%</i> .....	102
<i>tadalafil tab 2.5 mg</i> .....	81
<i>tadalafil tab 20 mg (pah)</i> .....	38
<i>tadalafil tab 5 mg</i> .....	81
TAFINLAR CAP 50MG .....	24
TAFINLAR CAP 75MG .....	24
TAFINLAR TAB 10MG .....	24
TAGRISSO TAB 40MG .....	24
TAGRISSO TAB 80MG .....	24
TAKHYRO INJ 150MG/ML.....	84
TAKHYRO INJ 300/2ML.....	84
TALICIA CAP.....	80
TALTZ INJ 20/0.25 .....	85
TALTZ INJ 40/0.5ML .....	85
TALTZ INJ 80MG/ML .....	85
TALZENNA CAP 0.1MG .....	24
TALZENNA CAP 0.25MG .....	24
TALZENNA CAP 0.35MG .....	24
TALZENNA CAP 0.5MG .....	24
TALZENNA CAP 0.75MG .....	24
TALZENNA CAP 1MG .....	24
<i>tamoxifen citrate tab 10 mg (base equivalent)</i> .....	17
<i>tamoxifen citrate tab 20 mg (base equivalent)</i> .....	18
<i>tamsulosin hcl cap 0.4 mg</i> .....	81
<i>tanlor tab 1000mg</i> .....	59
TARGETIN GEL 1% .....	102
<i>tarina 24 fe</i> .....	69
<i>tarina fe 1/20 eq</i> .....	69
TASIGNA CAP 150MG.....	24
TASIGNA CAP 200MG.....	24
TASIGNA CAP 50MG .....	24
<i>tasimelteon capsule 20 mg</i> .....	56
TAVNEOS CAP 10MG.....	84
<i>tazarotene cream 0.1%</i> .....	99
<i>tazarotene gel 0.05%</i> .....	99
<i>tazarotene gel 0.1%</i> .....	99
<i>tazicef</i> .....	12
TAZVERIK TAB 200MG .....	24
TDVAX INJ 2-2 LF.....	89
TECENTRIQ INJ 1200/20 .....	25
TECVAYLI INJ 153/1.7 .....	25
TECVAYLI INJ 30MG/3ML .....	25
TEFLARO INJ 400MG.....	12
TEFLARO INJ 600MG.....	12
TEGSEDI INJ 284/1.5 .....	58
<i>telmisartan tab 20 mg</i> .....	30
<i>telmisartan tab 40 mg</i> .....	30
<i>telmisartan tab 80 mg</i> .....	30
<i>telmisartan-amlodipine tab 40-10 mg</i> .....	29
<i>telmisartan-amlodipine tab 40-5 mg</i> .....	29
<i>telmisartan-amlodipine tab 80-10 mg</i> .....	29
<i>telmisartan-amlodipine tab 80-5 mg</i> .....	29
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i> .....	29
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i> .....	29
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i> .....	29
<i>temazepam cap 15 mg</i> .....	56
<i>temazepam cap 22.5 mg</i> .....	56
<i>temazepam cap 30 mg</i> .....	56
<i>temazepam cap 7.5 mg</i> .....	56
TEMIXYS TAB 300-300.....	9
<i>tencon</i> .....	1
TENIVAC INJ 5-2LF.....	89
<i>tenofovir disoproxil fumarate tab 300 mg</i> .....	8
TEPMETKO TAB 225MG .....	25
<i>terazosin hcl cap 1 mg (base equivalent)</i> .....	28
<i>terazosin hcl cap 10 mg (base equivalent)</i> .....	28
<i>terazosin hcl cap 2 mg (base equivalent)</i> .....	28
<i>terazosin hcl cap 5 mg (base equivalent)</i> .....	28
<i>terbinafine hcl tab 250 mg</i> .....	7
<i>terbutaline sulfate inj 1 mg/ml</i> .....	95
<i>terbutaline sulfate tab 2.5 mg</i> .....	95
<i>terbutaline sulfate tab 5 mg</i> .....	95
<i>terconazole vaginal cream 0.4%</i> .....	82

