

MVP Health Care[®]

2023 Medicare Part D Formulary

(List of Covered Drugs)

Please Read: This document contains information about the drugs we cover in this plan. This Formulary was updated on January 1, 2023. For more recent information or questions, please contact the MVP Medicare 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.

Important Message About What You Pay for Insulin: You won't pay more than \$35 for a one-month supply of each insulin covered by our plan, no matter what cost-sharing tier it's on, 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 2023 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 Medicare Customer Care Center at **1-800-665-7924** for additional information.

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 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 UVM Health Advantage Select (PPO), UVM Health Advantage Secure (PPO), and UVM Health Advantage Preferred (PPO).

This document includes a list of the drugs (Formulary) for our plan which is current as of January 1, 2023. 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, 2024, 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 the how to request an exception, and you can also find information in the section entitled "How do I request an exception to the MVP Medicare Part D 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 Medicare Part D Formulary?"

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

Generally, if you are taking a drug on our 2023 Formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2023 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 January 1, 2023. 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. 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, start at our home page and:

- Select *Members*, then *Medicare*
- Choose *Drug Coverage (Part D)*
- Select *Covered Drugs and Formulary*
- Select *Monthly Medicare Formulary Updates*

Or you may request an errata sheet (a copy of the 2023 Formulary changes) by calling the MVP Medicare 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 107. 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 Medicare Part D 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 Medicare 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 Medicare 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**.

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 107.

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

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	Tier 2	Tier 3	Tier 4	Tier 5
		Preferred Generic Drugs	Generic Drugs	Preferred Brand Name Drugs	Non-Preferred Drugs	Specialty Drugs
UVM Health Advantage Preferred						
	\$0	\$0	\$10	\$40	\$100	27%
UVM Health Advantage Secure <i>What you pay after deductible is met</i>						
	\$150	\$0	\$10	\$42	\$100	27%
UVM Health Advantage Select <i>What you pay after deductible is met</i>						
	\$250	\$0	\$10	\$47	\$100	28%

UVM Health Advantage Preferred, UVM Health Advantage Secure, and UVM Health Advantage Select are offered in all counties in Vermont and the following counties in New York: Clinton, Essex, Franklin, Hamilton, and St. Lawrence.

Tier Descriptions

Tier 1–Preferred Generic Drugs–\$0 cost

Tier 1 includes select generic drugs used to treat chronic conditions such as diabetes, high blood pressure, high cholesterol, and osteoporosis/bone health.

Tier 2–Generic Drugs

Tier 2 includes most other generic drugs on our Formulary. Generic drugs have the same active ingredients, strength, and effectiveness as the brand name versions, but generally at a much lower cost.

Tier 3–Preferred Brand Name Drugs

Tier 3 includes preferred brand drugs that have the lowest cost sharing for brand name drugs. Certain generic drugs may appear in Tier 3 due to potential safety concerns or the high cost of the drug.

Tier 4–Non-Preferred Brand Drugs

Tier 4 includes all other non-preferred brand-name and generic drugs on our Formulary. Part D drugs excluded from our Formulary must go through an exception process in order for MVP to cover them. If they are approved they will be covered in Tier 4.

Tier 5–Specialty Drugs

Tier 5 includes high cost specialty generic and brand-name drugs that cost \$830 or more for a one-month supply. Most drugs in Tier 5 are restricted to a one-month supply at retail, and are excluded from the mail order program and tier exception process.

ANALGESICS	1
ANESTHETICS.....	4
ANTI-INFECTIVES	4
ANTINEOPLASTIC AGENTS.....	16
CARDIOVASCULAR.....	26
CENTRAL NERVOUS SYSTEM.....	40
ENDOCRINE AND METABOLIC.....	62
GASTROINTESTINAL.....	79
GENITOURINARY	83
HEMATOLOGIC	84
IMMUNOLOGIC AGENTS	87
NUTRITIONAL/SUPPLEMENTS	92
OPHTHALMIC.....	93
OTIC	96
RESPIRATORY	97
TOPICAL.....	101
Index.....	107

MVP UVM 2023 eff 01/01/2023

Drug Name **Drug Tier** **Requirements/Limits**
ANALGESICS

GOUT

<i>allopurinol tab 100 mg</i>	2	
<i>allopurinol tab 300 mg</i>	2	
<i>colchicine tab 0.6 mg</i>	3	QL (60 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	2	
<i>febuxostat tab 40 mg</i>	3	QL (30 tabs / 30 days)
<i>febuxostat tab 80 mg</i>	3	QL (30 tabs / 30 days)
<i>probenecid tab 500 mg</i>	2	

MISCELLANEOUS

<i>butalbital-acetaminophen tab 50-325 mg</i>	2	QL (60 tabs / 30 days)
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	2	QL (60 caps / 30 days)
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	2	QL (60 caps / 30 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	2	QL (60 tabs / 30 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	2	QL (60 caps / 30 days)
<i>tencon tab 50-325mg</i>	2	QL (60 tabs / 30 days)

NSAIDS

<i>celecoxib cap 50 mg</i>	3	
<i>celecoxib cap 100 mg</i>	3	
<i>celecoxib cap 200 mg</i>	3	
<i>celecoxib cap 400 mg</i>	3	
<i>diclofenac sodium tab delayed release 50 mg</i>	2	
<i>diclofenac sodium tab delayed release 75 mg</i>	2	
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	
<i>ibuprofen tab 400 mg</i>	2	
<i>ibuprofen tab 600 mg</i>	2	
<i>ibuprofen tab 800 mg</i>	2	
<i>meloxicam tab 7.5 mg</i>	2	
<i>meloxicam tab 15 mg</i>	2	
<i>nabumetone tab 500 mg</i>	2	
<i>nabumetone tab 750 mg</i>	2	
<i>naproxen tab 250 mg</i>	2	
<i>naproxen tab 375 mg</i>	2	
<i>naproxen tab 500 mg</i>	2	
<i>salsalate tab 500 mg</i>	3	
<i>salsalate tab 750 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
OPIOID ANALGESICS, LONG-ACTING		
<i>buprenorphine td patch weekly 5 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 10 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 15 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>buprenorphine td patch weekly 20 mcg/hr</i>	3	QL (4 patches / 28 days)
<i>fentanyl td patch 72hr 12 mcg/hr</i>	2	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	2	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	2	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 75 mcg/hr</i>	3	QL (20 patches / 30 days)
<i>fentanyl td patch 72hr 100 mcg/hr</i>	3	QL (20 patches / 30 days)
<i>morphine sulfate tab er 15 mg</i>	2	QL (90 tabs / 30 days)
<i>morphine sulfate tab er 30 mg</i>	2	QL (90 tabs / 30 days)
<i>morphine sulfate tab er 60 mg</i>	2	QL (60 tabs / 30 days)
<i>morphine sulfate tab er 100 mg</i>	2	QL (60 tabs / 30 days)
<i>morphine sulfate tab er 200 mg</i>	2	QL (60 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	3	QL (90 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	3	QL (90 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	3	QL (60 tabs / 30 days)
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	3	QL (60 tabs / 30 days)
OXYCONTIN TAB 10MG ER	4	QL (90 tabs / 30 days)
OXYCONTIN TAB 15MG ER	4	QL (90 tabs / 30 days)
OXYCONTIN TAB 20MG ER	4	QL (90 tabs / 30 days)
OXYCONTIN TAB 30MG ER	4	QL (90 tabs / 30 days)
OXYCONTIN TAB 40MG ER	4	QL (60 tabs / 30 days)
OXYCONTIN TAB 60MG ER	4	QL (60 tabs / 30 days)
OXYCONTIN TAB 80MG ER	4	QL (60 tabs / 30 days)
OPIOID ANALGESICS, SHORT-ACTING		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	2	
<i>acetaminophen w/ codeine tab 300-15 mg</i>	2	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	2	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	2	QL (360 tabs / 30 days)
<i>ascomp/cod cap 30mg</i>	2	QL (60 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	2	
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	2	QL (60 caps / 30 days)
<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	QL (4 bottles / 30 days)
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	5	QL (120 tabs / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	4	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	5	QL (120 lozenges / 30 days), PA; DL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	2	
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	3	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	2	QL (360 tabs / 30 days)
<i>hydromorphone hcl liqd 1 mg/ml</i>	2	
<i>hydromorphone hcl tab 2 mg</i>	2	QL (250 tabs / 30 days)
<i>hydromorphone hcl tab 4 mg</i>	2	QL (250 tabs / 30 days)
<i>hydromorphone hcl tab 8 mg</i>	2	QL (250 tabs / 30 days)
<i>morphine sulfate oral soln 10 mg/5ml</i>	3	
<i>morphine sulfate oral soln 20 mg/5ml</i>	3	
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	3	
<i>morphine sulfate suppos 10 mg</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tab 15 mg</i>	3	QL (300 tabs / 30 days)
<i>morphine sulfate tab 30 mg</i>	3	QL (300 tabs / 30 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	QL (120 mL / 30 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	2	
<i>oxycodone hcl tab 5 mg</i>	2	QL (240 tabs / 30 days)
<i>oxycodone hcl tab 10 mg</i>	2	QL (240 tabs / 30 days)
<i>oxycodone hcl tab 15 mg</i>	2	QL (200 tabs / 30 days)
<i>oxycodone hcl tab 20 mg</i>	2	QL (200 tabs / 30 days)
<i>oxycodone hcl tab 30 mg</i>	2	QL (200 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	2	QL (360 tabs / 30 days)
<i>oxymorphone hcl tab 5 mg</i>	3	QL (240 tabs / 30 days)
<i>oxymorphone hcl tab 10 mg</i>	3	QL (200 tabs / 30 days)
<i>tramadol hcl tab 50 mg</i>	2	
<i>tramadol hcl tab 100 mg</i>	2	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	2	

ANESTHETICS

LOCAL ANESTHETICS

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

ANTI-INFECTIVES

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole tab 200 mg</i>	3	
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	2	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	2	
<i>atovaquone susp 750 mg/5ml</i>	4	QL (300 mL / 30 days); DL
<i>aztreonam for inj 1 gm</i>	2	
<i>baciim inj 50000unt</i>	2	
CAYSTON INH 75MG	5	NM, LA, PA; DL
<i>clindamycin hcl cap 75 mg</i>	2	
<i>clindamycin hcl cap 150 mg</i>	2	
<i>clindamycin hcl cap 300 mg</i>	2	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	2	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	2	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	2	
<i>clindamycin phosphate inj 300 mg/2ml</i>	2	
<i>clindamycin phosphate inj 600 mg/4ml</i>	2	
<i>clindamycin phosphate inj 900 mg/6ml</i>	2	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	4	
<i>dapsone tab 25 mg</i>	3	
<i>dapsone tab 100 mg</i>	3	
<i>daptomycin for iv soln 500 mg</i>	5	DL
DORIBAX INJ 250MG	4	
EMVERM CHW 100MG	5	DL
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	4	
FIRVANQ SOL 25MG/ML	3	
FIRVANQ SOL 50MG/ML	3	
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	3	
<i>gentamicin in saline inj 0.8 mg/ml</i>	2	
<i>gentamicin in saline inj 1 mg/ml</i>	2	
<i>gentamicin in saline inj 1.2 mg/ml</i>	2	
<i>gentamicin in saline inj 1.6 mg/ml</i>	2	
<i>gentamicin sulfate inj 40 mg/ml</i>	2	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	2	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	2	
IMPAVIDO CAP 50MG	5	DL
<i>ivermectin tab 3 mg</i>	2	
<i>linezolid for susp 100 mg/5ml</i>	5	DL
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	4	
<i>linezolid tab 600 mg</i>	2	
<i>meropenem iv for soln 1 gm</i>	2	
<i>meropenem iv for soln 500 mg</i>	2	
<i>methenamine hippurate tab 1 gm</i>	2	
<i>metronidazole iv soln 500 mg/100ml</i>	2	
<i>metronidazole tab 250 mg</i>	2	
<i>metronidazole tab 500 mg</i>	2	
<i>neomycin sulfate tab 500 mg</i>	2	
<i>nitazoxanide tab 500 mg</i>	4	DL
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	3	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	3	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	3	
<i>paromomycin sulfate cap 250 mg</i>	2	
<i>pentamidine isethionate for inj soln 300 mg</i>	4	DL
<i>pentamidine isethionate for nebulization soln 300 mg</i>	2	B/D
<i>praziquantel tab 600 mg</i>	3	
<i>pyrimethamine tab 25 mg</i>	5	PA; DL
<i>streptomycin sulfate for inj 1 gm</i>	4	
<i>sulfadiazine tab 500 mg</i>	3	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	2	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	2	
SYNERCID INJ 500MG	5	DL
<i>tinidazole tab 250 mg</i>	2	
<i>tinidazole tab 500 mg</i>	2	
TOBI PODHALR CAP 28MG	3	NM, LA, PA; DL
<i>tobramycin nebu soln 300 mg/4ml</i>	5	B/D, NM; DL
<i>tobramycin nebu soln 300 mg/5ml</i>	5	B/D, NM; DL
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	2	B/D; DL
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	2	B/D; DL
TRIMETHOPRIM TAB 100MG	2	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	3	DL
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	3	DL
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	2	DL
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	2	DL
VANCOMYCIN SOL 250/5ML	3	
XENLETA TAB 600MG	5	NM; DL

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Drug Name	Drug Tier	Requirements/Limits
XIFAXAN TAB 200MG	4	QL (9 tabs / 30 days), PA; DL
ZEMDRI INJ 500MG/10	5	DL
ANTIFUNGALS		
ABELCET INJ 5MG/ML	4	B/D
<i>amphotericin b for iv soln 50 mg</i>	3	B/D; DL
<i>fluconazole for susp 10 mg/ml</i>	2	
<i>fluconazole for susp 40 mg/ml</i>	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	2	DL
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	2	
<i>fluconazole tab 50 mg</i>	2	
<i>fluconazole tab 100 mg</i>	2	
<i>fluconazole tab 150 mg</i>	2	
<i>fluconazole tab 200 mg</i>	2	
<i>flucytosine cap 250 mg</i>	2	
<i>flucytosine cap 500 mg</i>	2	
<i>griseofulvin microsize susp 125 mg/5ml</i>	3	
<i>griseofulvin microsize tab 500 mg</i>	3	
<i>griseofulvin ultramicrosize tab 125 mg</i>	3	
<i>griseofulvin ultramicrosize tab 250 mg</i>	3	
<i>itraconazole cap 100 mg</i>	3	PA
<i>ketoconazole tab 200 mg</i>	4	
<i>miconazole sodium for iv soln 50 mg</i>	5	DL
<i>miconazole sodium for iv soln 100 mg</i>	5	DL
NOXAFIL SUS 40MG/ML	5	PA; DL
<i>nystatin tab 500000 unit</i>	2	
<i>posaconazole tab delayed release 100 mg</i>	5	PA; DL
<i>terbinafine hcl tab 250 mg</i>	2	QL (84 tabs / 365 days)
<i>voriconazole for inj 200 mg</i>	4	PA; DL
<i>voriconazole for susp 40 mg/ml</i>	5	DL
<i>voriconazole tab 50 mg</i>	4	DL
<i>voriconazole tab 200 mg</i>	3	
ANTIMALARIALS		
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	4	DL
<i>chloroquine phosphate tab 250 mg</i>	2	DL
<i>chloroquine phosphate tab 500 mg</i>	2	DL
COARTEM TAB 20-120MG	4	DL
<i>mefloquine hcl tab 250 mg</i>	2	DL
PRIMAQUINE TAB 26.3MG	4	DL
<i>quinine sulfate cap 324 mg</i>	2	QL (84 caps / 365 days); DL
ANTIRETROVIRAL AGENTS		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	2	NM

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Drug Name	Drug Tier	Requirements/Limits
<i>abacavir sulfate tab 300 mg (base equiv)</i>	2	NM
APTIVUS CAP 250MG	5	NM; DL
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	4	NM
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	4	NM
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	4	NM
EDURANT TAB 25MG	5	NM; DL
<i>efavirenz cap 50 mg</i>	2	NM
<i>efavirenz cap 200 mg</i>	2	NM
<i>efavirenz tab 600 mg</i>	2	NM
<i>emtricitabine caps 200 mg</i>	3	NM
EMTRIVA SOL 10MG/ML	3	NM
<i>etravirine tab 100 mg</i>	5	NM; DL
<i>etravirine tab 200 mg</i>	5	NM; DL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	5	NM; DL
FUZEON INJ 90MG	3	NM
INTELENCE TAB 25MG	4	NM
INVIRASE TAB 500MG	3	NM
ISENTRESS CHW 25MG	3	NM
ISENTRESS CHW 100MG	5	NM; DL
ISENTRESS HD TAB 600MG	5	NM; DL
ISENTRESS POW 100MG	4	NM
ISENTRESS TAB 400MG	5	NM; DL
<i>lamivudine oral soln 10 mg/ml</i>	2	NM
<i>lamivudine tab 150 mg</i>	2	NM
<i>lamivudine tab 300 mg</i>	2	NM
LEXIVA SUS 50MG/ML	4	NM
<i>maraviroc tab 150 mg</i>	5	NM; DL
<i>maraviroc tab 300 mg</i>	5	NM; DL
<i>nevirapine susp 50 mg/5ml</i>	3	NM
<i>nevirapine tab 200 mg</i>	2	NM
<i>nevirapine tab er 24hr 100 mg</i>	2	NM
<i>nevirapine tab er 24hr 400 mg</i>	4	NM
NORVIR POW 100MG	4	NM
NORVIR SOL 80MG/ML	3	NM
NORVIR TAB 100MG	3	NM
PIFELTRO TAB 100MG	5	NM; DL
PREZISTA SUS 100MG/ML	4	NM
PREZISTA TAB 75MG	4	NM
PREZISTA TAB 150MG	4	NM
PREZISTA TAB 600MG	5	NM; DL
PREZISTA TAB 800MG	5	NM; DL
RETROVIR INJ 10MG/ML	4	NM
REYATAZ POW 50MG	5	NM; DL

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Drug Name	Drug Tier	Requirements/Limits
<i>ritonavir tab 100 mg</i>	3	NM
RUKOBIA TAB 600MG ER	5	NM; DL
SELZENTRY SOL 20MG/ML	4	NM
SELZENTRY TAB 25MG	4	QL (120 tabs / 30 days), NM; DL
SELZENTRY TAB 75MG	5	NM; DL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	3	NM
TIVICAY PD TAB 5MG	4	NM
TIVICAY TAB 10MG	4	QL (30 tabs / 30 days), NM
TIVICAY TAB 25MG	5	NM; DL
TIVICAY TAB 50MG	5	NM; DL
TYBOST TAB 150MG	4	NM
VIRACEPT TAB 250MG	3	NM
VIRACEPT TAB 625MG	3	NM
VIREAD POW 40MG/GM	3	NM
VIREAD TAB 150MG	3	NM
VIREAD TAB 200MG	3	NM
VIREAD TAB 250MG	3	NM
<i>zidovudine cap 100 mg</i>	2	NM
<i>zidovudine syrup 10 mg/ml</i>	2	NM
<i>zidovudine tab 300 mg</i>	2	NM

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	3	NM
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	4	NM
BIKTARVY TAB	5	NM; DL
CIMDUO TAB 300-300	5	NM; DL
COMPLERA TAB	5	NM; DL
DELSTRIGO TAB	5	NM; DL
DESCOVY TAB 120-15MG	5	NM; DL
DESCOVY TAB 200/25MG	5	NM; DL
DOVATO TAB 50-300MG	5	NM; DL
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	5	NM; DL
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	5	NM; DL
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	5	NM; DL

Drug Name	Drug Tier	Requirements/Limits
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	5	NM; DL
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	5	NM; DL
EVOTAZ TAB 300-150	5	NM; DL
GENVOYA TAB	5	NM; DL
JULUCA TAB 50-25MG	5	NM; DL
<i>lamivudine-zidovudine tab 150-300 mg</i>	3	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	3	NM
<i>lopinavir-ritonavir tab 100-25 mg</i>	3	NM
<i>lopinavir-ritonavir tab 200-50 mg</i>	3	NM
ODEFSEY TAB	5	NM; DL
PREZCOBIX TAB 800-150	5	NM; DL
STRIBILD TAB	5	NM; DL
SYMTUZA TAB	5	NM; DL
TEMIXYS TAB 300-300	4	NM
TRIUMEQ PD TAB	5	NM; DL
TRIUMEQ TAB	5	NM; DL
TRIZIVIR TAB	4	NM

ANTITUBERCULAR AGENTS

CAPASTAT SUL INJ 1GM	4	
<i>ethambutol hcl tab 100 mg</i>	2	
<i>ethambutol hcl tab 400 mg</i>	2	
<i>isoniazid inj 100 mg/ml</i>	2	
<i>isoniazid syrup 50 mg/5ml</i>	2	
<i>isoniazid tab 100 mg</i>	2	
<i>isoniazid tab 300 mg</i>	2	
PASER GRA 4GM	4	
PRETOMANID TAB 200MG	4	
PRIFTIN TAB 150MG	4	
<i>pyrazinamide tab 500 mg</i>	2	
<i>rifabutin cap 150 mg</i>	3	
<i>rifampin cap 150 mg</i>	2	
<i>rifampin cap 300 mg</i>	2	
<i>rifampin for inj 600 mg</i>	2	
SIRTURO TAB 20MG	5	NM, LA; DL
SIRTURO TAB 100MG	5	NM, LA; DL
TRECTOR TAB 250MG	4	

ANTIVIRALS

<i>acyclovir cap 200 mg</i>	2	
<i>acyclovir sodium iv soln 50 mg/ml</i>	2	B/D
<i>acyclovir susp 200 mg/5ml</i>	2	
<i>acyclovir tab 400 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>acyclovir tab 800 mg</i>	2	
<i>adefovir dipivoxil tab 10 mg</i>	2	NM
<i>cidofovir iv inj 75 mg/ml</i>	2	
<i>entecavir tab 0.5 mg</i>	4	NM
<i>entecavir tab 1 mg</i>	4	NM
EPCLUSA PAK 150-37.5	5	NM, PA; DL
EPCLUSA PAK 200-50MG	5	NM, PA; DL
EPCLUSA TAB 200-50MG	5	NM, PA; DL
EPCLUSA TAB 400-100	5	NM, PA; DL
<i>famciclovir tab 125 mg</i>	2	
<i>famciclovir tab 250 mg</i>	2	
<i>famciclovir tab 500 mg</i>	2	
HARVONI PAK	5	NM, PA; DL
HARVONI PAK 45-200MG	5	NM, PA; DL
HARVONI TAB 90-400MG	5	NM, PA; DL
<i>lamivudine tab 100 mg (hbv)</i>	2	NM
LIVTENCITY TAB 200MG	5	NM, LA; DL
MAVYRET PAK 50-20MG	5	NM, PA; DL
MAVYRET TAB 100-40MG	5	NM, PA; DL
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	3	QL (168 caps / year)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	3	QL (84 caps / year)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	3	QL (84 caps / year)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	3	QL (720 mL / 180 days)
PEGASYS INJ	5	NM; DL
PEGASYS INJ 180MCG/M	5	NM; DL
PREVYMIS TAB 240MG	5	DL
PREVYMIS TAB 480MG	5	DL
RELENZA MIS DISKHALE	4	QL (3 inhalers / 180 days)
<i>ribavirin cap 200 mg</i>	2	NM, PA; DL
<i>ribavirin tab 200 mg</i>	2	NM, PA; DL
<i>rimantadine hydrochloride tab 100 mg</i>	2	
SOVALDI PAK 150MG	5	NM, PA; DL
SOVALDI PAK 200MG	5	NM, PA; DL
SOVALDI TAB 400MG	5	NM, PA; DL
<i>valacyclovir hcl tab 1 gm</i>	2	
<i>valacyclovir hcl tab 500 mg</i>	2	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	3	
VOSEVI TAB	5	NM, PA; DL
XOFLUZA TAB 40MG	4	QL (4 tabs / 180 days)