terconazole vaginal cream 0.8% .....	82
terconazole vaginal suppos 80 mg .....	82
teriflunomide tab 14 mg .....	59
teriflunomide tab 7 mg .....	59
TERIPARATIDE INJ 620/2.48.....	65
teriparatide soln pen-inj 600 mcg/2.4ml.....	65
testosterone cypionate im inj in oil 100 mg/ml.....	60
testosterone cypionate im inj in oil 200 mg/ml.....	60
testosterone enanthate im inj in oil 200 mg/ml.....	60
testosterone td gel 10mg/act (2%)...	60
testosterone td gel 12.5 mg/act (1%) .....	60
testosterone td gel 20.25 mg/1.25gm (1.62%) .....	61
testosterone td gel 20.25 mg/act (1.62%) .....	61
testosterone td gel 25 mg/2.5gm (1%) .....	61
testosterone td gel 40.5 mg/2.5gm (1.62%) .....	61
testosterone td gel 50 mg/5gm (1%)	61
testosterone td soln 30 mg/act .....	61
tetrabenazine tab 12.5 mg .....	58
tetrabenazine tab 25 mg .....	58
tetracycline hcl cap 250 mg .....	15
tetracycline hcl cap 500 mg .....	15
THALOMID CAP 100MG .....	18
THALOMID CAP 150MG .....	18
THALOMID CAP 200MG .....	18
THALOMID CAP 50MG .....	18
THEO-24 CAP 100MG CR .....	96
THEO-24 CAP 200MG CR .....	96
theophylline tab er 12hr 100 mg .....	96
theophylline tab er 12hr 200 mg .....	97
theophylline tab er 12hr 300 mg .....	97
theophylline tab er 12hr 450 mg .....	97
theophylline tab er 24hr 400 mg .....	97
theophylline tab er 24hr 600 mg .....	97
thioridazine hcl tab 10 mg .....	49
thioridazine hcl tab 100 mg .....	49
thioridazine hcl tab 25 mg .....	49
thioridazine hcl tab 50 mg .....	49
thiotepa for inj 15 mg .....	16

thiothixene cap 1 mg .....	49
thiothixene cap 10 mg .....	49
thiothixene cap 2 mg .....	49
thiothixene cap 5 mg .....	49
THYMOGLOBULN INJ 25MG.....	88
tiadylt er .....	35
tiagabine hcl tab 12 mg .....	54
tiagabine hcl tab 16 mg .....	54
tiagabine hcl tab 2 mg .....	54
tiagabine hcl tab 4 mg .....	54
TIBSOVO TAB 250MG .....	25
TICOVAC INJ .....	89
tigecycline for iv soln 50 mg .....	15
tilia fe .....	69
timolol maleate ophth gel forming soln 0.25% .....	93
timolol maleate ophth gel forming soln 0.5% .....	93
timolol maleate ophth soln 0.25% ....	93
timolol maleate ophth soln 0.5% ....	93
timolol maleate preservative free ophth soln 0.25% .....	93
timolol maleate preservative free ophth soln 0.5%.....	93
timolol maleate tab 10 mg .....	34
timolol maleate tab 20 mg .....	34
timolol maleate tab 5 mg .....	34
tinidazole tab 250 mg .....	5
tinidazole tab 500 mg .....	5
tiopronin tab 100 mg .....	81
TIROSINT CAP 100MCG .....	76
TIROSINT CAP 112MCG .....	76
TIROSINT CAP 125MCG .....	76
TIROSINT CAP 137MCG .....	76
TIROSINT CAP 13MCG .....	76
TIROSINT CAP 150MCG .....	76
TIROSINT CAP 175MCG .....	76
TIROSINT CAP 200 .....	76
TIROSINT CAP 25MCG .....	76
TIROSINT CAP 37.5MCG .....	76
TIROSINT CAP 44MCG .....	76
TIROSINT CAP 50MCG .....	76
TIROSINT CAP 62.5MCG .....	76
TIROSINT CAP 75MCG .....	76
TIROSINT CAP 88MCG .....	76
TIROSINT-SOL SOL 100MCG .....	76
TIROSINT-SOL SOL 112MCG .....	76

TIROSINT-SOL SOL 125MCG.....	76
TIROSINT-SOL SOL 137MCG.....	76
TIROSINT-SOL SOL 13MCG/ML .....	76
TIROSINT-SOL SOL 150MCG.....	76
TIROSINT-SOL SOL 175MCG.....	76
TIROSINT-SOL SOL 200MCG.....	77
TIROSINT-SOL SOL 25MCG/ML .....	76
TIROSINT-SOL SOL 37.5/ML.....	76
TIROSINT-SOL SOL 44MCG/ML .....	76
TIROSINT-SOL SOL 50MCG/ML .....	76
TIROSINT-SOL SOL 62.5/ML.....	76
TIROSINT-SOL SOL 75MCG/ML .....	76
TIROSINT-SOL SOL 88MCG/ML .....	76
TIVICAY PD TAB 5MG.....	8
TIVICAY TAB 10MG.....	8
TIVICAY TAB 25MG.....	8
TIVICAY TAB 50MG.....	8
tizanidine hcl tab 2 mg (base equivalent) .....	59
tizanidine hcl tab 4 mg (base equivalent) .....	59
TOBI PODHALR CAP 28MG.....	5
TOBRADEX OIN 0.3-0.1% .....	91
tobramycin nebu soln 300 mg/4ml ....	5
tobramycin nebu soln 300 mg/5ml ....	5
tobramycin ophth soln 0.3% .....	92
tobramycin sulfate inj 10 mg/ml (base equivalent) .....	5
tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv) .....	6
tobramycin-dexamethasone ophth susp 0.3-0.1%.....	91
TOBREX OIN 0.3% OP .....	92
tolcapone tab 100 mg .....	45
tolterodine tartrate cap er 24hr 2 mg	81
tolterodine tartrate cap er 24hr 4 mg	81
tolterodine tartrate tab 1 mg .....	81
tolterodine tartrate tab 2 mg .....	81
tolvaptan tab 15 mg .....	74
tolvaptan tab 30 mg .....	74
topiramate cap er 24hr 100 mg.....	54
topiramate cap er 24hr 200 mg.....	54
topiramate cap er 24hr 25 mg .....	54
topiramate cap er 24hr 50 mg .....	54
topiramate sprinkle cap 15 mg .....	54
topiramate sprinkle cap 25 mg .....	54
topiramate tab 100 mg .....	54
topiramate tab 200 mg .....	54
topiramate tab 25 mg .....	54
topiramate tab 50 mg .....	54
toposar .....	19
topotecan hcl for inj 4 mg (base equiv) .....	19
toremifene citrate tab 60 mg (base equivalent) .....	18
TORISEL INJ 25MG/ML.....	25
torpenz tab 10mg.....	25
torpenz tab 2.5mg.....	25
torpenz tab 5mg .....	25
torpenz tab 7.5mg.....	25
torsemide tab 10 mg .....	36
torsemide tab 100 mg .....	36
torsemide tab 20 mg .....	36
torsemide tab 5 mg .....	36
TOUJEO MAX INJ 300/ML .....	64
TOUJEO SOLO INJ 300/ML.....	64
tovet .....	101
TRADJENTA TAB 5MG .....	63
tramadol hcl tab 100 mg .....	4
tramadol hcl tab 50 mg .....	4
tramadol-acetaminophen tab 37.5-325 mg .....	4
trandolapril tab 1 mg .....	28
trandolapril tab 2 mg .....	28
trandolapril tab 4 mg .....	28
trandolapril-verapamil hcl tab er 1-240 mg .....	27
trandolapril-verapamil hcl tab er 2-180 mg .....	27
trandolapril-verapamil hcl tab er 2-240 mg .....	27
trandolapril-verapamil hcl tab er 4-240 mg .....	27
tranexamic acid iv soln 1000 mg/10ml (100 mg/ml) .....	84
tranexamic acid tab 650 mg .....	84
tranylcypromine sulfate tab 10 mg ...	42
TRAVASOL INJ 10%.....	91
travoprost ophth soln 0.004% (benzalkonium free) (bak free) .....	93
trazodone hcl tab 100 mg .....	42
trazodone hcl tab 150 mg .....	42
trazodone hcl tab 300 mg .....	43
trazodone hcl tab 50 mg .....	42