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XOFLUZA TAB 80MG	4	QL (2 tabs / 180 days)
ZEPATIER TAB 50-100MG	5	NM, PA; DL
CEPHALOSPORINS		
<i>cefaclor cap 250 mg</i>	2	
<i>cefaclor cap 500 mg</i>	2	
<i>cefadroxil cap 500 mg</i>	2	
<i>cefadroxil for susp 250 mg/5ml</i>	2	
<i>cefadroxil for susp 500 mg/5ml</i>	2	
<i>cefadroxil tab 1 gm</i>	2	
<i>cefazolin sodium for inj 1 gm</i>	2	
<i>cefazolin sodium for inj 10 gm</i>	2	
<i>cefazolin sodium for inj 500 mg</i>	2	
<i>cefdinir cap 300 mg</i>	2	
<i>cefdinir for susp 125 mg/5ml</i>	2	
<i>cefdinir for susp 250 mg/5ml</i>	2	
<i>cefepime hcl for inj 1 gm</i>	2	
<i>cefepime hcl for inj 2 gm</i>	2	
<i>cefixime cap 400 mg</i>	2	
<i>cefixime for susp 100 mg/5ml</i>	2	
<i>cefixime for susp 200 mg/5ml</i>	2	
<i>cefotetan disodium for inj 1 gm</i>	2	
<i>cefotetan disodium for inj 2 gm</i>	2	
<i>cefoxitin sodium for iv soln 1 gm</i>	2	
<i>cefoxitin sodium for iv soln 2 gm</i>	2	
<i>cefoxitin sodium for iv soln 10 gm</i>	2	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	2	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg</i>	2	
<i>cefpodoxime proxetil tab 200 mg</i>	2	
<i>cefprozil for susp 125 mg/5ml</i>	2	
<i>cefprozil for susp 250 mg/5ml</i>	2	
<i>cefprozil tab 250 mg</i>	2	
<i>cefprozil tab 500 mg</i>	2	
<i>ceftazidime for inj 1 gm</i>	2	
<i>ceftazidime for inj 6 gm</i>	2	
<i>ceftriaxone sodium for inj 1 gm</i>	2	
<i>ceftriaxone sodium for inj 2 gm</i>	2	
<i>ceftriaxone sodium for inj 10 gm</i>	2	
<i>ceftriaxone sodium for inj 250 mg</i>	2	
<i>ceftriaxone sodium for inj 500 mg</i>	2	
<i>cefuroxime axetil tab 250 mg</i>	2	
<i>cefuroxime axetil tab 500 mg</i>	2	
<i>cefuroxime sodium for inj 750 mg</i>	2	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	2	

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<i>cephalexin cap 250 mg</i>	2	
<i>cephalexin cap 500 mg</i>	2	
<i>cephalexin for susp 125 mg/5ml</i>	2	
<i>cephalexin for susp 250 mg/5ml</i>	2	
<i>cephalexin tab 250 mg</i>	2	
<i>cephalexin tab 500 mg</i>	2	
SUPRAX SUS 500/5ML	4	
<i>tazicef inj 1gm</i>	2	
<i>tazicef inj 2gm</i>	2	
<i>tazicef inj 6gm</i>	2	
TEFLARO INJ 400MG	4	
TEFLARO INJ 600MG	4	
ERYTHROMYCINS/MACROLIDES		
<i>azithromycin for susp 100 mg/5ml</i>	2	
<i>azithromycin for susp 200 mg/5ml</i>	2	
<i>azithromycin iv for soln 500 mg</i>	2	
<i>azithromycin tab 250 mg</i>	2	
<i>azithromycin tab 500 mg</i>	2	
<i>azithromycin tab 600 mg</i>	2	
<i>clarithromycin for susp 125 mg/5ml</i>	2	
<i>clarithromycin for susp 250 mg/5ml</i>	2	
<i>clarithromycin tab 250 mg</i>	2	
<i>clarithromycin tab 500 mg</i>	2	
<i>clarithromycin tab er 24hr 500 mg</i>	2	
DIFICID SUS	5	PA; DL
DIFICID TAB 200MG	5	PA; DL
<i>e.e.s. 400 tab 400mg</i>	3	
<i>ery-tab tab 250mg ec</i>	3	
<i>ery-tab tab 333mg ec</i>	3	
<i>ery-tab tab 500mg ec</i>	3	
ERYTHROCIN INJ 500MG	4	
<i>erythrocin tab 250mg</i>	2	
<i>erythromycin ethylsuccinate tab 400 mg</i>	3	
<i>erythromycin tab 250 mg</i>	2	
<i>erythromycin tab 500 mg</i>	2	
<i>erythromycin tab delayed release 250 mg</i>	2	
<i>erythromycin tab delayed release 333 mg</i>	2	
<i>erythromycin tab delayed release 500 mg</i>	2	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	2	
FLUOROQUINOLONES		
<i>ciprofloxacin 200 mg/100ml in d5w</i>	2	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	2	
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	2	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	2	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	2	
<i>ciprofloxacin iv soln 200 mg/20ml (1%)</i>	2	
<i>ciprofloxacin iv soln 400 mg/40ml (1%)</i>	2	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	2	DL
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	2	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	2	DL
<i>levofloxacin iv soln 25 mg/ml</i>	2	DL
<i>levofloxacin oral soln 25 mg/ml</i>	2	
<i>levofloxacin tab 250 mg</i>	2	
<i>levofloxacin tab 500 mg</i>	2	
<i>levofloxacin tab 750 mg</i>	2	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	2	
<i>ofloxacin tab 300 mg</i>	2	
<i>ofloxacin tab 400 mg</i>	2	

PENICILLINS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	2	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	2	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>amoxicillin (trihydrate) cap 250 mg</i>	2	
<i>amoxicillin (trihydrate) cap 500 mg</i>	2	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	2	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	2	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	2	
<i>amoxicillin (trihydrate) tab 500 mg</i>	2	
<i>amoxicillin (trihydrate) tab 875 mg</i>	2	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	2	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	2	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	2	
<i>ampicillin cap 250 mg</i>	2	
<i>ampicillin cap 500 mg</i>	2	
<i>ampicillin for susp 250 mg/5ml</i>	2	
<i>ampicillin sodium for inj 1 gm</i>	2	
<i>ampicillin sodium for inj 125 mg</i>	2	
<i>ampicillin sodium for iv soln 10 gm</i>	2	
BICILLIN C-R INJ 900/300	4	
BICILLIN C-R INJ 1200000	4	
BICILLIN L-A INJ 600000	4	
BICILLIN L-A INJ 1200000	4	
BICILLIN L-A INJ 2400000	4	
<i>dicloxacillin sodium cap 250 mg</i>	2	
<i>dicloxacillin sodium cap 500 mg</i>	2	
<i>nafcillin sodium for inj 1 gm</i>	2	
<i>nafcillin sodium for inj 2 gm</i>	2	
<i>nafcillin sodium for iv soln 10 gm</i>	2	
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	2	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	2	
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	2	
PEN G PROC INJ 600000	3	
PEN GK/DEXTR INJ 20000/ML	4	
PEN GK/DEXTR INJ 40000/ML	4	
PEN GK/DEXTR INJ 60000/ML	4	
<i>penicillin g potassium for inj 20000000 unit</i>	2	
<i>penicillin g sodium for inj 5000000 unit</i>	2	
<i>penicillin v potassium for soln 125 mg/5ml</i>	2	
<i>penicillin v potassium for soln 250 mg/5ml</i>	2	
<i>penicillin v potassium tab 250 mg</i>	2	
<i>penicillin v potassium tab 500 mg</i>	2	
<i>pfizerpen inj 20000000</i>	2	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	2	

TETRACYCLINES

<i>doxy 100 inj 100mg</i>	3	
<i>doxycycline hyclate cap 50 mg</i>	2	
<i>doxycycline hyclate cap 100 mg</i>	2	
<i>doxycycline hyclate tab 20 mg</i>	2	
<i>doxycycline hyclate tab 100 mg</i>	2	
<i>doxycycline monohydrate cap 50 mg</i>	3	
<i>doxycycline monohydrate cap 75 mg</i>	3	
<i>doxycycline monohydrate cap 100 mg</i>	3	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	2	
<i>doxycycline monohydrate tab 50 mg</i>	2	
<i>doxycycline monohydrate tab 75 mg</i>	4	
<i>doxycycline monohydrate tab 100 mg</i>	2	
<i>doxycycline monohydrate tab 150 mg</i>	4	
<i>minocycline hcl cap 50 mg</i>	2	
<i>minocycline hcl cap 75 mg</i>	2	
<i>minocycline hcl cap 100 mg</i>	2	
<i>minocycline hcl tab 50 mg</i>	2	
<i>minocycline hcl tab 75 mg</i>	2	
<i>minocycline hcl tab 100 mg</i>	2	
NUZYRA INJ 100MG	5	NM, LA; DL
NUZYRA TAB 150MG	5	NM, LA; DL
<i>tetracycline hcl cap 250 mg</i>	3	
<i>tetracycline hcl cap 500 mg</i>	3	
TIGECYCLINE INJ 50MG	4	DL

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

BICNU INJ 100MG	4	
<i>busulfan inj 6 mg/ml</i>	5	DL
<i>carboplatin iv soln 50 mg/5ml</i>	2	DL
<i>carboplatin iv soln 150 mg/15ml</i>	2	
<i>carboplatin iv soln 450 mg/45ml</i>	2	DL
<i>carboplatin iv soln 600 mg/60ml</i>	2	DL
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	2	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	2	DL
CYCLOPHOSPH TAB 25MG	3	B/D
CYCLOPHOSPH TAB 50MG	3	B/D
<i>cyclophosphamide cap 25 mg</i>	3	B/D
<i>cyclophosphamide cap 50 mg</i>	3	B/D

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Drug Name	Drug Tier	Requirements/Limits
<i>ifosfamide for inj 1 gm</i>	2	
LEUKERAN TAB 2MG	3	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	2	
<i>oxaliplatin for iv inj 100 mg</i>	4	
<i>oxaliplatin iv soln 50 mg/10ml</i>	4	
<i>oxaliplatin iv soln 100 mg/20ml</i>	4	
<i>thiotepa for inj 15 mg</i>	5	NM; DL
TREANDA INJ 25MG	5	NM, LA; DL
TREANDA INJ 100MG	5	NM, LA; DL
YONDELIS INJ 1MG	5	NM, LA; DL
ZANOSAR INJ 1GM	4	

ANTIBIOTICS

<i>bleomycin sulfate for inj 15 unit</i>	2	
<i>bleomycin sulfate for inj 30 unit</i>	2	B/D
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	2	
<i>doxorubicin hcl inj 2 mg/ml</i>	2	
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	4	
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	3	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	2	DL
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	2	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	2	DL
<i>mitomycin for iv soln 5 mg</i>	4	
<i>mitomycin for iv soln 20 mg</i>	5	DL
<i>mitomycin for iv soln 40 mg</i>	5	DL

ANTIMETABOLITES

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

Drug Name	Drug Tier	Requirements/Limits
<i>mercaptapurine tab 50 mg</i>	2	
<i>methotrexate sodium for inj 1 gm</i>	2	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	3	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	3	
PURIXAN SUS 20MG/ML	4	NM
TABLOID TAB 40MG	4	

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	5	NM; DL
<i>abiraterone acetate tab 500 mg</i>	5	NM; DL
<i>anastrozole tab 1 mg</i>	2	
<i>bicalutamide tab 50 mg</i>	2	
ELIGARD INJ 7.5MG	4	NM; DL
ELIGARD INJ 22.5MG	4	NM
ELIGARD INJ 30MG	4	NM
ELIGARD INJ 45MG	4	NM; DL
EMCYT CAP 140MG	3	
ERLEADA TAB 60MG	5	NM, LA; DL
EULEXIN CAP 125MG	4	
<i>exemestane tab 25 mg</i>	3	
FASLODEX INJ 250/5ML	5	DL
FIRMAGON INJ 80MG	4	QL (4 vials / 28 days), NM; DL
FIRMAGON INJ 120MG	5	NM; DL
<i>flutamide cap 125 mg</i>	2	
<i>letrozole tab 2.5 mg</i>	2	
<i>leuprolide acetate inj kit 5 mg/ml</i>	2	NM
LUPRON DEPOT INJ 3.75MG	4	NM; DL
LUPRON DEPOT INJ 7.5MG	5	NM; DL
LUPRON DEPOT INJ 11.25MG	5	NM; DL
LUPRON DEPOT INJ 22.5MG	5	NM; DL
LUPRON DEPOT INJ 30MG	5	NM; DL
LUPRON DEPOT INJ 45MG	5	NM; DL
LYSODREN TAB 500MG	3	NM
<i>megestrol acetate tab 20 mg</i>	2	PA; DL
<i>megestrol acetate tab 40 mg</i>	2	PA; DL
<i>nilutamide tab 150 mg</i>	3	
NUBEQA TAB 300MG	5	NM, LA; DL
ORGOVYX TAB 120MG	5	NM, LA; DL
SOLTAMOX SOL 10MG/5ML	4	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	2	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	5	DL
TRELSTAR MIX INJ 3.75MG	5	NM; DL
TRELSTAR MIX INJ 11.25MG	5	NM; DL
TRELSTAR MIX INJ 22.5MG	5	NM; DL
XTANDI CAP 40MG	5	NM, LA; DL
XTANDI TAB 40MG	5	NM, LA; DL
XTANDI TAB 80MG	5	NM, LA; DL
YONSA TAB 125MG	5	NM, LA; DL

IMMUNOMODULATORS

<i>lenalidomide cap 5 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 10 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 15 mg</i>	5	NM, LA; DL
<i>lenalidomide cap 25 mg</i>	5	NM, LA; DL
POMALYST CAP 1MG	5	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 2MG	5	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 3MG	5	QL (30 caps / 30 days), NM, LA; DL
POMALYST CAP 4MG	5	QL (30 caps / 30 days), NM, LA; DL
REVLIMID CAP 2.5MG	5	NM, LA; DL
REVLIMID CAP 5MG	5	NM, LA; DL
REVLIMID CAP 10MG	5	NM, LA; DL
REVLIMID CAP 15MG	5	NM, LA; DL
REVLIMID CAP 20MG	5	NM, LA; DL
REVLIMID CAP 25MG	5	NM, LA; DL
THALOMID CAP 50MG	5	NM, LA; DL
THALOMID CAP 100MG	5	NM, LA; DL
THALOMID CAP 150MG	5	NM, LA; DL
THALOMID CAP 200MG	5	NM, LA; DL

MISCELLANEOUS

BESREMI SOL 500MCG	5	NM, LA; DL
<i>bexarotene cap 75 mg</i>	5	NM; DL
<i>dacarbazine for inj 100 mg</i>	2	
<i>dacarbazine for inj 200 mg</i>	2	
ERWINAZE INJ 10000UNT	5	NM, LA; DL
<i>hydroxyurea cap 500 mg</i>	2	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	4	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	4	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	4	

Drug Name	Drug Tier	Requirements/Limits
KISQALI 200 PAK FEMARA	5	NM, PA; DL
KISQALI 400 PAK FEMARA	5	NM, PA; DL
KISQALI 600 PAK FEMARA	5	NM, PA; DL
MATULANE CAP 50MG	5	NM, LA; DL
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	2	NM; DL
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	2	NM
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	2	NM; DL
NIPENT INJ 10MG	5	DL
ONUREG TAB 200MG	5	NM, LA, PA; DL
ONUREG TAB 300MG	5	NM, LA, PA; DL
PROLEUKIN INJ 22MU	5	NM; DL
SYNRIBO INJ 3.5MG	5	NM; DL
TAVNEOS CAP 10MG	5	NM, LA; DL
<i>topotecan hcl for inj 4 mg (base equiv)</i>	5	DL
<i>tretinoin cap 10 mg</i>	5	DL
WELIREG TAB 40MG	5	NM, LA; DL

MITOTIC INHIBITORS

ABRAXANE INJ 100MG	5	NM, LA; DL
DOCETAXEL INJ 80MG/4ML	3	
DOCETAXEL INJ 160/16ML	3	
ETOPOPHOS INJ 100MG	4	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	2	
HALAVEN INJ 1MG/2ML	5	NM; DL
IXEMPRA KIT INJ 15MG	5	NM; DL
JEVTANA INJ 60/1.5ML	5	NM, LA; DL
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	2	DL
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	2	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	2	DL
<i>toposar inj 100/5ml</i>	2	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	3	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	3	

MOLECULAR TARGET AGENTS

AFINITOR DIS TAB 2MG	5	NM, PA; DL
AFINITOR DIS TAB 3MG	5	NM, PA; DL
AFINITOR DIS TAB 5MG	5	NM, PA; DL
ALECENSA CAP 150MG	5	NM, LA, PA; DL
ALUNBRIG PAK	5	NM, LA, PA; DL
ALUNBRIG TAB 30MG	5	NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
ALUNBRIG TAB 90MG	5	NM, LA, PA; DL
ALUNBRIG TAB 180MG	5	NM, LA, PA; DL
ARZERRA CON 100/5ML	5	NM, LA; DL
AVASTIN INJ	5	NM, LA; DL
AVASTIN INJ 400/16ML	5	NM, LA; DL
AYVAKIT TAB 25MG	5	NM, LA, PA; DL
AYVAKIT TAB 50MG	5	NM, LA, PA; DL
AYVAKIT TAB 100MG	5	NM, LA, PA; DL
AYVAKIT TAB 200MG	5	NM, LA, PA; DL
AYVAKIT TAB 300MG	5	NM, LA, PA; DL
BALVERSA TAB 3MG	5	NM, LA, PA; DL
BALVERSA TAB 4MG	5	NM, LA, PA; DL
BALVERSA TAB 5MG	5	NM, LA, PA; DL
BELEODAQ INJ 500MG	5	NM, LA; DL
BOSULIF TAB 100MG	5	NM, PA; DL
BOSULIF TAB 400MG	5	NM, PA; DL
BOSULIF TAB 500MG	5	NM, PA; DL
BRAFTOVI CAP 75MG	5	NM, LA, PA; DL
BRUKINSA CAP 80MG	5	NM, LA, PA; DL
CABOMETYX TAB 20MG	5	NM, LA, PA; DL
CABOMETYX TAB 40MG	5	NM, LA, PA; DL
CABOMETYX TAB 60MG	5	NM, LA, PA; DL
CALQUENCE CAP 100MG	5	NM, LA, PA; DL
CALQUENCE TAB 100MG	5	NM, LA, PA; DL
CAPRELSA TAB 100MG	3	QL (60 tabs / 30 days), NM, LA, PA; DL
CAPRELSA TAB 300MG	3	QL (30 tabs / 30 days), NM, LA, PA; DL
COMETRIQ KIT 60MG	5	NM, LA, PA; DL
COMETRIQ KIT 100MG	5	NM, LA, PA; DL
COMETRIQ KIT 140MG	5	NM, LA, PA; DL
COPIKTRA CAP 15MG	5	NM, LA, PA; DL
COPIKTRA CAP 25MG	5	NM, LA, PA; DL
COTELLIC TAB 20MG	5	NM, LA, PA; DL
CYRAMZA INJ 100/10ML	5	NM, LA; DL
CYRAMZA INJ 500/50ML	5	NM, LA; DL
DARZALEX SOL 100MG/5M	5	NM, LA; DL
DARZALEX SOL 400MG/20	5	NM, LA; DL
DAURISMO TAB 25MG	5	NM, LA, PA; DL
DAURISMO TAB 100MG	5	NM, LA, PA; DL
EMPLICITI INJ 300MG	5	NM, LA; DL
EMPLICITI INJ 400MG	5	NM, LA; DL
ERBITUX INJ 100MG	5	NM; DL
ERBITUX INJ 200MG	5	NM; DL

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Drug Name	Drug Tier	Requirements/Limits
ERIVEDGE CAP 150MG	5	NM, LA; DL
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	5	NM; DL
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	5	NM; DL
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	5	NM; DL
<i>everolimus tab 2.5 mg</i>	5	NM, PA; DL
<i>everolimus tab 5 mg</i>	5	NM, PA; DL
<i>everolimus tab 7.5 mg</i>	5	NM, PA; DL
<i>everolimus tab 10 mg</i>	5	NM, PA; DL
<i>everolimus tab for oral susp 2 mg</i>	5	NM, PA; DL
<i>everolimus tab for oral susp 3 mg</i>	5	NM, PA; DL
<i>everolimus tab for oral susp 5 mg</i>	5	NM, PA; DL
EXKIVITY CAP 40MG	5	NM, LA, PA; DL
FARYDAK CAP 10MG	5	NM, LA, PA; DL
FARYDAK CAP 15MG	5	NM, LA, PA; DL
FARYDAK CAP 20MG	5	NM, LA, PA; DL
FOTIVDA CAP 0.89MG	5	NM, LA, PA; DL
FOTIVDA CAP 1.34MG	5	NM, LA, PA; DL
GAVRETO CAP 100MG	5	NM, LA, PA; DL
GILOTRIF TAB 20MG	5	NM, LA; DL
GILOTRIF TAB 30MG	5	NM, LA; DL
GILOTRIF TAB 40MG	5	NM, LA; DL
HERCEPTIN INJ 150MG	5	NM, LA; DL
HERCEPTIN INJ 440MG	5	DL
IBRANCE CAP 75MG	5	NM, LA, PA; DL
IBRANCE CAP 100MG	5	NM, LA, PA; DL
IBRANCE CAP 125MG	5	NM, LA, PA; DL
IBRANCE TAB 75MG	5	NM, LA, PA; DL
IBRANCE TAB 100MG	5	NM, LA, PA; DL
IBRANCE TAB 125MG	5	NM, LA, PA; DL
ICLUSIG TAB 10MG	5	NM, LA, PA; DL
ICLUSIG TAB 15MG	5	NM, LA, PA; DL
ICLUSIG TAB 30MG	5	NM, LA, PA; DL
ICLUSIG TAB 45MG	5	NM, LA, PA; DL
IDHIFA TAB 50MG	5	NM, LA, PA; DL
IDHIFA TAB 100MG	5	NM, LA, PA; DL
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	5	QL (90 tabs / 30 days), NM, PA; DL
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	5	QL (60 tabs / 30 days), NM, PA; DL
IMBRUVICA CAP 70MG	5	NM, LA, PA; DL
IMBRUVICA CAP 140MG	5	NM, LA, PA; DL
IMBRUVICA TAB 140MG	5	NM, LA, PA; DL
IMBRUVICA TAB 280MG	5	NM, LA, PA; DL
IMBRUVICA TAB 420MG	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
IMBRUVICA TAB 560MG	5	NM, LA, PA; DL
INLYTA TAB 1MG	5	NM, LA, PA; DL
INLYTA TAB 5MG	5	NM, LA, PA; DL
INREBIC CAP 100MG	5	QL (120 caps / 30 days), NM, LA, PA; DL
IRESSA TAB 250MG	5	NM, LA, PA; DL
ISTODAX OVR INJ 10MG	5	NM; DL
JAKAFI TAB 5MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 10MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 15MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 20MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
JAKAFI TAB 25MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
KADCYLA INJ 100MG	5	NM, LA; DL
KADCYLA INJ 160MG	5	NM, LA; DL
KEYTRUDA INJ 100MG/4M	5	NM, LA; DL
KISQALI TAB 200DOSE	5	NM, PA; DL
KISQALI TAB 400DOSE	5	NM, PA; DL
KISQALI TAB 600DOSE	5	NM, PA; DL
KOSELUGO CAP 10MG	5	NM, LA, PA; DL
KOSELUGO CAP 25MG	5	NM, LA, PA; DL
KYPROLIS SOL 30MG	5	NM, LA; DL
KYPROLIS SOL 60MG	5	NM, LA; DL
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	5	NM; DL
LARTRUVO INJ 10MG/ML	5	LA; DL
LARTRUVO INJ 190/19ML	5	LA; DL
LENVIMA CAP 4MG	5	NM, LA, PA; DL
LENVIMA CAP 8 MG	5	NM, LA, PA; DL
LENVIMA CAP 10 MG	5	NM, LA, PA; DL
LENVIMA CAP 12MG	5	NM, LA, PA; DL
LENVIMA CAP 14 MG	5	NM, LA, PA; DL
LENVIMA CAP 18 MG	5	NM, LA, PA; DL
LENVIMA CAP 20 MG	5	NM, LA, PA; DL
LENVIMA CAP 24 MG	5	NM, LA, PA; DL
LORBRENA TAB 25MG	5	NM, LA, PA; DL
LORBRENA TAB 100MG	5	NM, LA, PA; DL
LUMAKRAS TAB 120MG	5	NM, LA, PA; DL
LYNPARZA TAB 100MG	5	NM, LA, PA; DL
LYNPARZA TAB 150MG	5	NM, LA, PA; DL
MEKINIST TAB 0.5MG	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
MEKINIST TAB 2MG	5	NM, LA, PA; DL
MEKTOVI TAB 15MG	5	NM, LA, PA; DL
NERLYNX TAB 40MG	5	NM, LA, PA; DL
NEXAVAR TAB 200MG	5	NM, LA, PA; DL
NINLARO CAP 2.3MG	5	NM, PA; DL
NINLARO CAP 3MG	5	NM, PA; DL
NINLARO CAP 4MG	5	NM, PA; DL
ODOMZO CAP 200MG	5	NM, LA, PA; DL
PEMAZYRE TAB 4.5MG	5	NM, LA, PA; DL
PEMAZYRE TAB 9MG	5	NM, LA, PA; DL
PEMAZYRE TAB 13.5MG	5	NM, LA, PA; DL
PERJETA INJ 420/14ML	5	NM, LA; DL
PIQRAY 200MG TAB DOSE	5	NM, PA; DL
PIQRAY 250MG TAB DOSE	5	NM, PA; DL
PIQRAY 300MG TAB DOSE	5	NM, PA; DL
QINLOCK TAB 50MG	5	NM, LA, PA; DL
RETEVMO CAP 40MG	5	NM, LA, PA; DL
RETEVMO CAP 80MG	5	NM, LA, PA; DL
REZUROCK TAB 200MG	5	NM, LA, PA; DL
RITUXAN INJ 100MG	5	NM, LA; DL
RITUXAN INJ 500MG	5	NM, LA; DL
ROZLYTREK CAP 100MG	5	NM, LA, PA; DL
ROZLYTREK CAP 200MG	5	NM, LA, PA; DL
RUBRACA TAB 200MG	5	NM, LA, PA; DL
RUBRACA TAB 250MG	5	NM, LA, PA; DL
RUBRACA TAB 300MG	5	NM, LA, PA; DL
RYDAPT CAP 25MG	5	NM, PA; DL
SCSEMBLIX TAB 20MG	5	NM, PA; DL
SCSEMBLIX TAB 40MG	5	NM, PA; DL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	5	NM, PA; DL
SPRYCEL TAB 20MG	5	NM, PA; DL
SPRYCEL TAB 50MG	5	NM, PA; DL
SPRYCEL TAB 70MG	5	NM, PA; DL
SPRYCEL TAB 80MG	5	NM, PA; DL
SPRYCEL TAB 100MG	5	NM, PA; DL
SPRYCEL TAB 140MG	5	NM, PA; DL
STIVARGA TAB 40MG	5	NM, LA, PA; DL
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	5	NM, PA; DL
<i>sunitinib malate cap 25 mg (base equivalent)</i>	5	NM, PA; DL
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	5	NM, 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