TREANDA INJ 100MG .....	16
TREANDA INJ 25MG.....	16
TRECATOR TAB 250MG .....	10
TRELEGY AER 100MCG .....	94
TRELEGY AER 200MCG .....	94
TRELSTAR MIX INJ 11.25MG.....	18
TRELSTAR MIX INJ 22.5MG.....	18
TRELSTAR MIX INJ 3.75MG.....	18
TRESIBA FLEX INJ 100UNIT .....	64
TRESIBA FLEX INJ 200UNIT .....	64
TRESIBA INJ 100UNIT.....	64
<i>tretinoin cap 10 mg .....</i>	19
<i>tretinoin cream 0.025% .....</i>	98
<i>tretinoin cream 0.05% .....</i>	98
<i>tretinoin cream 0.1%.....</i>	98
<i>tretinoin gel 0.01% .....</i>	98
<i>tretinoin gel 0.025% .....</i>	98
<i>tretinoin gel 0.05% .....</i>	98
<i>triamicinolone acetonide cream 0.025%</i> .....	101
<i>triamicinolone acetonide cream 0.1%</i> .....	101
<i>triamicinolone acetonide cream 0.5%</i> .....	101
<i>triamicinolone acetonide dental paste 0.1% .....</i>	103
<i>triamicinolone acetonide lotion 0.025%</i> .....	101
<i>triamicinolone acetonide lotion 0.1%</i> .....	101
<i>triamicinolone acetonide oint 0.025%</i> .....	101
<i>triamicinolone acetonide oint 0.1% .</i>	101
<i>triamicinolone acetonide oint 0.5% .</i>	101
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg .....</i>	36
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg .....</i>	36
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg .....</i>	36
<i>triamterene cap 100 mg.....</i>	36
<i>triamterene cap 50 mg .....</i>	36
<i>tridacaine pad 5% .....</i>	101
<i>triderm .....</i>	101
<i>triderm cre 0.1%.....</i>	101
<i>trientine hcl cap 250 mg .....</i>	65
<i>trientine hcl cap 500 mg .....</i>	65
<i>tri-estaryll tab.....</i>	69
<i>trifluoperazine hcl tab 1 mg (base equivalent) .....</i>	49
<i>trifluoperazine hcl tab 10 mg (base equivalent) .....</i>	49
<i>trifluoperazine hcl tab 2 mg (base equivalent) .....</i>	49
<i>trifluoperazine hcl tab 5 mg (base equivalent) .....</i>	49
<i>trifluridine ophth soln 1%.....</i>	92
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml .....</i>	45
<i>trihexyphenidyl hcl tab 2 mg .....</i>	45
<i>trihexyphenidyl hcl tab 5 mg .....</i>	45
<i>TRIJARDY XR TAB ER 24HR 10-5- 1000MG .....</i>	63
<i>TRIJARDY XR TAB ER 24HR 12.5-2.5- 1000MG .....</i>	63
<i>TRIJARDY XR TAB ER 24HR 25-5- 1000MG .....</i>	63
<i>TRIJARDY XR TAB ER 24HR 5-2.5- 1000MG .....</i>	63
<i>TRIKAFTA TAB .....</i>	97
<i>tri-legest fe .....</i>	69
<i>trimethoprim tab 100 mg .....</i>	6
<i>tri-mili tab .....</i>	69
<i>trimipramine maleate cap 100 mg....</i>	43
<i>trimipramine maleate cap 25 mg....</i>	43
<i>trimipramine maleate cap 50 mg....</i>	43
<i>TRINTELLIX TAB 10MG .....</i>	43
<i>TRINTELLIX TAB 20MG .....</i>	43
<i>TRINTELLIX TAB 5MG .....</i>	43
<i>tri-nymyo .....</i>	69
<i>tri-sprintec .....</i>	69
<i>TRIUMEQ PD TAB .....</i>	9
<i>TRIUMEQ TAB .....</i>	9
<i>trivora-28 .....</i>	69
<i>tri-vylibra tab .....</i>	69
<i>TROPHAMINE INJ 10%.....</i>	91
<i>trospium chloride cap er 24hr 60 mg</i>	81
<i>trospium chloride tab 20 mg .....</i>	81
<i>TRULICITY INJ 0.75/0.5 .....</i>	63
<i>TRULICITY INJ 1.5/0.5 .....</i>	63
<i>TRULICITY INJ 3/0.5.....</i>	63
<i>TRULICITY INJ 4.5/0.5 .....</i>	63
<i>TRUMENBA INJ .....</i>	89
<i>TRUQAP PAK 160MG .....</i>	25