Drug Name	Drug Tier	Requirements/Limits
<i>sunitinib malate cap 50 mg (base equivalent)</i>	5	NM, PA; DL
TABRECTA TAB 150MG	5	NM, PA; DL
TABRECTA TAB 200MG	5	NM, PA; DL
TAFINLAR CAP 50MG	5	NM, LA; DL
TAFINLAR CAP 75MG	5	NM, LA; DL
TAGRISSO TAB 40MG	5	NM, LA, PA; DL
TAGRISSO TAB 80MG	5	NM, LA, PA; DL
TALZENNA CAP 0.5MG	5	NM, LA, PA; DL
TALZENNA CAP 0.25MG	5	NM, LA, PA; DL
TALZENNA CAP 0.75MG	5	NM, LA, PA; DL
TALZENNA CAP 1MG	5	NM, LA, PA; DL
TASIGNA CAP 50MG	5	NM; DL
TASIGNA CAP 150MG	5	NM; DL
TASIGNA CAP 200MG	5	NM; DL
TAZVERIK TAB 200MG	5	NM, LA, PA; DL
TECENTRIQ INJ 1200/20	5	NM, LA; DL
TEPMETKO TAB 225MG	5	NM, LA, PA; DL
TIBSOVO TAB 250MG	5	NM, LA; DL
TORISEL INJ 25MG/ML	5	NM; DL
TRUSELTIQ CAP 50MG	5	NM, LA, PA; DL
TRUSELTIQ CAP 75MG	5	NM, LA, PA; DL
TRUSELTIQ CAP 100MG	5	NM, LA, PA; DL
TRUSELTIQ CAP 125MG	5	NM, LA, PA; DL
TUKYSA TAB 50MG	5	NM, LA, PA; DL
TUKYSA TAB 150MG	5	NM, LA, PA; DL
TURALIO CAP 200MG	5	NM, LA, PA; DL
UKONIQ TAB 200MG	5	NM, LA, PA; DL
VECTIBIX INJ 100MG	5	NM; DL
VECTIBIX INJ 400MG	5	NM; DL
VENCLEXTA TAB 10MG	4	NM, LA, PA; DL
VENCLEXTA TAB 50MG	4	NM, LA, PA; DL
VENCLEXTA TAB 100MG	5	NM, LA, PA; DL
VENCLEXTA TAB START PK	5	NM, LA, PA; DL
VERZENIO TAB 50MG	5	NM, LA, PA; DL
VERZENIO TAB 100MG	5	NM, LA, PA; DL
VERZENIO TAB 150MG	5	NM, LA, PA; DL
VERZENIO TAB 200MG	5	NM, LA, PA; DL
VIJOICE TAB 50MG	5	NM, LA, PA; DL
VIJOICE TAB 125MG	5	NM, LA, PA; DL
VIJOICE TAB 250MG	5	NM, LA, PA; DL
VITRAKVI CAP 25MG	5	NM, LA, PA; DL
VITRAKVI CAP 100MG	5	NM, LA, PA; DL
VITRAKVI SOL 20MG/ML	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
VIZIMPRO TAB 15MG	5	NM, LA, PA; DL
VIZIMPRO TAB 30MG	5	NM, LA, PA; DL
VIZIMPRO TAB 45MG	5	NM, LA, PA; DL
VONJO CAP 100MG	5	QL (120 caps / 30 days), NM, LA, PA; DL
VOTRIENT TAB 200MG	5	NM, LA; DL
XALKORI CAP 200MG	5	NM, LA, PA; DL
XALKORI CAP 250MG	5	NM, LA, PA; DL
XOSPATA TAB 40MG	5	NM, LA, PA; DL
XPOVIO PAK 40MG	5	NM, LA, PA; DL
XPOVIO PAK 50MG	5	NM, LA, PA; DL
XPOVIO PAK 60MG	5	NM, LA, PA; DL
XPOVIO PAK 80MG	5	NM, LA, PA; DL
ZEJULA CAP 100MG	5	NM, LA, PA; DL
ZELBORAF TAB 240MG	5	NM, LA, PA; DL
ZOLINZA CAP 100MG	5	NM; DL
ZYDELIG TAB 100MG	5	NM, LA, PA; DL
ZYDELIG TAB 150MG	5	NM, LA; DL
ZYKADIA TAB 150MG	5	NM, LA, PA; DL

PROTECTIVE AGENTS

<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	4	
ELITEK INJ 1.5MG	5	DL
ELITEK INJ 7.5MG	5	DL
<i>leucovorin calcium for inj 50 mg</i>	2	
<i>leucovorin calcium for inj 100 mg</i>	2	
<i>leucovorin calcium for inj 200 mg</i>	2	
<i>leucovorin calcium for inj 350 mg</i>	2	
<i>leucovorin calcium tab 5 mg</i>	2	
<i>leucovorin calcium tab 10 mg</i>	2	
<i>leucovorin calcium tab 15 mg</i>	3	
<i>leucovorin calcium tab 25 mg</i>	4	
<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)</i>	5	NM; DL
<i>mesna inj 100 mg/ml</i>	2	
MESNEX TAB 400MG	3	

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	2	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	2	

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

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Drug Name	Drug Tier	Requirements/Limits
<i>enalapril maleate tab 2.5 mg</i>	1	
<i>enalapril maleate tab 5 mg</i>	1	
<i>enalapril maleate tab 10 mg</i>	1	
<i>enalapril maleate tab 20 mg</i>	1	
<i>fosinopril sodium tab 10 mg</i>	1	
<i>fosinopril sodium tab 20 mg</i>	1	
<i>fosinopril sodium tab 40 mg</i>	1	
<i>lisinopril tab 2.5 mg</i>	1	
<i>lisinopril tab 5 mg</i>	1	
<i>lisinopril tab 10 mg</i>	1	
<i>lisinopril tab 20 mg</i>	1	
<i>lisinopril tab 30 mg</i>	1	
<i>lisinopril tab 40 mg</i>	1	
<i>moexipril hcl tab 7.5 mg</i>	1	
<i>moexipril hcl tab 15 mg</i>	1	
<i>perindopril erbumine tab 2 mg</i>	2	
<i>perindopril erbumine tab 4 mg</i>	2	
<i>perindopril erbumine tab 8 mg</i>	2	
<i>quinapril hcl tab 5 mg</i>	1	
<i>quinapril hcl tab 10 mg</i>	1	
<i>quinapril hcl tab 20 mg</i>	1	
<i>quinapril hcl tab 40 mg</i>	1	
<i>ramipril cap 1.25 mg</i>	1	
<i>ramipril cap 2.5 mg</i>	1	
<i>ramipril cap 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone tab 25 mg</i>	2	
<i>eplerenone tab 50 mg</i>	2	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
ALPHA BLOCKERS		
<i>doxazosin mesylate tab 1 mg</i>	2	
<i>doxazosin mesylate tab 2 mg</i>	2	
<i>doxazosin mesylate tab 4 mg</i>	2	
<i>doxazosin mesylate tab 8 mg</i>	2	
<i>prazosin hcl cap 1 mg</i>	2	
<i>prazosin hcl cap 2 mg</i>	2	
<i>prazosin hcl cap 5 mg</i>	2	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>terazosin hcl cap 2 mg (base equivalent)</i>	2	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	2	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	2	

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	2	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	2	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	2	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	2	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	2	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	2	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	2	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	2	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	2	
ENTRESTO TAB 24-26MG	2	
ENTRESTO TAB 49-51MG	2	
ENTRESTO TAB 97-103MG	2	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	2	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	2	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	2	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	2	
<i>telmisartan-amlodipine tab 40-5 mg</i>	2	
<i>telmisartan-amlodipine tab 40-10 mg</i>	2	
<i>telmisartan-amlodipine tab 80-5 mg</i>	2	
<i>telmisartan-amlodipine tab 80-10 mg</i>	2	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	2	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	2	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	2	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	2	
<i>candesartan cilexetil tab 8 mg</i>	2	
<i>candesartan cilexetil tab 16 mg</i>	2	
<i>candesartan cilexetil tab 32 mg</i>	2	
<i>irbesartan tab 75 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	
<i>losartan potassium tab 50 mg</i>	1	
<i>losartan potassium tab 100 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	2	
<i>olmesartan medoxomil tab 20 mg</i>	2	
<i>olmesartan medoxomil tab 40 mg</i>	2	
<i>telmisartan tab 20 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	

ANTIARRHYTHMICS

<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	2	
<i>amiodarone hcl tab 100 mg</i>	2	
<i>amiodarone hcl tab 200 mg</i>	2	
<i>amiodarone hcl tab 400 mg</i>	2	
<i>disopyramide phosphate cap 100 mg</i>	2	
<i>disopyramide phosphate cap 150 mg</i>	2	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	3	NM
<i>dofetilide cap 250 mcg (0.25 mg)</i>	3	NM
<i>dofetilide cap 500 mcg (0.5 mg)</i>	3	NM
<i>flecainide acetate tab 50 mg</i>	2	
<i>flecainide acetate tab 100 mg</i>	2	
<i>flecainide acetate tab 150 mg</i>	2	
<i>mexiletine hcl cap 150 mg</i>	3	
<i>mexiletine hcl cap 200 mg</i>	3	
<i>mexiletine hcl cap 250 mg</i>	3	
MULTAQ TAB 400MG	4	
NORPACE CAP 100MG CR	4	
NORPACE CAP 150MG CR	4	
<i>pacerone tab 100mg</i>	2	
<i>pacerone tab 200mg</i>	2	
<i>pacerone tab 400mg</i>	2	
<i>procainamide hcl inj 100 mg/ml</i>	2	
<i>propafenone hcl cap er 12hr 225 mg</i>	3	
<i>propafenone hcl cap er 12hr 325 mg</i>	3	
<i>propafenone hcl cap er 12hr 425 mg</i>	3	
<i>propafenone hcl tab 150 mg</i>	2	
<i>propafenone hcl tab 225 mg</i>	2	
<i>propafenone hcl tab 300 mg</i>	2	
<i>quinidine gluconate tab er 324 mg</i>	3	
<i>quinidine sulfate tab 200 mg</i>	3	
<i>quinidine sulfate tab 300 mg</i>	3	
<i>sorine tab 80mg</i>	2	
<i>sorine tab 120mg</i>	2	
<i>sorine tab 160mg</i>	2	
<i>sorine tab 240mg</i>	2	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl (afib/afl) tab 120 mg</i>	2	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	2	
<i>sotalol hcl tab 80 mg</i>	2	
<i>sotalol hcl tab 120 mg</i>	2	
<i>sotalol hcl tab 160 mg</i>	2	
<i>sotalol hcl tab 240 mg</i>	2	
ANTILIPEMICS, FIBRATES		
<i>fenofibrate micronized cap 43 mg</i>	2	
<i>fenofibrate micronized cap 67 mg</i>	2	
<i>fenofibrate micronized cap 134 mg</i>	2	
<i>fenofibrate micronized cap 200 mg</i>	2	
<i>fenofibrate tab 48 mg</i>	2	
<i>fenofibrate tab 54 mg</i>	2	
<i>fenofibrate tab 145 mg</i>	2	
<i>fenofibrate tab 160 mg</i>	2	
<i>gemfibrozil tab 600 mg</i>	2	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	2	
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	2	
LIVALO TAB 1MG	4	
LIVALO TAB 2MG	4	
LIVALO TAB 4MG	4	
<i>lovastatin tab 10 mg</i>	1	
<i>lovastatin tab 20 mg</i>	1	
<i>lovastatin tab 40 mg</i>	1	
<i>pravastatin sodium tab 10 mg</i>	1	
<i>pravastatin sodium tab 20 mg</i>	1	
<i>pravastatin sodium tab 40 mg</i>	1	
<i>pravastatin sodium tab 80 mg</i>	1	
<i>rosuvastatin calcium tab 5 mg</i>	1	
<i>rosuvastatin calcium tab 10 mg</i>	1	
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>simvastatin tab 10 mg</i>	1	
<i>simvastatin tab 20 mg</i>	1	
<i>simvastatin tab 40 mg</i>	1	
<i>simvastatin tab 80 mg</i>	1	
ANTILIPEMICS, MISCELLANEOUS		
<i>cholestyramine light powder packets 4 gm</i>	2	
<i>cholestyramine powder packets 4 gm</i>	2	
<i>colesevelam hcl tab 625 mg</i>	4	
<i>colestipol hcl granule packets 5 gm</i>	2	
<i>colestipol hcl tab 1 gm</i>	2	
<i>ezetimibe tab 10 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	
<i>icosapent ethyl cap 1 gm</i>	3	
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	3	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	3	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	3	
<i>niacor tab 500mg</i>	3	
<i>omega-3-acid ethyl esters cap 1 gm</i>	3	
PRALUENT INJ 75MG/ML	3	QL (2 injections / 28 days), NM, PA; DL; (coverage restricted to Regeneron and Sanofi US brands only)
PRALUENT INJ 150MG/ML	3	QL (2 injections / 28 days), NM, PA; DL; (coverage restricted to Regeneron and Sanofi US brands only)
<i>prevalite pow 4gm pk</i>	2	
VASCEPA CAP 0.5GM	4	
VASCEPA CAP 1GM	4	
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	

BETA-BLOCKERS

<i>acebutolol hcl cap 200 mg</i>	2	
<i>acebutolol hcl cap 400 mg</i>	2	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	
<i>atenolol tab 100 mg</i>	1	
<i>betaxolol hcl tab 10 mg</i>	2	
<i>betaxolol hcl tab 20 mg</i>	2	
<i>bisoprolol fumarate tab 5 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 10 mg</i>	3	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	3	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	3	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	3	
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	
<i>labetalol hcl iv soln 5 mg/ml</i>	2	
<i>labetalol hcl tab 100 mg</i>	2	
<i>labetalol hcl tab 200 mg</i>	2	
<i>labetalol hcl tab 300 mg</i>	2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 37.5 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 75 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nadolol tab 20 mg</i>	2	
<i>nadolol tab 40 mg</i>	2	
<i>nadolol tab 80 mg</i>	2	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	3	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	3	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	3	
<i>pindolol tab 5 mg</i>	2	
<i>pindolol tab 10 mg</i>	2	
<i>propranolol hcl cap er 24hr 60 mg</i>	2	
<i>propranolol hcl cap er 24hr 80 mg</i>	2	
<i>propranolol hcl cap er 24hr 120 mg</i>	2	
<i>propranolol hcl cap er 24hr 160 mg</i>	2	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>timolol maleate tab 5 mg</i>	2	
<i>timolol maleate tab 10 mg</i>	2	
<i>timolol maleate tab 20 mg</i>	2	

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
<i>cartia xt cap 120/24hr</i>	2	
<i>cartia xt cap 180/24hr</i>	2	
<i>cartia xt cap 240/24hr</i>	2	
<i>cartia xt cap 300/24hr</i>	2	
<i>dilt-xr cap 120mg</i>	2	
<i>dilt-xr cap 180mg</i>	2	
<i>dilt-xr cap 240mg</i>	2	
<i>diltiazem hcl cap er 12hr 60 mg</i>	2	
<i>diltiazem hcl cap er 12hr 90 mg</i>	2	
<i>diltiazem hcl cap er 12hr 120 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	2	
<i>diltiazem hcl coated beads tab er 24hr 180 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl coated beads tab er 24hr 240 mg</i>	2	
<i>diltiazem hcl coated beads tab er 24hr 300 mg</i>	2	
<i>diltiazem hcl coated beads tab er 24hr 360 mg</i>	2	
<i>diltiazem hcl coated beads tab er 24hr 420 mg</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	2	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	2	
<i>diltiazem hcl tab 30 mg</i>	2	
<i>diltiazem hcl tab 60 mg</i>	2	
<i>diltiazem hcl tab 90 mg</i>	2	
<i>diltiazem hcl tab 120 mg</i>	2	
<i>felodipine tab er 24hr 2.5 mg</i>	2	
<i>felodipine tab er 24hr 5 mg</i>	2	
<i>felodipine tab er 24hr 10 mg</i>	2	
<i>isradipine cap 2.5 mg</i>	2	
<i>isradipine cap 5 mg</i>	2	
<i>nicardipine hcl cap 20 mg</i>	2	
<i>nicardipine hcl cap 30 mg</i>	2	
<i>nifedipine tab er 24hr 30 mg</i>	2	
<i>nifedipine tab er 24hr 60 mg</i>	2	
<i>nifedipine tab er 24hr 90 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	2	
<i>nimodipine cap 30 mg</i>	4	
<i>nisoldipine tab er 24hr 8.5 mg</i>	4	
<i>nisoldipine tab er 24hr 17 mg</i>	4	
<i>nisoldipine tab er 24hr 20 mg</i>	4	
<i>nisoldipine tab er 24hr 25.5 mg</i>	4	
<i>nisoldipine tab er 24hr 30 mg</i>	4	
<i>nisoldipine tab er 24hr 34 mg</i>	4	
<i>nisoldipine tab er 24hr 40 mg</i>	4	
<i>taztia xt cap 120mg/24</i>	2	
<i>taztia xt cap 180mg/24</i>	2	
<i>taztia xt cap 240mg/24</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>taztia xt cap 300mg er</i>	2	
<i>taztia xt cap 360mg/24</i>	2	
<i>tiadylt cap 120mg/24</i>	2	
<i>tiadylt cap 180mg/24</i>	2	
<i>tiadylt cap 240mg/24</i>	2	
<i>tiadylt cap 300mg/24</i>	2	
<i>tiadylt cap 360mg/24</i>	2	
<i>tiadylt cap 420mg/24</i>	2	
<i>verapamil hcl cap er 24hr 100 mg</i>	2	
<i>verapamil hcl cap er 24hr 120 mg</i>	2	
<i>verapamil hcl cap er 24hr 180 mg</i>	2	
<i>verapamil hcl cap er 24hr 200 mg</i>	2	
<i>verapamil hcl cap er 24hr 240 mg</i>	2	
<i>verapamil hcl cap er 24hr 300 mg</i>	2	
<i>verapamil hcl cap er 24hr 360 mg</i>	2	
<i>verapamil hcl tab 40 mg</i>	2	
<i>verapamil hcl tab 80 mg</i>	2	
<i>verapamil hcl tab 120 mg</i>	2	
<i>verapamil hcl tab er 120 mg</i>	2	
<i>verapamil hcl tab er 180 mg</i>	2	
<i>verapamil hcl tab er 240 mg</i>	2	
DIURETICS		
<i>acetazolamide cap er 12hr 500 mg</i>	2	
<i>acetazolamide tab 125 mg</i>	2	
<i>acetazolamide tab 250 mg</i>	2	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	2	
<i>amiloride hcl tab 5 mg</i>	2	
<i>bumetanide tab 0.5 mg</i>	2	
<i>bumetanide tab 1 mg</i>	2	
<i>bumetanide tab 2 mg</i>	2	
<i>chlorthalidone tab 25 mg</i>	2	
<i>chlorthalidone tab 50 mg</i>	2	
<i>furosemide inj 10 mg/ml</i>	2	
<i>furosemide oral soln 10 mg/ml</i>	2	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>indapamide tab 1.25 mg</i>	1	
<i>indapamide tab 2.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
KERENDIA TAB 10MG	4	
KERENDIA TAB 20MG	4	
<i>methazolamide tab 25 mg</i>	2	
<i>methazolamide tab 50 mg</i>	2	
<i>metolazone tab 2.5 mg</i>	2	
<i>metolazone tab 5 mg</i>	2	
<i>metolazone tab 10 mg</i>	2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>toremide tab 5 mg</i>	2	
<i>toremide tab 10 mg</i>	2	
<i>toremide tab 20 mg</i>	2	
<i>toremide tab 100 mg</i>	2	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	
<i>triamterene cap 50 mg</i>	2	
<i>triamterene cap 100 mg</i>	2	
MISCELLANEOUS		
ADRENALIN INJ 1MG/ML	3	
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	3	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	3	
<i>clonidine hcl tab 0.1 mg</i>	2	
<i>clonidine hcl tab 0.2 mg</i>	2	
<i>clonidine hcl tab 0.3 mg</i>	2	
CORLANOR TAB 5MG	4	
CORLANOR TAB 7.5MG	4	
<i>digitek tab 0.25mg</i>	2	
<i>digitek tab 0.125mg</i>	2	QL (30 tabs / 30 days)
<i>digoxin inj 0.25 mg/ml</i>	2	
<i>digoxin oral soln 0.05 mg/ml</i>	3	
<i>digoxin tab 125 mcg (0.125 mg)</i>	2	QL (30 tabs / 30 days)
<i>digoxin tab 250 mcg (0.25 mg)</i>	2	
<i>droxidopa cap 100 mg</i>	5	QL (90 caps / 30 days), NM; DL
<i>droxidopa cap 200 mg</i>	5	QL (180 caps / 30 days), NM; DL
<i>droxidopa cap 300 mg</i>	5	QL (180 caps / 30 days), NM; DL
<i>hydralazine hcl tab 10 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>hydralazine hcl tab 25 mg</i>	2	
<i>hydralazine hcl tab 50 mg</i>	2	
<i>hydralazine hcl tab 100 mg</i>	2	
<i>metyrosine cap 250 mg</i>	5	DL
<i>midodrine hcl tab 2.5 mg</i>	2	
<i>midodrine hcl tab 5 mg</i>	2	
<i>midodrine hcl tab 10 mg</i>	2	
<i>minoxidil tab 2.5 mg</i>	2	
<i>minoxidil tab 10 mg</i>	2	
<i>ranolazine tab er 12hr 500 mg</i>	3	
<i>ranolazine tab er 12hr 1000 mg</i>	3	
VYNDAMAX CAP 61MG	5	NM, LA, PA; DL
VYNDAQEL CAP 20MG	5	NM, LA, PA; DL

NITRATES

<i>isosorbide dinitrate tab 5 mg</i>	2	
<i>isosorbide dinitrate tab 10 mg</i>	2	
<i>isosorbide dinitrate tab 20 mg</i>	2	
<i>isosorbide dinitrate tab 30 mg</i>	2	
<i>isosorbide mononitrate tab 10 mg</i>	2	
<i>isosorbide mononitrate tab 20 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	2	
NITRO-BID OIN 2%	3	
NITROGLYCER INJ 5MG/ML	3	
<i>nitroglycerin sl tab 0.3 mg</i>	2	
<i>nitroglycerin sl tab 0.4 mg</i>	2	
<i>nitroglycerin sl tab 0.6 mg</i>	2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	2	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	2	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	2	
NITROSTAT SUB 0.3MG	3	
NITROSTAT SUB 0.4MG	3	
NITROSTAT SUB 0.6MG	3	

PULMONARY ARTERIAL HYPERTENSION

ADEMPAS TAB 0.5MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 1.5MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 1MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL

Drug Name	Drug Tier	Requirements/Limits
ADEMPAS TAB 2.5MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ADEMPAS TAB 2MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
<i>alyq tab 20mg</i>	5	NM, PA; DL
<i>ambrisentan tab 5 mg</i>	5	NM, LA, PA; DL
<i>ambrisentan tab 10 mg</i>	5	NM, LA, PA; DL
OPSUMIT TAB 10MG	5	NM, LA, PA; DL
<i>sildenafil citrate for suspension 10 mg/ml</i>	5	QL (180 mL / 30 days), NM, PA; DL
<i>sildenafil citrate tab 20 mg</i>	2	QL (90 tabs / 30 days), NM, PA; DL
<i>tadalafil tab 20 mg (pah)</i>	5	NM, PA; DL
UPTRAVI TAB 200MCG	5	NM, LA, PA; DL
UPTRAVI TAB 400MCG	5	NM, LA, PA; DL
UPTRAVI TAB 600MCG	5	NM, LA, PA; DL
UPTRAVI TAB 800MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1000MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1200MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1400MCG	5	NM, LA, PA; DL
UPTRAVI TAB 1600MCG	5	NM, LA, PA; DL
VENTAVIS SOL 10MCG/ML	5	NM, LA, PA; DL
VENTAVIS SOL 20MCG/ML	5	NM, LA, PA; DL

CENTRAL NERVOUS SYSTEM

ANTI-ANXIETY

ALPRAZOLAM CON 1 MG/ML	3	DL
<i>alprazolam tab 0.5 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 0.25 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 1 mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tab 2 mg</i>	2	QL (150 tabs / 30 days)
<i>bupirone hcl tab 5 mg</i>	2	
<i>bupirone hcl tab 7.5 mg</i>	2	
<i>bupirone hcl tab 10 mg</i>	2	
<i>bupirone hcl tab 15 mg</i>	2	
<i>bupirone hcl tab 30 mg</i>	2	
<i>chlordiazepoxide hcl cap 5 mg</i>	2	
<i>chlordiazepoxide hcl cap 10 mg</i>	2	
<i>chlordiazepoxide hcl cap 25 mg</i>	2	
<i>fluvoxamine maleate tab 25 mg</i>	2	
<i>fluvoxamine maleate tab 50 mg</i>	2	
<i>fluvoxamine maleate tab 100 mg</i>	2	
<i>lorazepam con 2mg/ml</i>	2	DL
<i>lorazepam tab 0.5 mg</i>	2	
<i>lorazepam tab 1 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>lorazepam tab 2 mg</i>	2	
LOREEV XR CAP 1.5MG	4	
LOREEV XR CAP 1MG	4	
LOREEV XR CAP 2MG	4	
LOREEV XR CAP 3MG	4	
<i>oxazepam cap 10 mg</i>	2	
<i>oxazepam cap 15 mg</i>	2	
<i>oxazepam cap 30 mg</i>	2	

ANTICONVULSANTS

APTIOM TAB 200MG	5	DL
APTIOM TAB 400MG	5	DL
APTIOM TAB 600MG	5	DL
APTIOM TAB 800MG	5	DL
BRIVIACT INJ 50MG/5ML	5	DL
BRIVIACT SOL 10MG/ML	5	DL
BRIVIACT TAB 10MG	5	DL
BRIVIACT TAB 25MG	5	DL
BRIVIACT TAB 50MG	5	DL
BRIVIACT TAB 75MG	5	DL
BRIVIACT TAB 100MG	5	DL
<i>carbamazepine cap er 12hr 100 mg</i>	2	
<i>carbamazepine cap er 12hr 200 mg</i>	2	
<i>carbamazepine cap er 12hr 300 mg</i>	2	
<i>carbamazepine chew tab 100 mg</i>	2	
<i>carbamazepine susp 100 mg/5ml</i>	2	
<i>carbamazepine tab 200 mg</i>	2	
<i>carbamazepine tab er 12hr 100 mg</i>	2	
<i>carbamazepine tab er 12hr 200 mg</i>	2	
<i>carbamazepine tab er 12hr 400 mg</i>	2	
CELONTIN CAP 300MG	3	
<i>clobazam suspension 2.5 mg/ml</i>	4	
<i>clobazam tab 10 mg</i>	4	
<i>clobazam tab 20 mg</i>	4	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	2	
<i>clonazepam orally disintegrating tab 0.25 mg</i>	2	
<i>clonazepam orally disintegrating tab 0.125 mg</i>	2	
<i>clonazepam orally disintegrating tab 1 mg</i>	2	
<i>clonazepam orally disintegrating tab 2 mg</i>	2	
<i>clonazepam tab 0.5 mg</i>	2	
<i>clonazepam tab 1 mg</i>	2	
<i>clonazepam tab 2 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>clorazepate dipotassium tab 3.75 mg</i>	2	
<i>clorazepate dipotassium tab 7.5 mg</i>	2	
<i>clorazepate dipotassium tab 15 mg</i>	2	
DIACOMIT CAP 250MG	5	NM, LA, PA; DL
DIACOMIT CAP 500MG	5	NM, LA, PA; DL
DIACOMIT PAK 250MG	5	NM, LA, PA; DL
DIACOMIT PAK 500MG	5	NM, LA, PA; DL
DIASTAT ACDL GEL 5-10MG	4	
DIASTAT ACDL GEL 12.5-20	4	
DIASTAT PED GEL 2.5M GEL	4	
<i>diazepam conc 5 mg/ml</i>	3	DL
<i>diazepam oral soln 1 mg/ml</i>	2	DL
<i>diazepam rectal gel delivery system 2.5 mg</i>	2	
<i>diazepam rectal gel delivery system 10 mg</i>	2	
<i>diazepam rectal gel delivery system 20 mg</i>	2	
<i>diazepam tab 2 mg</i>	2	
<i>diazepam tab 5 mg</i>	2	
<i>diazepam tab 10 mg</i>	2	
DILANTIN CAP 30MG	4	
DILANTIN CAP 100MG	4	
DILANTIN CHW 50MG	4	
DILANTIN-125 SUS 125/5ML	4	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	2	
<i>divalproex sodium tab delayed release 125 mg</i>	2	
<i>divalproex sodium tab delayed release 250 mg</i>	2	
<i>divalproex sodium tab delayed release 500 mg</i>	2	
<i>divalproex sodium tab er 24 hr 250 mg</i>	3	
<i>divalproex sodium tab er 24 hr 500 mg</i>	3	
EPIDIOLEX SOL 100MG/ML	5	NM, LA, PA; DL
<i>epitol tab 200mg</i>	2	
EPRONTIA SOL 25MG/ML	4	
<i>ethosuximide cap 250 mg</i>	2	
<i>ethosuximide soln 250 mg/5ml</i>	2	
<i>felbamate susp 600 mg/5ml</i>	2	
<i>felbamate tab 400 mg</i>	2	
<i>felbamate tab 600 mg</i>	2	
FINTEPLA SOL 2.2MG/ML	5	NM, LA; DL
<i>fospheytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	2	
FYCOMPA SUS 0.5MG/ML	5	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

Drug Name	Drug Tier	Requirements/Limits
FYCOMPA TAB 2MG	4	QL (30 tabs / 30 days); DL
FYCOMPA TAB 4MG	5	DL
FYCOMPA TAB 6MG	5	DL
FYCOMPA TAB 8MG	5	DL
FYCOMPA TAB 10MG	5	DL
FYCOMPA TAB 12MG	5	DL
<i>gabapentin cap 100 mg</i>	2	
<i>gabapentin cap 300 mg</i>	2	
<i>gabapentin cap 400 mg</i>	2	
<i>gabapentin oral soln 250 mg/5ml</i>	2	
<i>gabapentin tab 600 mg</i>	2	
<i>gabapentin tab 800 mg</i>	2	
<i>lacosamide oral solution 10 mg/ml</i>	4	
<i>lacosamide tab 50 mg</i>	4	
<i>lacosamide tab 100 mg</i>	4	
<i>lacosamide tab 150 mg</i>	4	
<i>lacosamide tab 200 mg</i>	4	
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	
<i>lamotrigine tab 25 mg</i>	2	
<i>lamotrigine tab 100 mg</i>	2	
<i>lamotrigine tab 150 mg</i>	2	
<i>lamotrigine tab 200 mg</i>	2	
<i>lamotrigine tab chewable dispersible 5 mg</i>	2	
<i>lamotrigine tab chewable dispersible 25 mg</i>	2	
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	2	
<i>lamotrigine tab er 24hr 25 mg</i>	4	
<i>lamotrigine tab er 24hr 50 mg</i>	4	
<i>lamotrigine tab er 24hr 100 mg</i>	4	
<i>lamotrigine tab er 24hr 200 mg</i>	4	
<i>lamotrigine tab er 24hr 250 mg</i>	4	
<i>lamotrigine tab er 24hr 300 mg</i>	4	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	3	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	3	
<i>levetiracetam oral soln 100 mg/ml</i>	2	
<i>levetiracetam tab 250 mg</i>	2	
<i>levetiracetam tab 500 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levetiracetam tab 750 mg</i>	2	
<i>levetiracetam tab 1000 mg</i>	2	
<i>levetiracetam tab er 24hr 500 mg</i>	2	
<i>levetiracetam tab er 24hr 750 mg</i>	2	
NAYZILAM SPR 5MG	4	DL
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	2	
<i>oxcarbazepine tab 150 mg</i>	2	
<i>oxcarbazepine tab 300 mg</i>	2	
<i>oxcarbazepine tab 600 mg</i>	2	
<i>phenobarbital elixir 20 mg/5ml</i>	2	
<i>phenobarbital tab 15 mg</i>	2	
<i>phenobarbital tab 16.2 mg</i>	2	
<i>phenobarbital tab 30 mg</i>	2	
<i>phenobarbital tab 32.4 mg</i>	2	
<i>phenobarbital tab 60 mg</i>	2	
<i>phenobarbital tab 64.8 mg</i>	2	
<i>phenobarbital tab 97.2 mg</i>	2	
<i>phenobarbital tab 100 mg</i>	2	
<i>phenytoin chew tab 50 mg</i>	2	
<i>phenytoin sodium extended cap 100 mg</i>	2	
<i>phenytoin sodium extended cap 200 mg</i>	2	
<i>phenytoin sodium extended cap 300 mg</i>	2	
<i>phenytoin sodium inj 50 mg/ml</i>	2	
<i>phenytoin susp 125 mg/5ml</i>	2	
<i>pregabalin cap 25 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 50 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 75 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 100 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 150 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 200 mg</i>	3	QL (90 caps / 30 days)
<i>pregabalin cap 225 mg</i>	3	QL (60 caps / 30 days)
<i>pregabalin cap 300 mg</i>	3	QL (60 caps / 30 days)
<i>pregabalin soln 20 mg/ml</i>	3	QL (946 mL / 30 days); DL
<i>primidone tab 50 mg</i>	2	
<i>primidone tab 250 mg</i>	2	
<i>roweepra tab 500mg</i>	2	
<i>rufinamide susp 40 mg/ml</i>	5	DL
<i>rufinamide tab 200 mg</i>	4	
<i>rufinamide tab 400 mg</i>	5	DL
SPRITAM TAB 250MG	4	
SPRITAM TAB 500MG	4	
SPRITAM TAB 750MG	4	

Drug Name	Drug Tier	Requirements/Limits
SPRITAM TAB 1000MG	4	
SYMPAZAN MIS 5MG	4	
SYMPAZAN MIS 10MG	5	DL
SYMPAZAN MIS 20MG	5	DL
<i>tiagabine hcl tab 2 mg</i>	3	
<i>tiagabine hcl tab 4 mg</i>	3	
<i>tiagabine hcl tab 12 mg</i>	3	
<i>tiagabine hcl tab 16 mg</i>	3	
<i>topiramate sprinkle cap 15 mg</i>	2	
<i>topiramate sprinkle cap 25 mg</i>	2	
<i>topiramate tab 25 mg</i>	2	
<i>topiramate tab 50 mg</i>	2	
<i>topiramate tab 100 mg</i>	2	
<i>topiramate tab 200 mg</i>	2	
<i>valproate sodium inj 100 mg/ml</i>	2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	2	
<i>valproic acid cap 250 mg</i>	2	
VALTOCO SPR 5MG	4	
VALTOCO SPR 10MG	4	
VALTOCO SPR 15MG	4	
VALTOCO SPR 20MG	4	
<i>vigabatrin powd pack 500 mg</i>	5	NM, LA; DL
<i>vigabatrin tab 500 mg</i>	5	NM, LA; DL
<i>vigadrone pow 500mg</i>	5	NM, LA; DL
VIMPAT INJ 200MG/20	4	
VIMPAT SOL 10MG/ML	5	DL
VIMPAT TAB 50MG	4	
VIMPAT TAB 100MG	5	DL
VIMPAT TAB 150MG	5	DL
VIMPAT TAB 200MG	5	DL
XCOPRI PAK 12.5-25	4	
XCOPRI PAK 50-100MG	5	DL
XCOPRI PAK 100-150	5	DL
XCOPRI PAK 150-200	5	DL
XCOPRI TAB 50MG	5	DL
XCOPRI TAB 100MG	5	DL
XCOPRI TAB 150MG	5	DL
XCOPRI TAB 200MG	5	DL
ZONISADE SUS 100MG/5	3	
<i>zonisamide cap 25 mg</i>	2	
<i>zonisamide cap 50 mg</i>	2	
<i>zonisamide cap 100 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
ANTIDEMENTIA		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	2	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	2	
<i>donepezil hydrochloride tab 5 mg</i>	2	
<i>donepezil hydrochloride tab 10 mg</i>	2	
<i>donepezil hydrochloride tab 23 mg</i>	2	
<i>ergoloid mesylates tab 1 mg</i>	2	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	3	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	3	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	3	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	2	
<i>galantamine hydrobromide tab 4 mg</i>	2	
<i>galantamine hydrobromide tab 8 mg</i>	2	
<i>galantamine hydrobromide tab 12 mg</i>	2	
<i>memantine hcl cap er 24hr 7 mg</i>	3	
<i>memantine hcl cap er 24hr 14 mg</i>	3	
<i>memantine hcl cap er 24hr 21 mg</i>	3	
<i>memantine hcl cap er 24hr 28 mg</i>	3	
<i>memantine hcl oral solution 2 mg/ml</i>	2	
<i>memantine hcl tab 5 mg</i>	2	
<i>memantine hcl tab 10 mg</i>	2	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	2	
NAMZARIC CAP	4	
NAMZARIC CAP 7-10MG	4	
NAMZARIC CAP 14-10MG	4	
NAMZARIC CAP 21-10MG	4	
NAMZARIC CAP 28-10MG	4	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	2	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	2	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	3	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	3	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	3	

Drug Name	Drug Tier	Requirements/Limits
ANTIDEPRESSANTS		
<i>amitriptyline hcl tab 10 mg</i>	3	
<i>amitriptyline hcl tab 25 mg</i>	3	
<i>amitriptyline hcl tab 50 mg</i>	3	
<i>amitriptyline hcl tab 75 mg</i>	3	
<i>amitriptyline hcl tab 100 mg</i>	3	
<i>amitriptyline hcl tab 150 mg</i>	3	
<i>amoxapine tab 25 mg</i>	2	
<i>amoxapine tab 50 mg</i>	2	
<i>amoxapine tab 100 mg</i>	2	
<i>amoxapine tab 150 mg</i>	2	
<i>bupropion hcl tab 75 mg</i>	2	
<i>bupropion hcl tab 100 mg</i>	2	
<i>bupropion hcl tab er 12hr 100 mg</i>	2	
<i>bupropion hcl tab er 12hr 150 mg</i>	2	
<i>bupropion hcl tab er 12hr 200 mg</i>	2	
<i>bupropion hcl tab er 24hr 150 mg</i>	3	
<i>bupropion hcl tab er 24hr 300 mg</i>	3	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	2	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	2	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	2	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	2	
<i>clomipramine hcl cap 25 mg</i>	3	
<i>clomipramine hcl cap 50 mg</i>	3	
<i>desipramine hcl tab 10 mg</i>	2	
<i>desipramine hcl tab 25 mg</i>	2	
<i>desipramine hcl tab 50 mg</i>	2	
<i>desipramine hcl tab 75 mg</i>	2	
<i>desipramine hcl tab 100 mg</i>	2	
<i>desipramine hcl tab 150 mg</i>	2	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	3	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	3	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	3	
<i>doxepin hcl cap 10 mg</i>	3	
<i>doxepin hcl cap 25 mg</i>	3	
<i>doxepin hcl cap 50 mg</i>	3	
<i>doxepin hcl cap 75 mg</i>	3	
<i>doxepin hcl cap 100 mg</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl cap 150 mg</i>	3	
<i>doxepin hcl conc 10 mg/ml</i>	3	
DRIZALMA CAP 20MG DR	4	PA
DRIZALMA CAP 30MG DR	4	PA
DRIZALMA CAP 40MG DR	4	PA
DRIZALMA CAP 60MG DR	4	PA
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	3	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	3	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	3	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	3	
EMSAM DIS 6MG/24HR	5	DL
EMSAM DIS 9MG/24HR	5	DL
EMSAM DIS 12MG/24H	5	DL
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	2	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	2	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	2	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	2	
FETZIMA CAP 20MG	4	
FETZIMA CAP 40MG	4	
FETZIMA CAP 80MG	4	
FETZIMA CAP 120MG	4	
FETZIMA CAP TITRATIO	4	
<i>fluoxetine hcl cap 10 mg</i>	2	
<i>fluoxetine hcl cap 20 mg</i>	2	
<i>fluoxetine hcl cap 40 mg</i>	2	
<i>fluoxetine hcl solution 20 mg/5ml</i>	2	
<i>imipramine hcl tab 10 mg</i>	3	
<i>imipramine hcl tab 25 mg</i>	3	
<i>imipramine hcl tab 50 mg</i>	3	
MARPLAN TAB 10MG	4	
<i>mirtazapine orally disintegrating tab 15 mg</i>	2	
<i>mirtazapine orally disintegrating tab 30 mg</i>	2	
<i>mirtazapine orally disintegrating tab 45 mg</i>	2	
<i>mirtazapine tab 7.5 mg</i>	2	
<i>mirtazapine tab 15 mg</i>	2	
<i>mirtazapine tab 30 mg</i>	2	
<i>mirtazapine tab 45 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>nefazodone hcl tab 50 mg</i>	2	
<i>nefazodone hcl tab 100 mg</i>	2	
<i>nefazodone hcl tab 150 mg</i>	2	
<i>nefazodone hcl tab 200 mg</i>	2	
<i>nefazodone hcl tab 250 mg</i>	2	
<i>nortriptyline hcl cap 10 mg</i>	2	
<i>nortriptyline hcl cap 25 mg</i>	2	
<i>nortriptyline hcl cap 50 mg</i>	2	
<i>nortriptyline hcl cap 75 mg</i>	2	
<i>nortriptyline hcl soln 10 mg/5ml</i>	2	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	2	
<i>paroxetine hcl tab 10 mg</i>	2	
<i>paroxetine hcl tab 20 mg</i>	2	
<i>paroxetine hcl tab 30 mg</i>	2	
<i>paroxetine hcl tab 40 mg</i>	2	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	3	
<i>paroxetine hcl tab er 24hr 25 mg</i>	3	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	3	
<i>phenelzine sulfate tab 15 mg</i>	2	
<i>protriptyline hcl tab 5 mg</i>	2	
<i>protriptyline hcl tab 10 mg</i>	2	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	2	
<i>sertraline hcl tab 25 mg</i>	2	
<i>sertraline hcl tab 50 mg</i>	2	
<i>sertraline hcl tab 100 mg</i>	2	
<i>tranylcypromine sulfate tab 10 mg</i>	2	
<i>trazodone hcl tab 50 mg</i>	2	
<i>trazodone hcl tab 100 mg</i>	2	
<i>trazodone hcl tab 150 mg</i>	2	
<i>trazodone hcl tab 300 mg</i>	2	
<i>trimipramine maleate cap 25 mg</i>	3	
<i>trimipramine maleate cap 50 mg</i>	3	
<i>trimipramine maleate cap 100 mg</i>	3	
TRINTELLIX TAB 5MG	2	
TRINTELLIX TAB 10MG	2	
TRINTELLIX TAB 20MG	2	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	2	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	2	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	2	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	3	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	3	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	3	
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	3	
VENLAFAXINE TAB 112.5MG	3	
VIIBRYD KIT STARTER	4	
VIIBRYD TAB 10MG	4	
VIIBRYD TAB 20MG	4	
VIIBRYD TAB 40MG	4	
<i>vilazodone hcl tab 10 mg</i>	3	
<i>vilazodone hcl tab 20 mg</i>	3	
<i>vilazodone hcl tab 40 mg</i>	3	
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl cap 100 mg</i>	2	
<i>amantadine hcl soln 50 mg/5ml</i>	2	
<i>amantadine hcl tab 100 mg</i>	2	
<i>benztropine mesylate inj 1 mg/ml</i>	3	
<i>benztropine mesylate tab 0.5 mg</i>	2	
<i>benztropine mesylate tab 1 mg</i>	2	
<i>benztropine mesylate tab 2 mg</i>	2	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	2	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	2	
<i>carbidopa & levodopa tab 10-100 mg</i>	2	
<i>carbidopa & levodopa tab 25-100 mg</i>	2	
<i>carbidopa & levodopa tab 25-250 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa & levodopa tab er 25-100 mg</i>	2	
<i>carbidopa & levodopa tab er 50-200 mg</i>	2	
<i>carbidopa tab 25 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	3	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	3	
<i>entacapone tab 200 mg</i>	3	
INBRIJA CAP 42MG	5	NM, LA; DL
KYNMOBI MIS 10MG	5	NM; DL
KYNMOBI MIS 15MG	5	NM; DL
KYNMOBI MIS 20MG	5	NM; DL
KYNMOBI MIS 25MG	5	NM; DL
KYNMOBI MIS 30MG	5	NM; DL
NEUPRO DIS 1MG/24HR	4	
NEUPRO DIS 2MG/24HR	4	
NEUPRO DIS 3MG/24HR	4	
NEUPRO DIS 4MG/24HR	4	
NEUPRO DIS 6MG/24HR	4	
NEUPRO DIS 8MG/24HR	4	
NOURIANZ TAB 20MG	5	NM, LA; DL
NOURIANZ TAB 40MG	5	NM, LA; DL
<i>pramipexole dihydrochloride tab 0.5 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	2	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	2	
<i>pramipexole dihydrochloride tab 1 mg</i>	2	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	2	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	3	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	3	
<i>ropinirole hydrochloride tab 0.5 mg</i>	2	
<i>ropinirole hydrochloride tab 0.25 mg</i>	2	
<i>ropinirole hydrochloride tab 1 mg</i>	2	
<i>ropinirole hydrochloride tab 2 mg</i>	2	
<i>ropinirole hydrochloride tab 3 mg</i>	2	
<i>ropinirole hydrochloride tab 4 mg</i>	2	

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<i>ropinirole hydrochloride tab 5 mg</i>	2	
RYTARY CAP 95MG	4	
RYTARY CAP 145MG	4	
RYTARY CAP 195MG	4	
RYTARY CAP 245MG	4	
<i>selegiline hcl cap 5 mg</i>	3	
<i>selegiline hcl tab 5 mg</i>	3	
<i>tolcapone tab 100 mg</i>	5	DL
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	2	
<i>trihexyphenidyl hcl tab 2 mg</i>	2	
<i>trihexyphenidyl hcl tab 5 mg</i>	2	