TRUQAP PAK 200MG .....	25
TRUQAP TAB 160MG .....	25
TRUQAP TAB 200MG .....	25
TRUSELTIQ CAP 100MG .....	25
TRUSELTIQ CAP 125MG .....	25
TRUSELTIQ CAP 50MG .....	25
TRUSELTIQ CAP 75MG .....	25
TUKYSA TAB 150MG .....	25
TUKYSA TAB 50MG .....	25
TURALIO CAP 125MG .....	25
TURALIO CAP 200MG .....	25
<i>turqoz tab</i> .....	69
TWINRIX INJ .....	89
TYBLUME CHW 0.1-0.02 .....	69
TYBOST TAB 150MG .....	8
<i>tydemy</i> .....	69
TYPHIM VI INJ .....	89
TYSABRI INJ 300/15ML .....	59
TYVASO DPI POW 16-32-48 .....	38
TYVASO DPI POW 16-32MCG .....	38
TYVASO DPI POW 16MCG .....	38
TYVASO DPI POW 32-48MCG .....	38
TYVASO DPI POW 32MCG .....	38
TYVASO DPI POW 48MCG .....	38
TYVASO DPI POW 64MCG .....	38

**U**

UBRELVY TAB 100MG .....	57
UBRELVY TAB 50MG .....	57
UDENYCA INJ 6MG/.6ML .....	83
UDENYCA INJ 6MG/0.6 .....	83
UKONIQ TAB 200MG .....	25
<i>unithroid</i> .....	77
UPTRAVI TAB 1000MCG .....	38
UPTRAVI TAB 1200MCG .....	38
UPTRAVI TAB 1400MCG .....	38
UPTRAVI TAB 1600MCG .....	38
UPTRAVI TAB 200MCG .....	38
UPTRAVI TAB 400MCG .....	38
UPTRAVI TAB 600MCG .....	38
UPTRAVI TAB 800MCG .....	38
<i>ursodiol cap 300 mg</i> .....	80
<i>ursodiol tab 250 mg</i> .....	80
<i>ursodiol tab 500 mg</i> .....	80
UZEDY INJ 100MG .....	49
UZEDY INJ 125MG .....	49
UZEDY INJ 150MG .....	49
UZEDY INJ 200MG .....	49

UZEDY INJ 250MG .....	49
UZEDY INJ 50MG .....	49
UZEDY INJ 75MG .....	49

**V**

<i>valacyclovir hcl tab 1 gm</i> .....	11
<i>valacyclovir hcl tab 500 mg</i> .....	11
VALCHLOR GEL 0.016% .....	102
<i>valganciclovir hcl tab 450 mg (base equivalent)</i> .....	11
<i>valproate sodium inj 100 mg/ml</i> .....	54
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i> .....	54
<i>valproic acid cap 250 mg</i> .....	54
<i>valsartan tab 160 mg</i> .....	30
<i>valsartan tab 320 mg</i> .....	30
<i>valsartan tab 40 mg</i> .....	30
<i>valsartan tab 80 mg</i> .....	30
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i> .....	30
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i> .....	30
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i> .....	30
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i> .....	30
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i> .....	30
VALTOCO SPR 10MG .....	54
VALTOCO SPR 15MG .....	54
VALTOCO SPR 20MG .....	54
VALTOCO SPR 5MG .....	54
<i>vancomycin hcl cap 125 mg (base equivalent)</i> .....	6
<i>vancomycin hcl cap 250 mg (base equivalent)</i> .....	6
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i> .....	6
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i> .....	6
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i> .....	6
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i> .....	6
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i> .....	6
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i> .....	6