ANTIPSYCHOTICS

ABILIFY MAIN INJ 300MG	5	QL (1 injection / 28 days); DL
ABILIFY MAIN INJ 400MG	5	QL (1 injection / 28 days); DL
<i>aripiprazole oral solution 1 mg/ml</i>	2	
<i>aripiprazole orally disintegrating tab 10 mg</i>	2	
<i>aripiprazole orally disintegrating tab 15 mg</i>	2	
<i>aripiprazole tab 2 mg</i>	2	
<i>aripiprazole tab 5 mg</i>	2	
<i>aripiprazole tab 10 mg</i>	2	
<i>aripiprazole tab 15 mg</i>	2	
<i>aripiprazole tab 20 mg</i>	2	
<i>aripiprazole tab 30 mg</i>	2	
ARISTADA INJ 441MG/1.	5	DL
ARISTADA INJ 662MG/2	5	DL
ARISTADA INJ 882MG/3	5	DL
ARISTADA INJ 1064MG	5	DL
ARISTADA INJ INITIO	5	DL
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	4	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	4	
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	4	
CAPLYTA CAP 10.5MG	5	DL
CAPLYTA CAP 21MG	5	DL
CAPLYTA CAP 42MG	5	DL
<i>chlorpromazine hcl inj 50 mg/2ml</i>	3	
<i>chlorpromazine hcl tab 10 mg</i>	3	
<i>chlorpromazine hcl tab 25 mg</i>	3	
<i>chlorpromazine hcl tab 50 mg</i>	3	
<i>chlorpromazine hcl tab 100 mg</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>chlorpromazine hcl tab 200 mg</i>	3	
<i>clozapine orally disintegrating tab 12.5 mg</i>	3	
<i>clozapine orally disintegrating tab 25 mg</i>	3	
<i>clozapine orally disintegrating tab 100 mg</i>	3	
<i>clozapine orally disintegrating tab 150 mg</i>	3	
<i>clozapine orally disintegrating tab 200 mg</i>	5	DL
<i>clozapine tab 25 mg</i>	2	
<i>clozapine tab 50 mg</i>	2	
<i>clozapine tab 100 mg</i>	2	
<i>clozapine tab 200 mg</i>	2	
FANAPT TAB 1MG	5	DL
FANAPT TAB 2MG	5	DL
FANAPT TAB 4MG	5	DL
FANAPT TAB 6MG	5	DL
FANAPT TAB 8MG	5	DL
FANAPT TAB 10MG	5	DL
FANAPT TAB 12MG	5	DL
<i>fluphenazine decanoate inj 25 mg/ml</i>	2	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	2	
<i>fluphenazine hcl inj 2.5 mg/ml</i>	2	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	2	
<i>fluphenazine hcl tab 1 mg</i>	2	
<i>fluphenazine hcl tab 2.5 mg</i>	2	
<i>fluphenazine hcl tab 5 mg</i>	2	
<i>fluphenazine hcl tab 10 mg</i>	2	
GEODON INJ 20MG	4	DL
<i>haloperidol decanoate im soln 50 mg/ml</i>	2	
<i>haloperidol decanoate im soln 100 mg/ml</i>	2	
<i>haloperidol lactate inj 5 mg/ml</i>	2	
<i>haloperidol lactate oral conc 2 mg/ml</i>	2	
<i>haloperidol tab 0.5 mg</i>	2	
<i>haloperidol tab 1 mg</i>	2	
<i>haloperidol tab 2 mg</i>	2	
<i>haloperidol tab 5 mg</i>	2	
<i>haloperidol tab 10 mg</i>	2	
<i>haloperidol tab 20 mg</i>	2	
INVEGA HAFYE INJ 1092MG	5	QL (1 injection / 180 days); DL
INVEGA HAFYE INJ 1560MG	5	QL (1 injection / 180 days); DL
INVEGA SUST INJ 39/0.25	3	QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	5	QL (1 injection / 28 days); DL

Drug Name	Drug Tier	Requirements/Limits
INVEGA SUST INJ 117/0.75	5	QL (1 injection / 28 days); DL
INVEGA SUST INJ 156MG/ML	5	QL (1 injection / 28 days); DL
INVEGA SUST INJ 234/1.5	5	QL (1 injection / 28 days); DL
INVEGA TRINZ INJ 273MG	5	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 410MG	5	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 546MG	5	QL (1 syringe / 90 days); DL
INVEGA TRINZ INJ 819MG	5	QL (1 syringe / 90 days); DL
LATUDA TAB 20MG	4	
LATUDA TAB 40MG	4	
LATUDA TAB 60MG	4	
LATUDA TAB 80MG	4	
LATUDA TAB 120MG	4	
<i>loxapine succinate cap 5 mg</i>	2	
<i>loxapine succinate cap 10 mg</i>	2	
<i>loxapine succinate cap 25 mg</i>	2	
<i>loxapine succinate cap 50 mg</i>	2	
LYBALVI TAB 5-10MG	5	DL
LYBALVI TAB 10-10MG	5	DL
LYBALVI TAB 15-10MG	5	DL
LYBALVI TAB 20-10MG	5	DL
<i>molindone hcl tab 5 mg</i>	4	
<i>molindone hcl tab 10 mg</i>	4	
<i>molindone hcl tab 25 mg</i>	4	
NUPLAZID CAP 34MG	5	NM, LA, PA; DL
NUPLAZID TAB 10MG	5	NM, LA, PA; DL
<i>olanzapine for im inj 10 mg</i>	2	
<i>olanzapine orally disintegrating tab 5 mg</i>	2	
<i>olanzapine orally disintegrating tab 10 mg</i>	2	
<i>olanzapine orally disintegrating tab 15 mg</i>	2	
<i>olanzapine orally disintegrating tab 20 mg</i>	2	
<i>olanzapine tab 2.5 mg</i>	2	
<i>olanzapine tab 5 mg</i>	2	
<i>olanzapine tab 7.5 mg</i>	2	
<i>olanzapine tab 10 mg</i>	2	
<i>olanzapine tab 15 mg</i>	2	
<i>olanzapine tab 20 mg</i>	2	
<i>paliperidone tab er 24hr 1.5 mg</i>	4	
<i>paliperidone tab er 24hr 3 mg</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>paliperidone tab er 24hr 6 mg</i>	4	
<i>paliperidone tab er 24hr 9 mg</i>	4	
<i>perphenazine tab 2 mg</i>	2	
<i>perphenazine tab 4 mg</i>	2	
<i>perphenazine tab 8 mg</i>	2	
<i>perphenazine tab 16 mg</i>	2	
PERSERIS INJ 90MG	5	DL
PERSERIS INJ 120MG	5	DL
<i>pimozide tab 1 mg</i>	2	
<i>pimozide tab 2 mg</i>	2	
<i>quetiapine fumarate tab 25 mg</i>	2	
<i>quetiapine fumarate tab 50 mg</i>	2	
<i>quetiapine fumarate tab 100 mg</i>	2	
<i>quetiapine fumarate tab 150 mg</i>	2	
<i>quetiapine fumarate tab 200 mg</i>	2	
<i>quetiapine fumarate tab 300 mg</i>	2	
<i>quetiapine fumarate tab 400 mg</i>	2	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	3	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	3	
REXULTI TAB 0.5MG	5	DL
REXULTI TAB 0.25MG	5	DL
REXULTI TAB 1MG	5	DL
REXULTI TAB 2MG	5	QL (30 tabs / 30 days); DL
REXULTI TAB 3MG	5	QL (30 tabs / 30 days); DL
REXULTI TAB 4MG	5	QL (30 tabs / 30 days); DL
RISPERDAL INJ 12.5MG	4	DL
RISPERDAL INJ 25MG	4	DL
RISPERDAL INJ 37.5MG	4	DL
RISPERDAL INJ 50MG	4	DL
<i>risperidone orally disintegrating tab 0.5 mg</i>	2	
<i>risperidone orally disintegrating tab 0.25 mg</i>	2	
<i>risperidone orally disintegrating tab 1 mg</i>	2	
<i>risperidone orally disintegrating tab 2 mg</i>	2	
<i>risperidone orally disintegrating tab 3 mg</i>	2	
<i>risperidone orally disintegrating tab 4 mg</i>	2	
<i>risperidone soln 1 mg/ml</i>	2	
<i>risperidone tab 0.5 mg</i>	2	

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

ATTENTION DEFICIT HYPERACTIVITY DISORDER

<i>amphetamine-dextroamphetamine tab 5 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	2	
<i>amphetamine-dextroamphetamine tab 10 mg</i>	2	

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

HYPNOTICS

<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	3	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	3	QL (30 tabs / 30 days)
<i>flurazepam hcl cap 15 mg</i>	2	QL (30 caps / 30 days); DL
<i>flurazepam hcl cap 30 mg</i>	2	QL (30 caps / 30 days); DL
HETLIOZ CAP 20MG	5	NM, LA, PA; DL
<i>ramelteon tab 8 mg</i>	3	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>temazepam cap 7.5 mg</i>	2	QL (30 caps / 30 days); DL
<i>temazepam cap 15 mg</i>	2	QL (30 caps / 30 days); DL
<i>temazepam cap 22.5 mg</i>	2	QL (30 caps / 30 days); DL
<i>temazepam cap 30 mg</i>	2	QL (30 caps / 30 days); DL
<i>zaleplon cap 5 mg</i>	3	QL (30 caps / 30 days); DL
<i>zaleplon cap 10 mg</i>	3	QL (30 caps / 30 days); DL
<i>zolpidem tartrate tab 5 mg</i>	2	QL (30 tabs / 30 days); DL
<i>zolpidem tartrate tab 10 mg</i>	2	QL (30 tabs / 30 days); DL
<i>zolpidem tartrate tab er 6.25 mg</i>	2	QL (30 tabs / 30 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	2	QL (30 tabs / 30 days)

MIGRAINE

<i>AIMOVIG INJ 70MG/ML</i>	3	NM, PA
<i>AIMOVIG INJ 140MG/ML</i>	3	NM, PA
<i>AJOVY INJ 225/1.5</i>	3	NM, PA
<i>almotriptan malate tab 6.25 mg</i>	3	QL (12 tabs / 30 days)
<i>almotriptan malate tab 12.5 mg</i>	3	QL (8 tabs / 30 days)
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	5	QL (24 ampules / 30 days); DL
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	5	QL (8 mL / 28 days); DL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	2	QL (8 tabs / 30 days)
<i>EMGALITY INJ 100MG/ML</i>	3	NM, PA
<i>EMGALITY INJ 120MG/ML</i>	3	NM, PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	3	QL (43 tabs / 30 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	2	QL (18 tabs / 30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	2	QL (9 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	2	QL (12 tabs / 30 days)
<i>sumatriptan nasal spray 5 mg/act</i>	4	QL (12 units / 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

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan nasal spray 20 mg/act</i>	4	QL (12 units / 30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	4	QL (8 vials / 30 days)
<i>sumatriptan succinate tab 25 mg</i>	2	QL (18 tabs / 30 days)
<i>sumatriptan succinate tab 50 mg</i>	2	QL (18 tabs / 30 days)
<i>sumatriptan succinate tab 100 mg</i>	2	QL (9 tabs / 30 days)
UBRELVY TAB 50MG	5	QL (16 tabs / 30 days); DL
UBRELVY TAB 100MG	5	QL (16 tabs / 30 days); DL
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	4	QL (12 units / 30 days)
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	4	QL (12 units / 30 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	2	QL (8 tabs / 30 days)
<i>zolmitriptan tab 2.5 mg</i>	2	QL (12 tabs / 30 days)
<i>zolmitriptan tab 5 mg</i>	2	QL (8 tabs / 30 days)
MISCELLANEOUS		
AUSTEDO TAB 6MG	5	NM, LA, PA; DL
AUSTEDO TAB 9MG	5	NM, LA, PA; DL
AUSTEDO TAB 12MG	5	NM, LA, PA; DL
ENSPRYNG INJ	5	NM, LA, PA; DL
EVRYSDI SOL	5	QL (240 mL / 30 days), NM, LA, PA; DL
EXSERVAN MIS 50MG	5	NM, LA; DL
FIRDAPSE TAB 10MG	5	NM, LA, PA; DL
INGREZZA CAP 40-80MG	5	NM, LA, PA; DL
INGREZZA CAP 40MG	5	NM, LA, PA; DL
INGREZZA CAP 60MG	5	NM, LA, PA; DL
INGREZZA CAP 80MG	5	NM, LA, PA; DL
<i>lithium carbonate cap 150 mg</i>	2	
<i>lithium carbonate cap 300 mg</i>	2	
<i>lithium carbonate cap 600 mg</i>	2	
<i>lithium carbonate tab 300 mg</i>	2	
<i>lithium carbonate tab er 300 mg</i>	2	
<i>lithium carbonate tab er 450 mg</i>	2	
LITHIUM SOL 8MEQ/5ML	3	
NUEDEXTA CAP 20-10MG	3	PA; DL
<i>pyridostigmine bromide tab 60 mg</i>	2	
<i>pyridostigmine bromide tab er 180 mg</i>	3	
<i>riluzole tab 50 mg</i>	4	
TEGSEDI INJ 284/1.5	5	NM, LA, PA; DL
<i>tetrabenazine tab 12.5 mg</i>	4	NM, PA
<i>tetrabenazine tab 25 mg</i>	4	NM, PA

Drug Name	Drug Tier	Requirements/Limits
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO TAB 7MG	5	QL (30 tabs / 30 days), NM, LA; DL
AUBAGIO TAB 14MG	5	QL (30 tabs / 30 days), NM, LA; DL
AVONEX PEN KIT 30MCG	5	NM; DL
AVONEX PREFL KIT 30MCG	5	NM; DL
BAFIERTAM CAP 95MG	5	NM, LA; DL
BETASERON INJ 0.3MG	5	NM; DL
<i>dalfampridine tab er 12hr 10 mg</i>	3	QL (60 tabs / 30 days), NM; DL
<i>dimethyl fumarate capsule delayed release 120 mg</i>	5	QL (60 caps / 30 days), NM; DL
<i>dimethyl fumarate capsule delayed release 240 mg</i>	5	QL (60 caps / 30 days), NM; DL
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	5	NM; DL
GILENYA CAP 0.5MG	5	QL (30 caps / 30 days), NM; DL
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	5	QL (30 syringes / 30 days), NM; DL
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	5	NM; DL
<i>glatopa inj 20mg/ml</i>	5	QL (30 mL / 30 days), NM; DL
<i>glatopa inj 40mg/ml</i>	5	NM; DL
KESIMPTA INJ 20/.4ML	5	NM, LA; DL
MAYZENT PAK STARTER	4	NM, LA; (7 tablet pack)
MAYZENT PAK STARTER	5	NM, LA; DL; (12 tablet pack)
MAYZENT TAB 0.25MG	5	NM, LA; DL
MAYZENT TAB 1MG	5	NM, LA; DL
MAYZENT TAB 2MG	5	NM, LA; DL
PLEGRIDY INJ	5	NM, LA; DL
PLEGRIDY INJ PEN	5	NM, LA; DL
REBIF INJ 22/0.5	5	NM; DL
REBIF INJ 44/0.5	5	NM; DL
REBIF REBIDO INJ 22/0.5	5	NM; DL
REBIF REBIDO INJ 44/0.5	5	NM; DL
REBIF REBIDO INJ TITRATN	5	NM; DL
REBIF TITRTN INJ PACK	5	NM; DL
TYSABRI INJ 300/15ML	5	NM, LA; DL
VUMERITY CAP 231MG	5	NM, LA; DL
MUSCULOSKELETAL THERAPY AGENTS		
<i>baclofen tab 10 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>baclofen tab 20 mg</i>	2	
<i>cyclobenzaprine hcl tab 5 mg</i>	3	
<i>cyclobenzaprine hcl tab 10 mg</i>	3	
<i>metaxalone tab 800 mg</i>	3	DL
<i>methocarbamol tab 500 mg</i>	3	DL
<i>methocarbamol tab 750 mg</i>	3	DL
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	2	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	2	

NARCOLEPSY/CATAPLEXY

<i>armodafinil tab 50 mg</i>	4	QL (60 tabs / 30 days), PA
<i>armodafinil tab 150 mg</i>	4	QL (30 tabs / 30 days), PA
<i>armodafinil tab 200 mg</i>	4	QL (30 tabs / 30 days), PA
<i>armodafinil tab 250 mg</i>	4	QL (30 tabs / 30 days), PA
<i>modafinil tab 100 mg</i>	3	QL (30 tabs / 30 days), PA
<i>modafinil tab 200 mg</i>	3	QL (60 tabs / 30 days), PA
WAKIX TAB 4.45MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
WAKIX TAB 17.8MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
XYREM SOL 500MG/ML	5	QL (540 mL / 30 days), NM, LA, PA; DL

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	3	
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	2	
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	2	
<i>buprenorphine hcl-naloxone hcl sl film 2- 0.5 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	3	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2- 0.5 mg (base equiv)</i>	2	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (90 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	2	
<i>disulfiram tab 250 mg</i>	2	
<i>disulfiram tab 500 mg</i>	2	
KLOXXADO SPR 8MG	4	DL
<i>naloxone hcl inj 0.4 mg/ml</i>	2	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	2	DL
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	2	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	2	DL
<i>naltrexone hcl tab 50 mg</i>	2	
NARCAN SPR 4MG	4	DL
NICOTROL INH	4	
NICOTROL NS SPR 10MG/ML	4	
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	4	
<i>varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack</i>	4	
<i>varenicline tartrate tab 1 mg (base equiv)</i>	4	
VIVITROL INJ 380MG	5	NM; DL
ZIMHI SOL	4	DL

ENDOCRINE AND METABOLIC

ANDROGENS

METHITEST TAB 10MG	4	
<i>methyltestosterone cap 10 mg</i>	4	
<i>oxandrolone tab 2.5 mg</i>	2	QL (120 tabs / 30 days); DL
<i>oxandrolone tab 10 mg</i>	3	DL
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	2	
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	2	
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	2	
<i>testosterone td gel 10mg/act (2%)</i>	3	
<i>testosterone td gel 12.5 mg/act (1%)</i>	3	
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	3	
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	3	
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	3	
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	3	
<i>testosterone td gel 50 mg/5gm (1%)</i>	3	
<i>testosterone td soln 30 mg/act</i>	3	

Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETICS		
<i>acarbose tab 25 mg</i>	2	
<i>acarbose tab 50 mg</i>	2	
<i>acarbose tab 100 mg</i>	2	
BYDUREON BC INJ 2/0.85ML	2	QL (4 pens / 28 days)
BYDUREON INJ 2MG	3	QL (4 vials / 28 days)
BYETTA INJ 5MCG	2	QL (1 pen / 30 days)
BYETTA INJ 10MCG	2	QL (1 pen / 30 days)
FARXIGA TAB 5MG	2	QL (30 tabs / 30 days)
FARXIGA TAB 10MG	2	QL (30 tabs / 30 days)
<i>glimepiride tab 1 mg</i>	1	QL (240 tabs / 30 days)
<i>glimepiride tab 2 mg</i>	1	QL (120 tabs / 30 days)
<i>glimepiride tab 4 mg</i>	1	QL (60 tabs / 30 days)
<i>glipizide tab 5 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide tab 10 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 2.5 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide tab er 24hr 5 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide tab er 24hr 10 mg</i>	1	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	2	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	2	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	2	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	3	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	3	QL (30 tabs / 30 days)
INVOKAMET TAB 50-500MG	4	QL (60 tabs / 30 days)
INVOKAMET TAB 50-1000	4	QL (60 tabs / 30 days)
INVOKAMET TAB 150-500	4	QL (60 tabs / 30 days)
INVOKAMET TAB 150-1000	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 50-500MG	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 50-1000	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 150-500	4	QL (60 tabs / 30 days)
INVOKAMET XR TAB 150-1000	4	QL (60 tabs / 30 days)
INVOKANA TAB 100MG	2	QL (60 tabs / 30 days)
INVOKANA TAB 300MG	2	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	3	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	3	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	3	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	3	QL (30 tabs / 30 days)
JANUVIA TAB 50MG	3	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	3	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	2	QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	2	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	3	QL (60 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
JENTADUETO TAB 2.5-850	3	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	3	QL (60 tabs / 30 days)
JENTADUETO TAB XR	3	QL (30 tabs / 30 days)
<i>metformin hcl tab 500 mg</i>	1	QL (150 tabs / 30 days)
<i>metformin hcl tab 850 mg</i>	1	QL (90 tabs / 30 days)
<i>metformin hcl tab 1000 mg</i>	1	QL (75 tabs / 30 days)
<i>metformin hcl tab er 24hr 500 mg</i>	1	QL (120 tabs / 30 days)
<i>metformin hcl tab er 24hr 750 mg</i>	1	QL (60 tabs / 30 days)
<i>miglitol tab 25 mg</i>	2	
<i>miglitol tab 50 mg</i>	2	
<i>miglitol tab 100 mg</i>	2	
<i>nateglinide tab 60 mg</i>	2	
<i>nateglinide tab 120 mg</i>	2	
OZEMPIC INJ 2/1.5ML	2	QL (1 pen / 28 days); 0.25 OR 0.5MG/DOSE
OZEMPIC INJ 4MG/3ML	2	QL (1 pen / 28 days)
OZEMPIC INJ 8MG/3ML	2	QL (1 pen / 28 days)
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	2	QL (30 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	2	QL (90 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	2	QL (90 tabs / 30 days)
<i>repaglinide tab 0.5 mg</i>	2	
<i>repaglinide tab 1 mg</i>	2	
<i>repaglinide tab 2 mg</i>	2	
RYBELSUS TAB 3MG	2	QL (30 tabs / 30 days)
RYBELSUS TAB 7MG	2	QL (30 tabs / 30 days)
RYBELSUS TAB 14MG	2	QL (30 tabs / 30 days)
SYMLINPEN 60 INJ 1000MCG	4	
SYMLNPEN 120 INJ 1000MCG	4	
SYNJARDY TAB	3	QL (60 tabs / 30 days); (12.5-1000MG)
SYNJARDY TAB 5-500MG	3	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB	3	QL (60 tabs / 30 days); (12.5-1000MG)
SYNJARDY XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	3	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	3	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	3	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
TRIJARDY XR TAB	3	QL (30 tabs / 30 days); (10-5-1000 MG and 25-5-1000 MG)
TRIJARDY XR TAB	3	QL (60 tabs / 30 days); (12.5-2.5-1000 MG and 5-2.5-1000 MG)
TRULICITY INJ 0.75/0.5	2	QL (4 pens / 28 days)
TRULICITY INJ 1.5/0.5	2	QL (4 pens / 28 days)
TRULICITY INJ 3/0.5	3	QL (4 pens / 28 days)
TRULICITY INJ 4.5/0.5	3	QL (4 pens / 28 days)
VICTOZA INJ 18MG/3ML	2	QL (3 pens / 30 days)
XIGDUO XR TAB 2.5-1000	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	3	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	3	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	3	QL (30 tabs / 30 days)

ANTIDIABETICS, INSULINS

BASAGLAR INJ 100UNIT	3	
BD SWAB REG PAD SNGL USE	3	
GAUZE PADS & DRESSINGS - PADS 2 X 2	3	
HUMALOG INJ 100/ML	3	
HUMALOG JR INJ 100/ML	3	
HUMALOG KWIK INJ 100/ML	3	
HUMALOG KWIK INJ 200/ML	3	
HUMALOG MIX INJ 50/50	3	
HUMALOG MIX INJ 50/50KWP	3	
HUMALOG MIX INJ 75/25KWP	3	
HUMALOG MIX SUS 75/25	3	
HUMULIN INJ 70/30	3	
HUMULIN INJ 70/30KWP	3	
HUMULIN N INJ U-100	3	
HUMULIN N INJ U-100KWP	3	
HUMULIN R INJ U-100	3	
HUMULIN R INJ U-500	3	
INSULIN LISP INJ 100/ML	3	
INSULIN LISP INJ JUNIOR	3	
INSULIN LISP INJ PROTAMIN	3	
INSULIN PEN NEEDLE	3	
INSULIN SYRINGE (DISP) U-100 0.3 ML	3	
INSULIN SYRINGE (DISP) U-100 1 ML	3	
INSULIN SYRINGE (DISP) U-100 1/2 ML	3	
ISOPROPYL ALCOHOL 0.7 ML/ML	3	
LANTUS INJ 100/ML	3	
LANTUS SOLOS INJ 100/ML	3	

Drug Name	Drug Tier	Requirements/Limits
LEVEMIR INJ	3	
LEVEMIR INJ FLEXTOUC	3	
LYUMJEV INJ 100UT/ML	3	
LYUMJEV KWPN INJ 100UT/ML	3	
LYUMJEV KWPN INJ 200UT/ML	3	
NEEDLES, INSULIN DISP., SAFETY	3	
OMNIPOD DASH MIS PODS	4	QL (10 pods / 30 days)
OMNIPOD MIS CLASSIC	4	QL (10 pods / 30 days)
OMNIPOD PDM KIT CLASSIC	4	QL (1 kit / 365 days)
TOUJEO MAX INJ 300IU/ML	3	
TOUJEO SOLO INJ 300IU/ML	3	
TRESIBA FLEX INJ 100UNIT	3	
TRESIBA FLEX INJ 200UNIT	3	
TRESIBA INJ 100UNIT	3	
V-GO 20 KIT	4	QL (30 devices (1 box) / 30 days)
V-GO 30 KIT	4	QL (30 devices (1 box) / 30 days)
V-GO 40 KIT	4	QL (30 devices (1 box) / 30 days)
XULTOPHY INJ 100/3.6	3	
CALCIUM REGULATORS		
<i>alendronate sodium oral soln 70 mg/75ml</i>	2	
<i>alendronate sodium tab 10 mg</i>	2	
<i>alendronate sodium tab 35 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	2	
FORTEO INJ 600/2.4	5	QL (2.4 mL / 28 days), NM, PA; DL
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	4	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	2	
NATPARA INJ 25MCG	5	NM, LA, PA; DL
NATPARA INJ 50MCG	5	NM, LA, PA; DL
NATPARA INJ 75MCG	5	NM, LA, PA; DL
NATPARA INJ 100MCG	5	NM, LA, PA; DL
<i>pamidronate disodium iv soln 3 mg/ml</i>	2	
<i>pamidronate disodium iv soln 9 mg/ml</i>	2	
PROLIA INJ 60MG/ML	4	QL (2 injections / year), NM
<i>risedronate sodium tab 5 mg</i>	2	
<i>risedronate sodium tab 30 mg</i>	2	
<i>risedronate sodium tab 35 mg</i>	2	
<i>risedronate sodium tab 150 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>risedronate sodium tab delayed release 35 mg</i>	2	
TERIPARATIDE INJ	5	QL (2.48 mL / 28 days), NM, PA; DL
XGEVA INJ	5	NM, PA; DL
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	NM
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	NM

CHELATING AGENTS

CHEMET CAP 100MG	5	DL
<i>deferasirox granules packet 90 mg</i>	5	NM; DL
<i>deferasirox granules packet 180 mg</i>	5	NM; DL
<i>deferasirox granules packet 360 mg</i>	5	NM; DL
<i>deferasirox tab 90 mg</i>	4	NM; DL
<i>deferasirox tab 180 mg</i>	5	NM; DL
<i>deferasirox tab 360 mg</i>	5	NM; DL
<i>deferasirox tab for oral susp 125 mg</i>	5	NM; DL
<i>deferasirox tab for oral susp 250 mg</i>	5	NM; DL
<i>deferasirox tab for oral susp 500 mg</i>	5	NM; DL
<i>deferiprone tab 500 mg</i>	5	NM, LA; DL
<i>deferiprone tab 1000 mg</i>	5	NM, LA; DL
DEPEN TITRA TAB 250MG	5	NM; DL
LOKELMA PAK 5GM	4	
<i>penicillamine tab 250 mg</i>	5	NM; DL
<i>sodium polystyrene sulfonate powder</i>	2	
<i>sps sus 15gm/60</i>	2	
<i>trientine hcl cap 250 mg</i>	5	NM, PA; DL
VELTASSA POW 8.4GM	5	DL
VELTASSA POW 16.8GM	5	DL
VELTASSA POW 25.2GM	5	DL

CONTRACEPTIVES

<i>altavera tab</i>	2	
<i>alyacen tab 1/35</i>	2	
<i>amethia tab</i>	2	
<i>apri tab</i>	2	
<i>aranelle tab</i>	2	
<i>ashlyna tab</i>	2	
<i>aubra eq tab 0.1-0.02</i>	2	
<i>aviane tab</i>	2	
BALCOLTRA TAB 0.1-20	3	
<i>balziva tab</i>	2	
<i>blisovi 24 tab fe 1/20</i>	2	
<i>blisovi fe tab 1.5/30</i>	2	
<i>briellyn tab</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>camila tab 0.35mg</i>	2	
<i>camrese lo tab</i>	3	
<i>cryselle-28 tab 28 tabs</i>	2	
<i>deblitane tab 0.35mg</i>	2	
<i>delyla tab 0.1-0.02</i>	2	
DEPO-SQ PROV INJ 104	4	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>dolishale tab 90-20mcg</i>	2	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	2	
<i>emoquette tab</i>	2	
<i>enpresse-28 tab</i>	2	
<i>enskyce tab</i>	2	
<i>errin tab 0.35mg</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	2	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	2	
<i>falmina tab</i>	2	
<i>femynor tab 0.25-35</i>	2	
<i>gemmily cap 1/20</i>	2	
<i>iclevia tab</i>	2	
<i>introvale tab</i>	2	
<i>isibloom tab</i>	2	
<i>jasmiel tab 3-0.02mg</i>	2	
<i>juleber tab</i>	2	
<i>junel 1.5/30 tab</i>	2	
<i>junel 1/20 tab</i>	2	
<i>junel fe 24 tab 1/20</i>	2	
<i>junel fe tab 1.5/30</i>	2	
<i>junel fe tab 1/20</i>	2	
<i>kaitlib fe chw</i>	2	
<i>kariva tab 28 day</i>	2	
<i>kelnor 1/50 tab</i>	2	
<i>kelnor tab 1/35</i>	2	
<i>kurvelo tab 0.15/30</i>	2	
<i>larin fe tab 1.5/30</i>	2	
<i>larin fe tab 1/20</i>	2	
<i>larin tab 1.5/30</i>	2	
<i>larin tab 1/20</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>larissia tab</i>	2	
<i>layolis fe chw</i>	2	
<i>leena tab</i>	3	
<i>lessina tab</i>	2	
<i>levonest tab</i>	2	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	3	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	2	
<i>levora-28 tab 0.15/30</i>	2	
<i>loryna tab 3-0.02mg</i>	2	
<i>low-ogestrel tab</i>	2	
<i>lutra tab</i>	2	
<i>lyleq tab 0.35mg</i>	2	
<i>lyza tab 0.35mg</i>	2	
<i>marlissa tab 0.15/30</i>	2	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	2	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	2	
<i>merzee cap 1/20</i>	2	
<i>micrgstin 24 tab fe 1/20</i>	3	
<i>microgestin tab 1.5/30</i>	3	
<i>microgestin tab 1/20</i>	3	
<i>microgestin tab fe1.5/30</i>	3	
<i>microgestin tab fe 1/20</i>	3	
<i>necon tab 0.5/35</i>	3	
NEXTSTELLIS TAB 3-14.2MG	3	
<i>nikki tab 3-0.02mg</i>	2	
<i>nora-be tab 0.35mg</i>	3	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	2	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>norethindrone tab 0.35 mg</i>	2	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	2	
<i>norlyroc tab 0.35mg</i>	2	
<i>nortrel tab 0.5/35</i>	2	
<i>nortrel tab 1/35</i>	2	
<i>nortrel tab 7/7/7</i>	2	
<i>nylia tab 1/35</i>	2	
<i>nylia tab 7/7/7</i>	2	
<i>nymyo tab 0.25-35</i>	2	
<i>pimtrea tab</i>	2	
<i>pirmella tab 1/35</i>	2	
<i>portia-28 tab</i>	2	
<i>reclipsen tab</i>	2	
<i>setlakin tab</i>	2	
<i>sharobel tab 0.35mg</i>	2	
SLYND TAB 4MG	3	
<i>sprintec 28 tab 28 day</i>	2	
<i>sronyx tab</i>	2	
<i>tarina 24 fe tab</i>	2	
<i>tarina fe tab 1/20 eq</i>	2	
<i>tilia fe tab</i>	2	
<i>tri-legest tab fe</i>	2	
<i>tri-nymyo tab</i>	2	
<i>tri-sprintec tab</i>	2	
<i>trivora-28 tab</i>	2	
<i>tydemy tab</i>	2	
<i>velivet pak</i>	2	
<i>vestura tab 3-0.02mg</i>	2	
<i>vienva tab 0.1-20</i>	2	
<i>vyfemla tab 0.4-35</i>	2	
<i>wymzya fe chw 0.4mg-35</i>	2	
<i>xulane dis 150-35</i>	2	
<i>zafemy dis 150/35</i>	2	
<i>zovia 1/35 tab</i>	2	
ENDOMETRIOSIS		
<i>danazol cap 50 mg</i>	2	
<i>danazol cap 100 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>danazol cap 200 mg</i>	2	
SYNAREL SOL 2MG/ML	3	
ESTROGENS		
<i>amabelz tab 0.5-0.1</i>	2	
<i>amabelz tab 1-0.5mg</i>	2	
BIJUVA CAP 1-100MG	3	
<i>dotti dis 0.1mg</i>	3	
<i>dotti dis 0.05mg</i>	3	
<i>dotti dis 0.025mg</i>	3	
<i>dotti dis 0.075mg</i>	3	
<i>dotti dis 0.0375mg</i>	3	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	2	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	2	
<i>estradiol tab 0.5 mg</i>	3	
<i>estradiol tab 1 mg</i>	3	
<i>estradiol tab 2 mg</i>	3	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	3	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	3	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	2	
<i>estradiol vaginal tab 10 mcg</i>	2	
<i>estradiol valerate im in oil 20 mg/ml</i>	3	
<i>estropipate tab 1.5 mg</i>	2	
<i>estropipate tab 3 mg</i>	2	
<i>lyllana dis 0.1mg</i>	3	
<i>lyllana dis 0.05mg</i>	3	
<i>lyllana dis 0.025mg</i>	3	
<i>lyllana dis 0.075mg</i>	3	
<i>lyllana dis 0.0375mg</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	2	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	2	
ORIAHNN CAP	5	DL
PREMARIN INJ 25MG	4	
PREMARIN TAB 0.3MG	3	
PREMARIN TAB 0.9MG	3	
PREMARIN TAB 0.45MG	3	
PREMARIN TAB 0.625MG	3	
PREMARIN TAB 1.25MG	3	
PREMARIN VAG CRE 0.625MG	3	
PREMPRO TAB	3	
PREMPRO TAB 0.3-1.5	3	
PREMPRO TAB 0.45-1.5	3	
PREMPRO TAB 0.625-5	3	
<i>yuvaferm tab 10mcg</i>	2	
GLUCOCORTICOIDS		
DEPO-MEDROL INJ 20MG/ML	3	
DEPO-MEDROL INJ 40MG/ML	3	
DEPO-MEDROL INJ 80MG/ML	3	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	2	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	2	
<i>dexamethasone soln 0.5 mg/5ml</i>	2	
<i>dexamethasone tab 0.5 mg</i>	2	
<i>dexamethasone tab 0.75 mg</i>	2	
<i>dexamethasone tab 1 mg</i>	2	
<i>dexamethasone tab 1.5 mg</i>	2	
<i>dexamethasone tab 2 mg</i>	2	
<i>dexamethasone tab 4 mg</i>	2	
<i>dexamethasone tab 6 mg</i>	2	
<i>fludrocortisone acetate tab 0.1 mg</i>	2	
<i>hydrocortisone tab 5 mg</i>	2	
<i>hydrocortisone tab 10 mg</i>	2	
<i>hydrocortisone tab 20 mg</i>	2	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	2	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	2	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>methylprednisolone tab 4 mg</i>	2	
<i>methylprednisolone tab 8 mg</i>	2	
<i>methylprednisolone tab 16 mg</i>	2	
<i>methylprednisolone tab 32 mg</i>	2	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	2	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	2	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	2	
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	2	
PREDNISON CON 5MG/ML	3	
<i>prednisone oral soln 5 mg/5ml</i>	2	
<i>prednisone tab 1 mg</i>	2	
<i>prednisone tab 2.5 mg</i>	2	
<i>prednisone tab 5 mg</i>	2	
<i>prednisone tab 10 mg</i>	2	
<i>prednisone tab 20 mg</i>	2	
<i>prednisone tab 50 mg</i>	2	
SOLU-CORTEF INJ 100MG	3	
SOLU-CORTEF INJ 250MG	3	
SOLU-CORTEF INJ 500MG	3	
SOLU-CORTEF INJ 1000MG	3	
SOLU-MEDROL INJ 2GM	3	
SOLU-MEDROL INJ 40MG	3	
SOLU-MEDROL INJ 125MG	3	
SOLU-MEDROL INJ 500MG	3	
SOLU-MEDROL INJ 1000MG	3	
GLUCOSE ELEVATING AGENTS		
BAQSIMI ONE POW 3MG/DOSE	3	
<i>diazoxide susp 50 mg/ml</i>	3	
GLUCAGON KIT 1MG	3	
GVOKE HYPO 2 INJ 1MG/.2ML	3	
GVOKE HYPO 2 INJ .5/.1ML	3	
GVOKE PFS INJ	3	
MISCELLANEOUS		
ACTHAR INJ 80UNIT	5	NM, LA, PA; DL
<i>betaine powder for oral solution</i>	4	NM, LA
<i>cabergoline tab 0.5 mg</i>	2	
<i>carglumic acid soluble tab 200 mg</i>	5	NM, LA; DL
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	3	B/D, NM
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	3	B/D, NM
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	3	B/D, NM

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Drug Name	Drug Tier	Requirements/Limits
CORTROPHIN GEL 80UNIT	5	NM, LA, PA; DL
CYSTAGON CAP 50MG	3	NM, LA
CYSTAGON CAP 150MG	3	NM, LA
<i>desmopressin acetate nasal spray soln 0.01%</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	2	
<i>desmopressin acetate tab 0.2 mg</i>	2	
DOJOLVI LIQ 100%	5	NM, LA; DL
EGRIFTA SV INJ 2MG	5	NM, LA, PA; DL
GALAFOLD CAP 123MG	5	NM, LA, PA; DL
HUMATROPE INJ 6MG	5	NM, PA; DL
HUMATROPE INJ 12MG	5	NM, PA; DL
HUMATROPE INJ 24MG	5	NM, PA; DL
INCRELEX INJ 40MG/4ML	5	NM, LA; DL
ISTURISA TAB 1MG	5	NM, LA; DL
ISTURISA TAB 5MG	5	NM, LA; DL
ISTURISA TAB 10MG	5	NM, LA; DL
JYNARQUE PAK 15MG	5	NM, LA, PA; DL
JYNARQUE PAK 30-15MG	5	NM, LA, PA; DL
JYNARQUE PAK 45-15MG	5	NM, LA, PA; DL
JYNARQUE PAK 60-30MG	5	NM, LA, PA; DL
JYNARQUE PAK 90-30MG	5	NM, LA, PA; DL
JYNARQUE TAB 15MG	5	NM, LA, PA; DL
JYNARQUE TAB 30MG	5	NM, LA, PA; DL
KORLYM TAB 300MG	5	QL (120 tabs / 30 days), NM, LA, PA; DL
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	3	
<i>levocarnitine tab 330 mg</i>	3	
LUPR DEP-PED INJ 7.5MG	5	NM; DL
LUPR DEP-PED INJ 11.25MG	5	NM; DL
LUPR DEP-PED INJ 15MG	5	NM; DL
<i>miglustat cap 100 mg</i>	5	NM, PA; DL
MYALEPT INJ 11.3MG	5	NM, LA, PA; DL
MYCAPSSA CAP 20MG	5	NM, LA; DL
<i>nitisinone cap 2 mg</i>	5	NM; DL
<i>nitisinone cap 5 mg</i>	5	NM; DL
<i>nitisinone cap 10 mg</i>	5	NM; DL
NORDITROPIN INJ 5/1.5ML	5	NM, PA; DL
NORDITROPIN INJ 10/1.5ML	5	NM, PA; DL
NORDITROPIN INJ 15/1.5ML	5	NM, PA; DL
NORDITROPIN INJ 30/3ML	5	NM, PA; DL
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	4	NM; DL

Drug Name	Drug Tier	Requirements/Limits
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	4	NM; DL
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	4	NM; DL
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	5	NM; DL
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	5	NM; DL
ORFADIN CAP 20MG	5	NM, LA; DL
ORFADIN SUS 4MG/ML	5	NM, LA; DL
PROCYSBI GRA 75MG	5	NM, LA; DL
PROCYSBI GRA 300MG	5	NM, LA; DL
<i>raloxifene hcl tab 60 mg</i>	3	
RAVICTI LIQ 1.1GM/ML	5	NM, LA; DL
SANDOSTATIN KIT LAR 10MG	5	NM; DL
SANDOSTATIN KIT LAR 20MG	5	NM; DL
SANDOSTATIN KIT LAR 30MG	5	NM; DL
<i>sapropterin dihydrochloride powder packet 100 mg</i>	5	NM, PA; DL
<i>sapropterin dihydrochloride powder packet 500 mg</i>	5	NM, PA; DL
<i>sapropterin dihydrochloride tab 100 mg</i>	5	NM, PA; DL
SIGNIFOR INJ 0.3MG/ML	5	NM, LA; DL
SIGNIFOR INJ 0.6MG/ML	5	NM, LA; DL
SIGNIFOR INJ 0.9MG/ML	5	NM, LA; DL
SIGNIFOR LAR INJ 20MG	5	NM, LA; DL
SIGNIFOR LAR INJ 40MG	5	NM, LA; DL
SIGNIFOR LAR INJ 60MG	5	NM, LA; DL
SOMAVERT INJ 10MG	5	NM, LA; DL
SOMAVERT INJ 15MG	5	NM, LA; DL
SOMAVERT INJ 20MG	5	NM, LA; DL
SOMAVERT INJ 25MG	5	NM, LA; DL
SOMAVERT INJ 30MG	5	NM, LA; DL
<i>tolvaptan tab 15 mg</i>	5	NM, PA; DL
<i>tolvaptan tab 30 mg</i>	5	NM, PA; DL
XERMELO TAB 250MG	5	QL (90 tabs / 30 days), NM, LA, PA; DL
ZORBTIVE INJ 8.8MG	5	NM, PA; DL
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	5	PA; DL
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	2	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	3	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	3	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	3	
<i>sevelamer carbonate packet 0.8 gm</i>	3	
<i>sevelamer carbonate packet 2.4 gm</i>	3	
<i>sevelamer carbonate tab 800 mg</i>	3	
<i>sevelamer hcl tab 400 mg</i>	3	
<i>sevelamer hcl tab 800 mg</i>	3	

PROGESTINS

<i>medroxyprogesterone acetate tab 2.5 mg</i>	2	
<i>medroxyprogesterone acetate tab 5 mg</i>	2	
<i>medroxyprogesterone acetate tab 10 mg</i>	2	
<i>megestrol acetate susp 40 mg/ml</i>	2	PA; DL
<i>megestrol acetate susp 625 mg/5ml</i>	4	PA; DL
<i>norethindrone acetate tab 5 mg</i>	2	
<i>progesterone cap 100 mg</i>	2	
<i>progesterone cap 200 mg</i>	2	

THYROID AGENTS

<i>ARMOUR THYRO TAB 15MG</i>	3	
<i>ARMOUR THYRO TAB 30MG</i>	3	
<i>ARMOUR THYRO TAB 60MG</i>	3	
<i>ARMOUR THYRO TAB 90MG</i>	3	
<i>ARMOUR THYRO TAB 120MG</i>	3	
<i>ARMOUR THYRO TAB 180MG</i>	3	
<i>ARMOUR THYRO TAB 240MG</i>	3	
<i>ARMOUR THYRO TAB 300MG</i>	3	
<i>euthyrox tab 25mcg</i>	1	
<i>euthyrox tab 50mcg</i>	1	
<i>euthyrox tab 75mcg</i>	1	
<i>euthyrox tab 88mcg</i>	1	
<i>euthyrox tab 100mcg</i>	1	
<i>euthyrox tab 112mcg</i>	1	
<i>euthyrox tab 125mcg</i>	1	
<i>euthyrox tab 137mcg</i>	1	
<i>euthyrox tab 150mcg</i>	1	
<i>euthyrox tab 175mcg</i>	1	
<i>euthyrox tab 200mcg</i>	1	
<i>levo-t tab 25mcg</i>	1	
<i>levo-t tab 50mcg</i>	1	
<i>levo-t tab 75mcg</i>	1	
<i>levo-t tab 88mcg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>levo-t tab 100mcg</i>	1	
<i>levo-t tab 112mcg</i>	1	
<i>levo-t tab 125mcg</i>	1	
<i>levo-t tab 137mcg</i>	1	
<i>levo-t tab 150mcg</i>	1	
<i>levo-t tab 175mcg</i>	1	
<i>levo-t tab 200 mcg</i>	1	
<i>levo-t tab 300 mcg</i>	1	
<i>levothyroxine sodium cap 13 mcg</i>	1	
<i>levothyroxine sodium cap 25 mcg</i>	1	
<i>levothyroxine sodium cap 50 mcg</i>	1	
<i>levothyroxine sodium cap 75 mcg</i>	1	
<i>levothyroxine sodium cap 88 mcg</i>	1	
<i>levothyroxine sodium cap 100 mcg</i>	1	
<i>levothyroxine sodium cap 112 mcg</i>	1	
<i>levothyroxine sodium cap 125 mcg</i>	1	
<i>levothyroxine sodium cap 137 mcg</i>	1	
<i>levothyroxine sodium cap 150 mcg</i>	1	
<i>levothyroxine sodium cap 175 mcg</i>	1	
<i>levothyroxine sodium cap 200 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	3	
<i>levoxyl tab 50mcg</i>	3	
<i>levoxyl tab 75mcg</i>	3	
<i>levoxyl tab 88mcg</i>	3	
<i>levoxyl tab 100mcg</i>	3	
<i>levoxyl tab 112mcg</i>	3	
<i>levoxyl tab 125mcg</i>	3	
<i>levoxyl tab 137mcg</i>	3	
<i>levoxyl tab 150mcg</i>	3	
<i>levoxyl tab 175mcg</i>	3	
<i>levoxyl tab 200mcg</i>	3	
<i>liothyronine sodium iv soln 10 mcg/ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>liothyronine sodium tab 5 mcg</i>	2	
<i>liothyronine sodium tab 25 mcg</i>	2	
<i>liothyronine sodium tab 50 mcg</i>	2	
<i>methimazole tab 5 mg</i>	2	
<i>methimazole tab 10 mg</i>	2	
<i>np thyroid tab 15mg</i>	1	
<i>np thyroid tab 30mg</i>	1	
<i>np thyroid tab 60mg</i>	1	
<i>np thyroid tab 90mg</i>	1	
<i>np thyroid tab 120mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	2	
SYNTHROID TAB 25MCG	3	
SYNTHROID TAB 50MCG	3	
SYNTHROID TAB 75MCG	3	
SYNTHROID TAB 88MCG	3	
SYNTHROID TAB 100MCG	3	
SYNTHROID TAB 112MCG	3	
SYNTHROID TAB 125MCG	3	
SYNTHROID TAB 137MCG	3	
SYNTHROID TAB 150MCG	3	
SYNTHROID TAB 175MCG	3	
SYNTHROID TAB 200MCG	3	
SYNTHROID TAB 300MCG	3	
TIROSINT CAP 13MCG	3	
TIROSINT CAP 25MCG	3	
TIROSINT CAP 50MCG	3	
TIROSINT CAP 75MCG	3	
TIROSINT CAP 88MCG	3	
TIROSINT CAP 100MCG	3	
TIROSINT CAP 112MCG	3	
TIROSINT CAP 125MCG	3	
TIROSINT CAP 137MCG	3	
TIROSINT CAP 150MCG	3	
TIROSINT CAP 175MCG	3	
TIROSINT CAP 200	3	
TIROSINT-SOL SOL 13MCG/ML	3	
TIROSINT-SOL SOL 25MCG/ML	3	
TIROSINT-SOL SOL 37.5/ML	3	
TIROSINT-SOL SOL 44MCG/ML	3	
TIROSINT-SOL SOL 50MCG/ML	3	
TIROSINT-SOL SOL 62.5/ML	3	
TIROSINT-SOL SOL 75MCG/ML	3	
TIROSINT-SOL SOL 88MCG/ML	3	
TIROSINT-SOL SOL 100MCG	3	

Drug Name	Drug Tier	Requirements/Limits
TIROSINT-SOL SOL 112MCG	3	
TIROSINT-SOL SOL 125MCG	3	
TIROSINT-SOL SOL 137MCG	3	
TIROSINT-SOL SOL 150MCG	3	
TIROSINT-SOL SOL 175MCG	3	
TIROSINT-SOL SOL 200MCG	3	
<i>unithroid tab 25mcg</i>	3	
<i>unithroid tab 50mcg</i>	3	
<i>unithroid tab 75mcg</i>	3	
<i>unithroid tab 88mcg</i>	3	
<i>unithroid tab 100mcg</i>	3	
<i>unithroid tab 112mcg</i>	3	
<i>unithroid tab 125mcg</i>	3	
<i>unithroid tab 137mcg</i>	3	
<i>unithroid tab 150mcg</i>	3	
<i>unithroid tab 175mcg</i>	3	
<i>unithroid tab 200mcg</i>	3	
<i>unithroid tab 300mcg</i>	3	