<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i> .....	6
VANDAZOLE GEL 0.75%.....	82
VANFLYTA TAB 17.7MG .....	25
VANFLYTA TAB 26.5MG .....	25
VAQTA INJ 25/0.5ML .....	89
VAQTA INJ 50UNT/ML .....	89
<i>varenicline tartrate tab 0.5 mg (base equiv)</i> .....	60
<i>varenicline tartrate tab 1 mg (base equiv)</i> .....	60
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i> .....	60
VARIVAX INJ.....	89
VARUBI TAB 90MG .....	78
VASCEPA CAP 0.5GM .....	32
VASCEPA CAP 1GM .....	32
VAXCHORA SUS .....	89
VECTIBIX INJ 100MG .....	25
VECTIBIX INJ 400MG .....	25
<i>velivet</i> .....	69
VELTASSA POW 16.8GM.....	66
VELTASSA POW 25.2GM.....	66
VELTASSA POW 8.4GM.....	66
VENCLEXTA TAB 100MG .....	25
VENCLEXTA TAB 10MG.....	25
VENCLEXTA TAB 50MG.....	25
VENCLEXTA TAB START PK .....	25
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab 100 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab 25 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab 50 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab 75 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i> .....	43
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i> .....	43
VENLAFAKINE TAB 112.5MG.....	43
VENTAVIS SOL 10MCG/ML .....	38
VENTAVIS SOL 20MCG/ML .....	38
VENTOLIN HFA AER .....	95
<i>verapamil hcl cap er 24hr 100 mg</i> .....	35
<i>verapamil hcl cap er 24hr 120 mg</i> .....	35
<i>verapamil hcl cap er 24hr 180 mg</i> .....	35
<i>verapamil hcl cap er 24hr 200 mg</i> .....	35
<i>verapamil hcl cap er 24hr 240 mg</i> .....	35
<i>verapamil hcl cap er 24hr 300 mg</i> .....	35
<i>verapamil hcl cap er 24hr 360 mg</i> .....	35
<i>verapamil hcl tab 120 mg</i> .....	35
<i>verapamil hcl tab 40 mg</i> .....	35
<i>verapamil hcl tab 80 mg</i> .....	35
<i>verapamil hcl tab er 120 mg</i> .....	35
<i>verapamil hcl tab er 180 mg</i> .....	35
<i>verapamil hcl tab er 240 mg</i> .....	35
VERDESO AER 0.05% .....	101
VERQUVO TAB 10MG .....	37
VERQUVO TAB 2.5MG .....	37
VERQUVO TAB 5MG .....	37
VERSACLOZ SUS 50MG/ML.....	49
VERZENIO TAB 100MG.....	25
VERZENIO TAB 150MG.....	25
VERZENIO TAB 200MG.....	25
VERZENIO TAB 50MG .....	25
<i>vestura</i> .....	69
V-GO 20 KIT .....	64
V-GO 30 KIT .....	64
V-GO 40 KIT .....	64
<i>vienna</i> .....	69
<i>vigabatrin powd pack 500 mg</i> .....	54
<i>vigabatrin tab 500 mg</i> .....	54
<i>vigadrone</i> .....	54
<i>vigadrone tab 500mg</i> .....	54
VIGAFYDE SOL 100MG/ML.....	54
<i>vigpoder pow 500mg</i> .....	54
VIJOICE GRA 50MG .....	74
VIJOICE TAB 125MG .....	74
VIJOICE TAB 250MG .....	74
VIJOICE TAB 50MG.....	74

<i>vilazodone hcl tab 10 mg</i>	43
<i>vilazodone hcl tab 20 mg</i>	43
<i>vilazodone hcl tab 40 mg</i>	43
VIMPAT INJ 200MG/20	54
VIMPAT SOL 10MG/ML	54
VIMPAT TAB 100MG	54
VIMPAT TAB 150MG	54
VIMPAT TAB 200MG	54
VIMPAT TAB 50MG	54
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	19
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	19
VIRACEPT TAB 250MG	8
VIRACEPT TAB 625MG	8
VIREAD POW 40MG/GM	8
VIREAD TAB 150MG	8
VIREAD TAB 200MG	8
VIREAD TAB 250MG	8
VITRAKVI CAP 100MG	25
VITRAKVI CAP 25MG	25
VITRAKVI SOL 20MG/ML	25
VIVITROL INJ 380MG	60
VIZIMPRO TAB 15MG	25
VIZIMPRO TAB 30MG	25
VIZIMPRO TAB 45MG	25
VONJO CAP 100MG	25
VORANIGO TAB 10MG	25
VORANIGO TAB 40MG	26
<i>voriconazole for inj 200 mg</i>	7
<i>voriconazole for susp 40 mg/ml</i>	7
<i>voriconazole tab 200 mg</i>	7
<i>voriconazole tab 50 mg</i>	7
VOSEVI TAB	11
VOTRIENT TAB 200MG	26
VOWST CAP	80
VRAYLAR CAP 1.5MG	49
VRAYLAR CAP 3MG	49
VRAYLAR CAP 4.5MG	49
VRAYLAR CAP 6MG	49
VUMERTY CAP 231MG	59
VUMERTY STARTER	59
<i>vyfemla</i>	69
<i>vylbra tab 0.25-35</i>	69
VYNDAMAX CAP 61MG	37
VYZULTA SOL 0.024%	93

## W

WAKIX TAB 17.8MG	59
WAKIX TAB 4.45MG	59
<i>warfarin sodium tab 1 mg</i>	83
<i>warfarin sodium tab 10 mg</i>	83
<i>warfarin sodium tab 2 mg</i>	83
<i>warfarin sodium tab 2.5 mg</i>	83
<i>warfarin sodium tab 3 mg</i>	83
<i>warfarin sodium tab 4 mg</i>	83
<i>warfarin sodium tab 5 mg</i>	83
<i>warfarin sodium tab 6 mg</i>	83
<i>warfarin sodium tab 7.5 mg</i>	83
<i>water for irrigation, sterile irrigation soln</i>	102

WELIREG TAB 40MG	19
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<i>wixela inhub</i>	98
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<i>wymzya fe</i>	69
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## X

XALKORI CAP 150MG	26
XALKORI CAP 200MG	26
XALKORI CAP 20MG	26
XALKORI CAP 250MG	26
XALKORI CAP 50MG	26
XARELTO STAR TAB 15/20MG	83
XARELTO SUS 1MG/ML	83
XARELTO TAB 10MG	83
XARELTO TAB 15MG	83
XARELTO TAB 2.5MG	83
XARELTO TAB 20MG	83
XATMEP SOL 2.5MG/ML	86
XCOPRI PAK 100-150	55
XCOPRI PAK 12.5-25	55
XCOPRI PAK 150-200MG (MAINTENANCE)	55