VITAMIN D ANALOGS

<i>calcitriol cap 0.5 mcg</i>	2	
<i>calcitriol cap 0.25 mcg</i>	2	
<i>calcitriol inj 1 mcg/ml</i>	2	
<i>calcitriol oral soln 1 mcg/ml</i>	2	
<i>doxercalciferol cap 0.5 mcg</i>	4	
<i>doxercalciferol cap 1 mcg</i>	4	
<i>doxercalciferol cap 2.5 mcg</i>	4	
<i>paricalcitol cap 1 mcg</i>	4	
<i>paricalcitol cap 2 mcg</i>	4	
<i>paricalcitol cap 4 mcg</i>	4	
<i>paricalcitol iv soln 2 mcg/ml</i>	4	
RAYALDEE CAP 30MCG	5	DL

GASTROINTESTINAL

ANTIEMETICS

<i>aprepitant capsule 40 mg</i>	3	B/D, QL (1 cap / 30 days); DL
<i>aprepitant capsule 80 mg</i>	3	B/D, QL (8 caps / 30 days); DL
<i>aprepitant capsule 125 mg</i>	3	B/D, QL (2 caps / 30 days); DL
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	3	B/D, QL (6 caps / 30 days); DL
<i>compro sup 25mg</i>	2	
<i>dronabinol cap 2.5 mg</i>	3	QL (60 caps / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
<i>dronabinol cap 5 mg</i>	3	QL (60 caps / 30 days), PA
<i>dronabinol cap 10 mg</i>	3	QL (60 caps / 30 days), PA
<i>granisetron hcl tab 1 mg</i>	2	B/D, QL (30 tabs / 30 days); DL
<i>meclizine hcl tab 12.5 mg</i>	2	
<i>meclizine hcl tab 25 mg</i>	2	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	2	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	2	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	2	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	2	DL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	3	B/D; DL
<i>ondansetron hcl tab 4 mg</i>	2	B/D; DL
<i>ondansetron hcl tab 8 mg</i>	2	B/D; DL
<i>ondansetron orally disintegrating tab 4 mg</i>	2	B/D; DL
<i>ondansetron orally disintegrating tab 8 mg</i>	2	B/D; DL
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	2	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	2	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	2	
<i>prochlorperazine suppos 25 mg</i>	2	
<i>promethazine hcl inj 25 mg/ml</i>	2	
<i>promethazine hcl inj 50 mg/ml</i>	2	
<i>promethazine hcl suppos 12.5 mg</i>	2	DL
<i>promethazine hcl suppos 25 mg</i>	2	DL
<i>promethazine hcl syrup 6.25 mg/5ml</i>	2	DL
<i>promethazine hcl tab 12.5 mg</i>	2	DL
<i>promethazine hcl tab 25 mg</i>	2	DL
<i>promethazine hcl tab 50 mg</i>	2	DL
<i>promethegan sup 25mg</i>	2	DL
<i>promethegan sup 50mg</i>	2	DL
SANCUSO DIS 3.1MG	4	DL
<i>scopolamine td patch 72hr 1 mg/3days</i>	3	QL (10 patches / 30 days)
VARUBI TAB 90MG	4	B/D, QL (4 tabs / 30 days), NM; DL
ANTISPASMODICS		
<i>dicyclomine hcl cap 10 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	2	
<i>dicyclomine hcl tab 20 mg</i>	2	
<i>glycopyrrolate inj 0.2 mg/ml</i>	2	
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	2	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	2	
<i>glycopyrrolate tab 1 mg</i>	2	
<i>glycopyrrolate tab 2 mg</i>	2	
<i>methscopolamine bromide tab 2.5 mg</i>	2	
<i>methscopolamine bromide tab 5 mg</i>	2	
H2-RECEPTOR ANTAGONISTS		
<i>famotidine for susp 40 mg/5ml</i>	2	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	2	
<i>famotidine preservative free inj 20 mg/2ml</i>	2	
<i>famotidine tab 20 mg</i>	2	
<i>famotidine tab 40 mg</i>	2	
<i>nizatidine cap 150 mg</i>	2	
<i>nizatidine cap 300 mg</i>	2	
<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>	2	
<i>ranitidine hcl inj 150 mg/6ml (25 mg/ml)</i>	2	
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium cap 750 mg</i>	2	
<i>budesonide delayed release particles cap 3 mg</i>	4	
<i>budesonide tab er 24hr 9 mg</i>	5	QL (30 tabs / 30 days); DL
<i>hydrocortisone enema 100 mg/60ml</i>	3	
<i>mesalamine cap dr 400 mg</i>	4	
<i>mesalamine cap er 24hr 0.375 gm</i>	3	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine suppos 1000 mg</i>	4	
<i>mesalamine tab delayed release 1.2 gm</i>	4	
<i>mesalamine tab delayed release 800 mg</i>	4	
<i>ORTIKOS CAP 6MG ER</i>	5	DL
<i>ORTIKOS CAP 9MG ER</i>	5	DL
<i>sulfasalazin tab 500mg dr</i>	2	
<i>sulfasalazine tab 500 mg</i>	2	
LAXATIVES		
<i>constulose sol 10gm/15</i>	2	
<i>enulose sol 10gm/15</i>	2	
<i>gavilyte-c sol</i>	2	
<i>gavilyte-g sol</i>	2	
<i>generlac sol 10gm/15</i>	2	
<i>lactulose solution 10 gm/15ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>peg/nasul/c/ sol nacl/pot</i>	2	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	4	
SUPREP BOWEL SOL PREP KIT	4	
MISCELLANEOUS		
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	5	DL
<i>alose tron hcl tab 1 mg (base equiv)</i>	5	DL
<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	4	
<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	2	
GATTEX KIT 5MG	5	NM, LA, PA; DL
HELIDAC MIS THERAPY	5	DL
LINZESS CAP 72MCG	4	QL (30 caps / 30 days)
LINZESS CAP 145MCG	4	QL (30 caps / 30 days)
LINZESS CAP 290MCG	4	QL (30 caps / 30 days)
<i>loperamide hcl cap 2 mg</i>	2	
<i>lubiprostone cap 8 mcg</i>	3	QL (60 caps / 30 days)
<i>lubiprostone cap 24 mcg</i>	3	QL (60 caps / 30 days)
<i>misoprostol tab 100 mcg</i>	2	
<i>misoprostol tab 200 mcg</i>	2	
MOVANTIK TAB 12.5MG	3	
MOVANTIK TAB 25MG	3	
RELISTOR INJ 8/0.4ML	5	DL
RELISTOR INJ 12/0.6ML	5	DL
SUCRAID SOL 8500/ML	5	NM, LA; DL
<i>sucralfate susp 1 gm/10ml</i>	3	
<i>sucralfate tab 1 gm</i>	2	
SYMPROIC TAB 0.2MG	3	
TALICIA CAP	4	
<i>ursodiol cap 300 mg</i>	3	
<i>ursodiol tab 250 mg</i>	3	
<i>ursodiol tab 500 mg</i>	3	
XIFAXAN TAB 550MG	5	PA; DL
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	3	
CREON CAP 6000UNIT	3	
CREON CAP 12000UNT	3	
CREON CAP 24000UNT	3	
CREON CAP 36000UNT	3	
ZENPEP CAP 3000UNIT	4	

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Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 5000UNT	4	
ZENPEP CAP 10000UNT	4	
ZENPEP CAP 15000UNT	4	
ZENPEP CAP 20000UNT	4	
ZENPEP CAP 25000UNT	4	
ZENPEP CAP 40000UNT	4	

PROTON PUMP INHIBITORS

<i>dexlansoprazole cap delayed release 30 mg</i>	3	QL (30 caps / 30 days)
<i>dexlansoprazole cap delayed release 60 mg</i>	3	QL (30 caps / 30 days)
<i>lansoprazole cap delayed release 15 mg</i>	2	QL (60 caps / 30 days)
<i>lansoprazole cap delayed release 30 mg</i>	2	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 10 mg</i>	1	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 20 mg</i>	1	QL (60 caps / 30 days)
<i>omeprazole cap delayed release 40 mg</i>	1	QL (60 caps / 30 days)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
<i>rabeprazole sodium ec tab 20 mg</i>	2	QL (60 tabs / 30 days)

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tab er 24hr 10 mg</i>	2	
<i>dutasteride cap 0.5 mg</i>	2	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	2	
<i>finasteride tab 5 mg</i>	2	
<i>silodosin cap 4 mg</i>	2	
<i>silodosin cap 8 mg</i>	2	
<i>tadalafil tab 2.5 mg</i>	3	QL (30 tabs / 30 days), PA; DL
<i>tadalafil tab 5 mg</i>	3	QL (30 tabs / 30 days), PA; DL
<i>tamsulosin hcl cap 0.4 mg</i>	2	

MISCELLANEOUS

<i>bethanechol chloride tab 5 mg</i>	2	
<i>bethanechol chloride tab 10 mg</i>	2	
<i>bethanechol chloride tab 25 mg</i>	2	
<i>bethanechol chloride tab 50 mg</i>	2	
<i>flavoxate hcl tab 100 mg</i>	2	
<i>potassium citrate tab er 5 meq (540 mg)</i>	3	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	3	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	3	
<i>tiopronin tab 100 mg</i>	5	NM; DL

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	3	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	3	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	4	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	4	
GEMTESA TAB 75MG	4	
MYRBETRIQ TAB 25MG	3	
MYRBETRIQ TAB 50MG	3	
<i>oxybutynin chloride syrup 5 mg/5ml</i>	2	
<i>oxybutynin chloride tab 5 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	2	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	2	
<i>solifenacin succinate tab 5 mg</i>	3	
<i>solifenacin succinate tab 10 mg</i>	3	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	3	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	3	
<i>tolterodine tartrate tab 1 mg</i>	2	
<i>tolterodine tartrate tab 2 mg</i>	2	
TOVIAZ TAB 4MG	4	
TOVIAZ TAB 8MG	4	
<i>tropium chloride cap er 24hr 60 mg</i>	3	
<i>tropium chloride tab 20 mg</i>	2	
VAGINAL ANTI-INFECTIVES		
CLEOCIN SUP 100MG	4	
<i>clindamycin phosphate vaginal cream 2%</i>	2	
<i>metronidazole vaginal gel 0.75%</i>	2	
<i>terconazole vaginal cream 0.4%</i>	2	
<i>terconazole vaginal cream 0.8%</i>	2	
<i>terconazole vaginal suppos 80 mg</i>	2	
VANDAZOLE GEL 0.75%	3	
HEMATOLOGIC		
ANTICOAGULANTS		
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	5	DL
ELIQUIS ST P TAB 5MG	3	
ELIQUIS TAB 2.5MG	3	
ELIQUIS TAB 5MG	3	
<i>enoxaparin sodium inj 300 mg/3ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	4	DL

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	4	DL
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	4	DL
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	4	DL
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	5	DL
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	5	DL
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	5	DL
FRAGMIN INJ 2500/0.2	4	DL
FRAGMIN INJ 5000/0.2	4	DL
FRAGMIN INJ 7500/0.3	5	DL
FRAGMIN INJ 10000/ML	5	DL
FRAGMIN INJ 12500UNT	5	DL
FRAGMIN INJ 15000UNT	5	DL
FRAGMIN INJ 18000UNT	5	DL
FRAGMIN INJ 95000UNT	5	DL
HEP SOD/D5W INJ 25000UNT	3	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	3	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	3	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	3	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	3	
<i>jantoven tab 1mg</i>	2	
<i>jantoven tab 2.5mg</i>	2	
<i>jantoven tab 2mg</i>	2	
<i>jantoven tab 3mg</i>	2	
<i>jantoven tab 4mg</i>	2	
<i>jantoven tab 5mg</i>	2	
<i>jantoven tab 6mg</i>	2	
<i>jantoven tab 7.5mg</i>	2	
<i>jantoven tab 10mg</i>	2	
PRADAXA CAP 75MG	4	
PRADAXA CAP 110MG	4	
PRADAXA CAP 150MG	4	

Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium tab 1 mg</i>	2	
<i>warfarin sodium tab 2 mg</i>	2	
<i>warfarin sodium tab 2.5 mg</i>	2	
<i>warfarin sodium tab 3 mg</i>	2	
<i>warfarin sodium tab 4 mg</i>	2	
<i>warfarin sodium tab 5 mg</i>	2	
<i>warfarin sodium tab 6 mg</i>	2	
<i>warfarin sodium tab 7.5 mg</i>	2	
<i>warfarin sodium tab 10 mg</i>	2	

HEMATOPOIETIC GROWTH FACTORS

GRANIX INJ 300/0.5	5	NM; DL
GRANIX INJ 300/1ML	5	NM; DL
GRANIX INJ 480/0.8	5	NM; DL
GRANIX INJ 480/1.6	5	NM; DL
MOZOBIL INJ	5	NM, LA; DL
NIVESTYM INJ 300/0.5	5	NM; DL
NIVESTYM INJ 300MCG	5	NM; DL
NIVESTYM INJ 480/0.8	5	NM; DL
NIVESTYM INJ 480MCG	5	NM; DL
PROCRIT INJ 2000/ML	3	B/D, NM
PROCRIT INJ 3000/ML	3	B/D, NM
PROCRIT INJ 4000/ML	3	B/D, NM
PROCRIT INJ 10000/ML	3	B/D, NM
PROCRIT INJ 20000/ML	5	B/D, NM; DL
PROCRIT INJ 40000/ML	5	B/D, QL (8 vials / 30 days), NM; DL
RETACRIT INJ 2000UNIT	3	B/D, NM
RETACRIT INJ 3000UNIT	3	B/D, NM
RETACRIT INJ 4000UNIT	3	B/D, NM
RETACRIT INJ 10000UNT	3	B/D, NM
RETACRIT INJ 20000UNI	3	B/D, NM
RETACRIT INJ 40000UNT	3	B/D, QL (8 vials / 30 days), NM
UDENYCA INJ 6MG/.6ML	5	NM; DL

MISCELLANEOUS

<i>aminocaproic acid tab 500 mg</i>	3	DL
<i>aminocaproic acid tab 1000 mg</i>	3	DL
<i>anagrelide hcl cap 0.5 mg</i>	4	
<i>anagrelide hcl cap 1 mg</i>	4	
CABLIVI KIT 11MG	5	NM, LA; DL
<i>cilostazol tab 50 mg</i>	2	
<i>cilostazol tab 100 mg</i>	2	
CINRYZE SOL 500 UNIT	5	NM, LA, PA; DL
DROXIA CAP 200MG	3	

Drug Name	Drug Tier	Requirements/Limits
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	5	NM, PA; DL
MULPLETA TAB 3MG	5	NM, PA; DL
ORLADEYO CAP 110MG	5	NM, LA, PA; DL
ORLADEYO CAP 150MG	5	NM, LA, PA; DL
OXBRYTA TAB 300MG	5	NM, LA; DL
OXBRYTA TAB 500MG	5	NM, LA; DL
<i>pentoxifylline tab er 400 mg</i>	2	
PROMACTA PAK 25MG	5	NM, LA, PA; DL
PROMACTA POW 12.5MG	5	NM, LA, PA; DL
PROMACTA TAB 12.5MG	5	NM, LA, PA; DL
PROMACTA TAB 25MG	5	NM, LA, PA; DL
PROMACTA TAB 50MG	5	NM, LA, PA; DL
PROMACTA TAB 75MG	5	NM, LA, PA; DL
RUCONEST INJ 2100UNIT	5	NM, LA, PA; DL
TAKHZYRO INJ 300/2ML	5	NM, LA, PA; DL
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	2	
<i>tranexamic acid tab 650 mg</i>	3	

PLATELET AGGREGATION INHIBITORS

<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	3	
BRILINTA TAB 60MG	4	
BRILINTA TAB 90MG	4	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	2	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	2	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	3	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	3	

IMMUNOLOGIC AGENTS

AUTOIMMUNE AGENTS

DUPIXENT INJ 100/0.67	5	NM, PA; DL
DUPIXENT INJ 200/1.14	5	NM, PA; DL
DUPIXENT INJ 200MG	5	NM, PA; DL
DUPIXENT INJ 300/2ML	5	NM, PA; DL
ENBREL INJ 25/0.5ML	5	NM, PA; DL
ENBREL INJ 25MG	5	NM, PA; DL
ENBREL INJ 50MG/ML	5	NM, PA; DL
ENBREL MINI INJ 50MG/ML	5	NM, PA; DL
ENBREL SRCLK INJ 50MG/ML	5	NM, PA; DL
HUMIRA INJ 10/0.1ML	5	NM, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
HUMIRA INJ 20/0.2ML	5	NM, PA; DL
HUMIRA INJ 40/0.4ML	5	NM, PA; DL
HUMIRA KIT 40MG/0.8	5	NM, PA; DL
HUMIRA PEDIA INJ CROHNS	5	NM, PA; DL
HUMIRA PEN INJ 40/0.4ML	5	NM, PA; DL
HUMIRA PEN INJ 40MG/0.8	5	NM, PA; DL
HUMIRA PEN INJ 80/0.8ML	5	NM, PA; DL
HUMIRA PEN INJ CD/UC/HS	5	NM, PA; DL
HUMIRA PEN INJ PS/UV	5	NM, PA; DL
HUMIRA PEN KIT CD/UC/HS	5	NM, PA; DL
HUMIRA PEN KIT PED UC	5	NM, PA; DL
HUMIRA PEN KIT PS/UV	5	NM, PA; DL
KINERET INJ	5	NM, PA; DL
OTEZLA TAB 10/20/30	5	NM, PA; DL
OTEZLA TAB 30MG	5	NM, PA; DL
RINVOQ TAB 15MG ER	5	NM, PA; DL
RINVOQ TAB 30MG ER	5	NM, PA; DL
RINVOQ TAB 45MG ER	5	NM, PA; DL
SKYRIZI INJ 150DOSE	5	NM, PA; DL
SKYRIZI INJ 150MG/ML	5	NM, PA; DL
SKYRIZI INJ 360/2.4	5	NM, PA; DL
SKYRIZI PEN INJ 150MG/ML	5	NM, PA; DL
STELARA INJ 45MG/0.5	5	NM, LA, PA; DL; (vials)
STELARA INJ 45MG/0.5	5	NM, PA; DL; (syringes)
STELARA INJ 90MG/ML	5	NM, PA; DL
TALTZ INJ 80MG/ML	5	NM, LA, PA; DL
XELJANZ SOL 1MG/ML	5	NM, PA; DL
XELJANZ TAB 5MG	5	NM, PA; DL
XELJANZ TAB 10MG	5	NM, PA; DL
XELJANZ XR TAB 11MG	5	NM, PA; DL
XELJANZ XR TAB 22MG	5	NM, PA; DL

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate tab 200 mg</i>	3	
<i>leflunomide tab 10 mg</i>	3	
<i>leflunomide tab 20 mg</i>	3	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	2	
RIDAURA CAP 3MG	3	DL
XATMEP SOL 2.5MG/ML	4	DL

IMMUNOGLOBULINS

BIVIGAM INJ 10%	5	NM, LA, PA; DL
FLEBOGAMMA INJ 5GM/50ML	5	NM, PA; DL
GAMASTAN INJ	4	NM, LA, PA
GAMMAGARD INJ 2.5GM/25	5	NM, PA; DL

Drug Name	Drug Tier	Requirements/Limits
GAMMAGARD INJ 5GM/50ML	5	NM, PA; DL
GAMMAGARD INJ 10GM/100	5	NM, PA; DL
GAMMAGARD INJ 20GM/200	5	NM, PA; DL
GAMMAGARD INJ 30GM/300	5	NM, PA; DL
GAMMAGARD SD INJ 5GM HU	5	NM, PA; DL
GAMMAGARD SD INJ 10GM HU	5	NM, PA; DL
GAMMAKED INJ 1GM/10ML	5	NM, PA; DL
GAMMAKED INJ 5GM/50ML	5	NM, PA; DL
GAMMAKED INJ 10GM/100	5	NM, PA; DL
GAMMAKED INJ 20GM/200	5	NM, PA; DL
GAMMAPLEX INJ 5%	5	NM, LA, PA; DL
GAMMAPLEX INJ 10%	5	NM, LA, PA; DL
GAMUNEX-C INJ 1GM/10ML	5	NM, PA; DL
GAMUNEX-C INJ 5GM/50ML	5	NM, PA; DL
GAMUNEX-C INJ 10GM/100	5	NM, PA; DL
GAMUNEX-C INJ 20GM/200	5	NM, PA; DL
GAMUNEX-C INJ 40/400ML	5	NM, PA; DL
OCTAGAM INJ 1GM	5	NM, PA; DL
OCTAGAM INJ 2GM/20ML	5	NM, PA; DL
PANZYGA SOL 1GM/10ML	5	NM, PA; DL
PANZYGA SOL 2.5/25ML	5	NM, PA; DL
PANZYGA SOL 5GM/50ML	5	NM, PA; DL
PANZYGA SOL 10/100ML	5	NM, PA; DL
PANZYGA SOL 20/200ML	5	NM, PA; DL
PANZYGA SOL 30/300ML	5	NM, PA; DL
PRIVIGEN INJ 20GRAMS	5	NM, PA; DL
IMMUNOMODULATORS		
ACTIMMUNE INJ 2MU/0.5	5	NM, LA, PA; DL
ARCALYST INJ 220MG	5	NM, LA, PA; DL
GRASTEK SUB 2800BAU	4	PA; DL
INTRON A INJ 10MU	3	NM, LA; DL
INTRON A INJ 18MU	3	NM, LA; DL
INTRON A INJ 18MU	3	NM; DL
INTRON A INJ 25MU	5	NM; DL
INTRON A INJ 50MU	5	NM, LA; DL
ODACTRA SUB	4	PA; DL
SYNAGIS INJ 50MG	5	NM; DL
SYNAGIS INJ 100MG/ML	5	NM; DL
IMMUNOSUPPRESSANTS		
ATGAM INJ 250MG	5	DL
AZATHIOPRINE INJ 100MG	3	B/D
<i>azathioprine tab 50 mg</i>	2	B/D
<i>azathioprine tab 75 mg</i>	2	B/D
<i>azathioprine tab 100 mg</i>	2	B/D

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Drug Name	Drug Tier	Requirements/Limits
BENLYSTA INJ 120MG	5	NM, LA, PA; DL
BENLYSTA INJ 200MG/ML	5	QL (4 auto-injectors / 28 days), NM, LA, PA; DL
BENLYSTA INJ 200MG/ML	5	QL (4 syringes / 28 days), NM, LA, PA; DL
BENLYSTA INJ 400MG	5	NM, LA, PA; DL
<i>cyclosporine cap 25 mg</i>	3	B/D, NM
<i>cyclosporine cap 100 mg</i>	3	B/D, NM
<i>cyclosporine iv soln 50 mg/ml</i>	2	B/D, NM
<i>cyclosporine modified cap 25 mg</i>	2	B/D, NM
<i>cyclosporine modified cap 50 mg</i>	2	B/D, NM
<i>cyclosporine modified cap 100 mg</i>	2	B/D, NM
<i>cyclosporine modified oral soln 100 mg/ml</i>	2	B/D, NM
<i>everolimus tab 0.5 mg</i>	5	B/D, NM; DL
<i>everolimus tab 0.25 mg</i>	4	B/D, QL (60 tabs / 30 days), NM; DL
<i>everolimus tab 0.75 mg</i>	5	B/D, NM; DL
<i>everolimus tab 1 mg</i>	5	B/D, NM; DL
<i>gengraf cap 25mg</i>	2	B/D, NM
<i>gengraf cap 100mg</i>	2	B/D, NM
<i>gengraf sol 100mg/ml</i>	2	B/D, NM
LUPKYNIS CAP 7.9MG	5	QL (180 caps / 30 days), NM, LA, PA; DL
<i>mycophenolate mofetil cap 250 mg</i>	2	B/D, NM
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	2	B/D, NM
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	3	B/D, NM
<i>mycophenolate mofetil tab 500 mg</i>	2	B/D, NM
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	3	B/D, NM
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	3	B/D, NM
NULOJIX INJ 250MG	5	B/D, NM; DL
PROGRAF GRA 0.2MG	4	B/D, NM
PROGRAF GRA 1MG	4	B/D, NM
PROGRAF INJ 5MG/ML	4	B/D, NM
SIMULECT INJ 10MG	4	B/D
SIMULECT INJ 20MG	4	B/D
<i>sirolimus oral soln 1 mg/ml</i>	4	B/D, NM
<i>sirolimus tab 0.5 mg</i>	3	B/D, NM
<i>sirolimus tab 1 mg</i>	3	B/D, NM
<i>sirolimus tab 2 mg</i>	3	B/D, NM
<i>tacrolimus cap 0.5 mg</i>	2	B/D, NM
<i>tacrolimus cap 1 mg</i>	2	B/D, NM