XCOPRI PAK 150-200MG (TITRATION)	55
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XCOPRI PAK 50-100MG	55
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XCOPRI TAB 100MG	55
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XCOPRI TAB 150MG	55
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XCOPRI TAB 200MG	55
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XCOPRI TAB 25MG	55
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XCOPRI TAB 50MG	55
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XELJANZ SOL 1MG/ML	85
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XELJANZ TAB 10MG	85
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XELJANZ TAB 5MG	85
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XELJANZ XR TAB 11MG	85
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XELJANZ XR TAB 22MG	85
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XENLETA TAB 600MG.....	6
XERMELO TAB 250MG .....	80
XGEVA INJ.....	65
XHANCE MIS 93MCG.....	97
XIFAXAN TAB 200MG .....	6
XIFAXAN TAB 550MG .....	80
XIGDUO XR TAB 10-1000 .....	63
XIGDUO XR TAB 10-500MG .....	63
XIGDUO XR TAB 2.5-1000 .....	63
XIGDUO XR TAB 5-1000MG .....	63
XIGDUO XR TAB 5-500MG .....	63
XXIDRA DRO 5% .....	94
XOFLUZA TAB 40MG .....	11
XOFLUZA TAB 80MG .....	11
XOLAIR INJ 150MG/ML.....	97
XOLAIR INJ 300/2ML .....	97
XOLAIR INJ 75/0.5 .....	97
XOLAIR SOL 150MG.....	97
XOSPATA TAB 40MG .....	26
XPOVIO 40 MG TWICE WEEKLY .....	26
XPOVIO PAK 40MG .....	26
XPOVIO PAK 50MG .....	26
XPOVIO PAK 60MG .....	26
XPOVIO PAK 80MG .....	26
XTANDI CAP 40MG .....	18
XTANDI TAB 40MG .....	18
XTANDI TAB 80MG .....	18
xulane .....	69
XULTOPHY INJ 100/3.6 .....	64
XYREM SOL 500MG/ML .....	59
<b>Y</b>	
YF-VAX INJ.....	89
YONDELIS INJ 1MG .....	16
YONSA TAB 125MG.....	18
YUPELRI SOL .....	94
yuvafem.....	70
<b>Z</b>	
zafemy.....	69
zafirlukast tab 10 mg .....	95
zafirlukast tab 20 mg .....	95
zaleplon cap 10 mg .....	56
zaleplon cap 5 mg .....	56
ZANOSAR INJ 1GM .....	16
ZEJULA TAB 100MG .....	26
ZEJULA TAB 200MG .....	26
ZEJULA TAB 300MG .....	26
ZELBORAF TAB 240MG.....	26
ZEMAIRA INJ 1000MG.....	97
ZEMDRI INJ 500MG/10 .....	6
zenatane cap 10mg .....	98
zenatane cap 20mg .....	98
zenatane cap 30mg .....	98
zenatane cap 40mg .....	98
ZENPEP CAP 10000UNT.....	80
ZENPEP CAP 15000UNT.....	80
ZENPEP CAP 20000UNT.....	80
ZENPEP CAP 25000UNT.....	80
ZENPEP CAP 3000UNIT .....	80
ZENPEP CAP 40000UNT.....	80
ZENPEP CAP 5000UNIT .....	80
ZENPEP CAP 60000UNT.....	80
ZEPATIER TAB 50-100MG.....	11
ZERVIATE DRO 0.24% .....	92
zidovudine cap 100 mg .....	8
zidovudine syrup 10 mg/ml .....	8
zidovudine tab 300 mg .....	8
ZIMHI SOL .....	60
ziprasidone hcl cap 20 mg .....	49
ziprasidone hcl cap 40 mg .....	49
ziprasidone hcl cap 60 mg .....	49
ziprasidone hcl cap 80 mg .....	49
ziprasidone mesylate for inj 20 mg (base equivalent) .....	49
ZIRGAN GEL 0.15%.....	92
zoledronic acid inj conc for iv infusion 4 mg/5ml.....	65
zoledronic acid iv soln 5 mg/100ml...65	65
ZOLINZA CAP 100MG.....	26
zolmitriptan nasal spray 2.5 mg/spray unit .....	57
zolmitriptan nasal spray 5 mg/spray unit .....	57
zolmitriptan odt tab 2.5 mg .....	57
zolmitriptan odt tab 5 mg .....	57
zolmitriptan tab 2.5 mg .....	57
zolmitriptan tab 5 mg .....	57
zolpidem tartrate tab 10 mg .....	56
zolpidem tartrate tab 5 mg .....	56
zolpidem tartrate tab er 12.5 mg .....	56
zolpidem tartrate tab er 6.25 mg .....	56
ZONISADE SUS 100MG/5.....	55
zonisamide cap 100 mg .....	55
zonisamide cap 25 mg .....	55
zonisamide cap 50 mg .....	55

<i>zovia</i> 1/35 .....	69	ZYDELIG TAB 100MG .....	26
ZTALMY SUS 50MG/ML.....	55	ZYDELIG TAB 150MG .....	26
ZURZUVAE CAP 20MG .....	58	ZYKADIA TAB 150MG.....	26
ZURZUVAE CAP 25MG .....	58	ZYPREXA RELP INJ 210MG.....	49
ZURZUVAE CAP 30MG .....	58	ZYPREXA RELP INJ 300MG.....	49
ZYCLARA PUMP CRE 2.5% .....	102	ZYPREXA RELP INJ 405MG.....	49

This Formulary was updated on December 1, 2024. For more recent information or other questions, please contact the MVP Member Services/Customer Care Center.

**For MVP DualAccess (HMO D-SNP) members:**

**1-866-954-1872**

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