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Drug Name	Drug Tier	Requirements/Limits
<i>tacrolimus cap 5 mg</i>	2	B/D, NM
THYMOGLOBULN INJ 25MG	3	B/D
VACCINES		
ACTHIB INJ	3	
ADACEL INJ	3	
BCG VACCINE INJ 50MG	4	
BEXSERO INJ	3	
BOOSTRIX INJ	3	
DAPTACEL INJ	3	
DIP/TET PED INJ 25-5LFU	3	
ENGERIX-B INJ 10/0.5ML	3	B/D
ENGERIX-B INJ 20MCG/ML	3	B/D
GARDASIL 9 INJ	4	
HAVRIX INJ 720UNIT	3	
HAVRIX INJ 1440UNIT	3	
HIBERIX SOL 10MCG	3	
IMOVAX RABIE INJ 2.5/ML	3	
INFANRIX INJ	3	
IPOL INJ INACTIVE	4	
IXIARO INJ	4	
KINRIX INJ	3	
M-M-R II INJ	3	
MENACTRA INJ	3	
MENQUADFI INJ	3	
MENVEO INJ	3	
PEDIARIX INJ 0.5ML	3	
PEDVAX HIB INJ	4	
PENTACEL INJ	3	
PREHEVBRIO SUS 10MCG/ML	3	B/D
PRIORIX INJ	3	
PROQUAD INJ	4	
QUADRACEL INJ	3	
QUADRACEL INJ 0.5ML	3	
RABAVERT INJ	3	DL
RECOMBIVA HB INJ 5MCG/0.5	3	B/D
RECOMBIVA HB INJ 10MCG/ML	3	B/D
RECOMBIVA-HB INJ 40MCG/ML	3	B/D
ROTARIX SUS	4	
ROTATEQ SOL	4	
SHINGRIX INJ 50/0.5ML	3	QL (2 injections in lifetime)
TDVAX INJ 2-2 LF	3	
TENIVAC INJ 5-2LF	3	
TICOVAC INJ	3	

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Drug Name	Drug Tier	Requirements/Limits
TRUMENBA INJ	3	
TWINRIX INJ	3	
TYPHIM VI INJ	4	
VAQTA INJ 25/0.5ML	3	
VAQTA INJ 50UNT/ML	3	
VARIVAX INJ	3	
YF-VAX INJ	4	

NUTRITIONAL/SUPPLEMENTS

ELECTROLYTES/MINERALS, INJECTABLE

D2.5W/NACL INJ 0.45%	3	
D10W/NACL INJ 0.2%	3	
<i>dextrose 5% in lactated ringers</i>	3	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	3	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	3	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	3	
ISOLYTE-P INJ /D5W	4	DL
ISOLYTE-S INJ PH 7.4	4	DL
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	3	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	3	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	3	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/NACL INJ 0.3/0.9%	3	
<i>lactated ringer's solution</i>	3	
<i>magnesium sulfate inj 50%</i>	3	
PLASMA-LYTE INJ -148	4	DL
PLASMA-LYTE INJ -A	4	DL
POT CHL/NACL INJ 20MEQ/L	2	
POT CHL/NACL INJ 40MEQ/L	3	
POT CHLORIDE INJ 10MEQ	3	
POT CHLORIDE INJ 20MEQ	3	
POT CHLORIDE INJ 40MEQ	3	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride inj 2 meq/ml</i>	2	
<i>ringer's solution</i>	3	
<i>sodium chloride iv soln 0.9%</i>	2	
<i>sodium chloride iv soln 0.45%</i>	3	
<i>sodium chloride iv soln 3%</i>	3	
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
<i>klor-con 8 tab 8meq er</i>	3	
<i>klor-con 10 tab 10meq er</i>	3	
<i>klor-con m10 tab 10meq er</i>	2	
<i>klor-con m15 tab 15meq er</i>	3	
<i>klor-con m20 tab 20meq er</i>	2	
<i>klor-con pak 20meq</i>	2	
<i>klor-con/ef tab 25meq ef</i>	2	
<i>pot chloride tab 25meq ef</i>	2	
<i>potassium chloride cap er 8 meq</i>	2	
<i>potassium chloride cap er 10 meq</i>	2	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	2	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	2	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	2	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	3	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	3	
<i>potassium chloride tab er 8 meq (600 mg)</i>	2	
<i>potassium chloride tab er 10 meq</i>	2	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	3	
<i>sodium fluoride 2.2 mg</i>	2	
IV NUTRITION		
<i>dextrose inj 5%</i>	2	
<i>dextrose inj 10%</i>	3	
INTRALIPID INJ 20%	4	B/D; DL
INTRALIPID INJ 30%	4	B/D; DL
PREMASOL SOL 10%	3	B/D; DL
PROSOL INJ 20%	4	B/D; DL
TRAVASOL INJ 10%	3	B/D; DL
TROPHAMINE INJ 10%	4	B/D; DL
OPHTHALMIC		
ANTI-INFECTIVE/ANTI-INFLAMMATORY		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
BLEPHAMIDE OIN S.O.P.	4	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2	
<i>neomycin-polymyxin-hc ophth susp</i>	2	
PRED-G S.O.P OIN OP	4	
PRED-G SUS OP	4	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	2	
TOBRADEX OIN 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	2	
ANTI-INFECTIVES		
AZASITE SOL 1%	4	
<i>bacitracin ophth oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	2	
CILOXAN OIN 0.3% OP	4	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	2	
<i>erythromycin ophth oint 5 mg/gm</i>	2	
<i>gatifloxacin ophth soln 0.5%</i>	2	
<i>gentak oin 0.3% op</i>	2	
<i>gentamicin sulfate ophth soln 0.3%</i>	2	
<i>levofloxacin ophth soln 0.5%</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	2	
NATACYN SUS 5% OP	4	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	2	
<i>ofloxacin ophth soln 0.3%</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	2	
<i>sulfacetamide sodium ophth oint 10%</i>	2	
<i>sulfacetamide sodium ophth soln 10%</i>	2	
<i>tobramycin ophth soln 0.3%</i>	2	
TOBEX OIN 0.3% OP	4	
<i>trifluridine ophth soln 1%</i>	2	
ZIRGAN GEL 0.15%	4	
ANTI-INFLAMMATORIES		
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	2	
<i>diclofenac sodium ophth soln 0.1%</i>	2	
<i>difluprednate ophth emulsion 0.05%</i>	3	
<i>fluorometholone ophth susp 0.1%</i>	3	
<i>flurbiprofen sodium ophth soln 0.03%</i>	2	
FML FORTE SUS 0.25% OP	4	
FML OIN 0.1% OP	4	
<i>ketorolac tromethamine ophth soln 0.4%</i>	2	
<i>ketorolac tromethamine ophth soln 0.5%</i>	2	
LOTEMAX OIN 0.5%	3	
LOTEMAX SM GEL 0.38%	4	
<i>loteprednol etabonate ophth gel 0.5%</i>	3	
<i>loteprednol etabonate ophth susp 0.5%</i>	3	
NEVANAC SUS 0.1%	4	
PRED MILD SUS 0.12% OP	4	
PRED SOD PHO SOL 1% OP	3	
<i>prednisolone acetate ophth susp 1%</i>	3	
PROLENSA SOL 0.07%	4	
ANTIALLERGICS		
<i>azelastine hcl ophth soln 0.05%</i>	2	
<i>bepotastine besilate ophth soln 1.5%</i>	2	
<i>cromolyn sodium ophth soln 4%</i>	2	
<i>epinastine hcl ophth soln 0.05%</i>	2	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	2	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	3	
ZERVIAE DRO 0.24%	3	
ANTIGLAUCOMA		
ALPHAGAN P SOL 0.1%	3	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	2	
<i>betaxolol hcl ophth soln 0.5%</i>	2	
BETOPTIC-S SUS 0.25% OP	4	
<i>bimatoprost ophth soln 0.03%</i>	2	
<i>brimonidine tartrate ophth soln 0.2%</i>	2	
<i>brimonidine tartrate ophth soln 0.15%</i>	3	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	2	
<i>brinzolamide ophth susp 1%</i>	2	
<i>carteolol hcl ophth soln 1%</i>	2	
<i>dorzolamide hcl ophth soln 2%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	2	
IOPIDINE SOL 1% OP	4	
<i>latanoprost ophth soln 0.005%</i>	2	
<i>levobunolol hcl ophth soln 0.5%</i>	2	
LUMIGAN SOL 0.01%	3	
<i>pilocarpine hcl ophth soln 1%</i>	3	
<i>pilocarpine hcl ophth soln 2%</i>	3	
<i>pilocarpine hcl ophth soln 4%</i>	3	
RHOPRESSA SOL 0.02%	3	
ROCKLATAN DRO	3	
SIMBRINZA SUS 1-0.2%	3	
<i>timolol maleate ophth gel forming soln 0.5%</i>	2	
<i>timolol maleate ophth gel forming soln 0.25%</i>	2	
<i>timolol maleate ophth soln 0.5%</i>	2	
<i>timolol maleate ophth soln 0.25%</i>	2	
<i>timolol maleate preservative free ophth soln 0.5%</i>	2	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	2	
VYZULTA SOL 0.024%	4	

MISCELLANEOUS

<i>atropine sulfate ophth soln 1%</i>	3	
<i>cyclosporine (ophth) emulsion 0.05%</i>	3	
CYSTADROPS SOL 0.37%	5	NM, LA, PA; DL
CYSTARAN SOL 0.44%	5	NM, LA, PA; DL
EYLEA INJ 2/0.05ML	5	NM, LA; DL
LUCENTIS SOL 0.3MG	5	NM, LA; DL
LUCENTIS SOL 0.5MG	5	NM, LA; DL
OXERVATE SOL 20MCG/ML	5	NM, LA; DL
RESTASIS EMU 0.05% OP	3	
RESTASIS MUL EMU 0.05% OP	3	
XIIDRA DRO 5%	3	

OTIC

OTIC AGENTS

<i>acetic acid otic soln 2%</i>	3	
CIPRO HC SUS OTIC	4	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	2	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-hc otic soln 1%</i>	2	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	2	
<i>ofloxacin otic soln 0.3%</i>	2	

RESPIRATORY

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS

ANORO ELLIPT AER 62.5-25	3	
BEVESPI AER 9-4.8MCG	3	
COMBIVENT AER 20-100	3	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	2	B/D
TRELEGY AER 100MCG	3	
TRELEGY AER 200MCG	3	

ANTICHOLINERGICS

ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	3	
<i>ipratropium bromide inhal soln 0.02%</i>	2	B/D
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	2	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	2	
YUPELRI SOL	4	B/D

ANTIHISTAMINES

<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	2	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	2	
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	2	
<i>cyproheptadine hcl tab 4 mg</i>	3	
<i>desloratadine tab 5 mg</i>	2	
<i>diphenhydramine hcl inj 50 mg/ml</i>	2	
<i>hydroxyzine hcl tab 10 mg</i>	2	
<i>hydroxyzine hcl tab 25 mg</i>	2	
<i>hydroxyzine hcl tab 50 mg</i>	2	
<i>hydroxyzine pamoate cap 25 mg</i>	2	
<i>hydroxyzine pamoate cap 50 mg</i>	2	
<i>hydroxyzine pamoate cap 100 mg</i>	2	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	2	
<i>levocetirizine dihydrochloride tab 5 mg</i>	2	
<i>olopatadine hcl nasal soln 0.6%</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	B/D
DALIRESP TAB 250MCG	4	DL
DALIRESP TAB 500MCG	4	DL
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	3	QL (4 pens / 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	3	QL (4 pens / 30 days)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	3	QL (4 pens / 30 days)
ESBRIET CAP 267MG	5	NM, LA, PA; DL
ESBRIET TAB 267MG	5	NM, LA, PA; DL
ESBRIET TAB 801MG	5	NM, LA, PA; DL
FASENRA INJ 30MG/ML	5	NM, LA, PA; DL
FASENRA PEN INJ 30MG/ML	5	NM, LA, PA; DL
GLASSIA INJ	5	NM, LA, PA; DL
KALYDECO PAK 25MG	5	NM, LA, PA; DL
KALYDECO PAK 50MG	5	NM, LA, PA; DL
KALYDECO PAK 75MG	5	NM, LA, PA; DL
KALYDECO TAB 150MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
OFEV CAP 100MG	5	NM, LA, PA; DL
OFEV CAP 150MG	5	NM, LA, PA; DL
ORKAMBI GRA 75-94MG	5	LA, PA; DL
ORKAMBI GRA 100-125	5	NM, LA, PA; DL
ORKAMBI GRA 150-188	5	NM, LA, PA; DL
ORKAMBI TAB 100-125	5	NM, LA, PA; DL
ORKAMBI TAB 200-125	5	NM, LA, PA; DL
<i>pirfenidone tab 267 mg</i>	5	NM, PA; DL
<i>pirfenidone tab 801 mg</i>	5	NM, PA; DL
PROLASTIN-C INJ 1000MG	5	NM, LA, PA; DL
PULMOZYME SOL 1MG/ML	5	B/D, NM; DL
SYMDEKO TAB 50-75MG	5	QL (60 tabs / 30 days), NM, LA, PA; DL
THEO-24 CAP 100MG CR	4	
THEO-24 CAP 200MG CR	4	
<i>theophylline tab er 12hr 300 mg</i>	3	
<i>theophylline tab er 12hr 450 mg</i>	3	
<i>theophylline tab er 24hr 400 mg</i>	2	
<i>theophylline tab er 24hr 600 mg</i>	2	
TRIKAFTA TAB	5	QL (84 tabs / 28 days), NM, LA, PA; DL
XOLAIR INJ 75/0.5	5	NM, LA, PA; DL
XOLAIR INJ 150MG/ML	5	NM, LA, PA; DL
XOLAIR SOL 150MG	5	NM, LA, PA; DL
ZEMAIRA INJ 1000MG	5	NM, LA, PA; DL

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Drug Name	Drug Tier	Requirements/Limits
NASAL STEROIDS		
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	2	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	2	
<i>mometasone furoate nasal susp 50 mcg/act</i>	2	
XHANCE MIS 93MCG	3	
STEROID INHALANTS		
ARNUITY ELPT INH 50MCG	3	
ARNUITY ELPT INH 100MCG	3	
ARNUITY ELPT INH 200MCG	3	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	3	B/D
<i>budesonide inhalation susp 0.25 mg/2ml</i>	3	B/D
<i>budesonide inhalation susp 1 mg/2ml</i>	3	B/D
FLOVENT DISK AER 50MCG	3	
FLOVENT DISK AER 100MCG	3	
FLOVENT DISK AER 250MCG	3	
FLOVENT HFA AER 44MCG	3	
FLOVENT HFA AER 110MCG	3	
FLOVENT HFA AER 220MCG	3	
FLUTICAS HFA AER 44MCG	3	
FLUTICAS HFA AER 110MCG	3	
FLUTICAS HFA AER 220MCG	3	
PULMICORT INH 90MCG	4	
PULMICORT INH 180MCG	4	
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR DISKU AER 100/50	3	
ADVAIR DISKU AER 250/50	3	
ADVAIR DISKU AER 500/50	3	
ADVAIR HFA AER 45/21	3	
ADVAIR HFA AER 115/21	3	
ADVAIR HFA AER 230/21	3	
BREO ELLIPTA INH 100-25	3	
BREO ELLIPTA INH 200-25	3	
FLUTIC/VILAN INH 100-25	3	
FLUTIC/VILAN INH 200-25	3	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	2	
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	2	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	2	
SYMBICORT AER 80-4.5	3	
SYMBICORT AER 160-4.5	3	

Drug Name	Drug Tier	Requirements/Limits
wixela inhub aer 100/50	2	
wixela inhub aer 250/50	2	
wixela inhub aer 500/50	2	

TOPICAL

DERMATOLOGY, ACNE

acutane cap 10mg	3	
acutane cap 20mg	3	
acutane cap 30mg	3	
acutane cap 40mg	3	
benzoyl peroxide-erythromycin gel 5-3%	3	
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	3	
clindamycin phosphate gel 1%	2	
clindamycin phosphate lotion 1%	2	
clindamycin phosphate soln 1%	2	
clindamycin phosphate swab 1%	2	
ery pad 2%	2	
erythromycin gel 2%	2	
erythromycin soln 2%	2	
myorisan cap 10mg	3	
myorisan cap 20mg	3	
myorisan cap 30mg	3	
myorisan cap 40mg	3	
sulfacetamide sodium lotion 10% (acne)	2	
tretinoin cream 0.1%	3	PA; DL
tretinoin cream 0.05%	3	PA; DL
tretinoin cream 0.025%	3	PA; DL
tretinoin gel 0.01%	3	PA; DL
tretinoin gel 0.05%	3	PA; DL
tretinoin gel 0.025%	3	PA; DL

DERMATOLOGY, ANTIBIOTICS

ALTABAX OIN 1%	4	
gentamicin sulfate cream 0.1%	2	
gentamicin sulfate oint 0.1%	2	
mupirocin calcium cream 2%	2	
mupirocin oint 2%	2	
silver sulfadiazine cream 1%	3	
ssd cre 1%	3	
SULFAMYLON CRE 85MG/GM	3	

DERMATOLOGY, ANTIFUNGALS

ciclopirox gel 0.77%	2	
ciclopirox olamine cream 0.77% (base equiv)	2	

Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	2	
<i>ciclopirox shampoo 1%</i>	3	
<i>ciclopirox solution 8%</i>	2	DL
<i>clotrimazole cream 1%</i>	2	
<i>clotrimazole soln 1%</i>	2	QL (90 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	3	QL (90 gm / 30 days)
<i>ketoconazole cream 2%</i>	2	
<i>luliconazole cream 1%</i>	2	
<i>nyamyc pow 100000</i>	2	
<i>nystatin cream 100000 unit/gm</i>	2	
<i>nystatin oint 100000 unit/gm</i>	2	
<i>nystatin topical powder 100000 unit/gm</i>	2	
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	3	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	3	
<i>nystop pow 100000</i>	2	
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin cap 10 mg</i>	3	
<i>acitretin cap 17.5 mg</i>	3	
<i>acitretin cap 25 mg</i>	3	
<i>calcipotriene cream 0.005%</i>	4	
<i>calcipotriene oint 0.005%</i>	4	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	4	
<i>calcitriol oint 3 mcg/gm</i>	3	
<i>methoxsalen rapid cap 10 mg</i>	5	DL
<i>tazarotene cream 0.1%</i>	4	
DERMATOLOGY, ANTISEBORRHEICS		
<i>ketoconazole shampoo 2%</i>	2	
<i>selenium sulfide lotion 2.5%</i>	2	
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort cre 2.5%</i>	2	
<i>alclometasone dipropionate cream 0.05%</i>	2	
<i>alclometasone dipropionate oint 0.05%</i>	2	
<i>amcinonide cream 0.1%</i>	3	
<i>amcinonide lotion 0.1%</i>	3	
<i>betamethasone dipropionate augmented cream 0.05%</i>	2	
<i>betamethasone dipropionate augmented gel 0.05%</i>	2	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate augmented oint 0.05%</i>	3	
<i>betamethasone dipropionate cream 0.05%</i>	2	
<i>betamethasone dipropionate lotion 0.05%</i>	2	
<i>betamethasone dipropionate oint 0.05%</i>	2	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	2	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	2	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	2	
<i>calcipotriene foam 0.005%</i>	4	
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	4	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	4	
<i>clobetasol e cre 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate cream 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate emulsion foam 0.05%</i>	4	QL (100 gm / 30 days)
<i>clobetasol propionate foam 0.05%</i>	4	QL (100 gm / 30 days)
<i>clobetasol propionate gel 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate lotion 0.05%</i>	4	QL (120 mL / 30 days)
<i>clobetasol propionate oint 0.05%</i>	4	QL (120 gm / 30 days)
<i>clobetasol propionate shampoo 0.05%</i>	4	QL (120 mL / 30 days)
<i>clobetasol propionate soln 0.05%</i>	4	QL (100 mL / 30 days)
<i>clobetasol propionate spray 0.05%</i>	4	QL (120 mL / 30 days)
<i>clocortolone pivalate cream 0.1%</i>	2	
<i>desonide cream 0.05%</i>	4	QL (90 gm / 30 days)
<i>desonide lotion 0.05%</i>	4	QL (120 mL / 30 days)
<i>desonide oint 0.05%</i>	4	QL (90 gm / 30 days)
<i>fluocinolone acetonide cream 0.01%</i>	2	
<i>fluocinolone acetonide cream 0.025%</i>	2	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	3	QL (120 mL / 30 days)
<i>fluocinolone acetonide oint 0.025%</i>	2	
<i>fluocinolone acetonide soln 0.01%</i>	3	QL (120 mL / 30 days)
<i>fluocinonide cream 0.05%</i>	2	
<i>fluocinonide emulsified base cream 0.05%</i>	2	
<i>fluocinonide gel 0.05%</i>	2	
<i>fluocinonide oint 0.05%</i>	2	
<i>fluocinonide soln 0.05%</i>	3	QL (120 mL / 30 days)
<i>fluticasone propionate cream 0.05%</i>	2	
<i>fluticasone propionate lotion 0.05%</i>	3	QL (120 mL / 30 days)
<i>fluticasone propionate oint 0.005%</i>	2	
<i>halobetasol propionate cream 0.05%</i>	3	QL (120 gm / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>halobetasol propionate oint 0.05%</i>	3	QL (120 gm / 30 days)
<i>hydrocortisone butyrate cream 0.1%</i>	3	
<i>hydrocortisone butyrate oint 0.1%</i>	3	
<i>hydrocortisone butyrate soln 0.1%</i>	3	
<i>hydrocortisone lotion 2.5%</i>	2	
<i>hydrocortisone oint 2.5%</i>	2	
<i>hydrocortisone valerate cream 0.2%</i>	3	
<i>hydrocortisone valerate oint 0.2%</i>	3	
<i>mometasone furoate cream 0.1%</i>	2	
<i>mometasone furoate oint 0.1%</i>	2	
<i>mometasone furoate solution 0.1% (lotion)</i>	2	
<i>tovet aer 0.05%</i>	4	QL (100 gm / 30 days)
<i>triamcinolone acetonide cream 0.1%</i>	2	
<i>triamcinolone acetonide cream 0.5%</i>	2	
<i>triamcinolone acetonide cream 0.025%</i>	2	
<i>triamcinolone acetonide lotion 0.1%</i>	2	
<i>triamcinolone acetonide lotion 0.025%</i>	2	
<i>triamcinolone acetonide oint 0.1%</i>	2	
<i>triamcinolone acetonide oint 0.5%</i>	2	
<i>triamcinolone acetonide oint 0.025%</i>	2	
<i>triderm cre 0.5%</i>	2	
VERDESO AER 0.05%	5	QL (100 gm / 30 days); DL
DERMATOLOGY, LOCAL ANESTHETICS		
<i>lidocaine hcl soln 4%</i>	3	QL (50 mL / 30 days), PA
<i>lidocaine oint 5%</i>	3	PA
<i>lidocaine patch 5%</i>	3	QL (90 patches / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	2	QL (30 gm / 30 days)
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>acyclovir oint 5%</i>	3	
<i>azelaic acid gel 15%</i>	2	
<i>bexarotene gel 1%</i>	5	NM, PA; DL
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	2	QL (500 gm / 30 days)
<i>diclofenac sodium soln 1.5%</i>	3	QL (300 mL / 30 days)
EUCRISA OIN 2%	4	
FLUOROPLEX CRE 1%	5	DL
<i>fluorouracil cream 0.5%</i>	5	DL
<i>fluorouracil cream 5%</i>	3	
<i>fluorouracil soln 2%</i>	2	
<i>fluorouracil soln 5%</i>	2	
<i>hydrocortisone perianal cream 2.5%</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>imiquimod cream 5%</i>	3	
<i>lactic acid (ammonium lactate) cream 12%</i>	2	
<i>lactic acid (ammonium lactate) lotion 12%</i>	2	
<i>metronidazole cream 0.75%</i>	2	
<i>metronidazole gel 0.75%</i>	2	
<i>metronidazole lotion 0.75%</i>	2	
PANRETIN GEL 0.1%	5	DL
<i>pimecrolimus cream 1%</i>	3	
<i>podofilox soln 0.5%</i>	2	
<i>procto-med cre hc 2.5%</i>	2	
<i>procto-pak cre 1%</i>	2	
<i>proctosol hc cre 2.5%</i>	2	
<i>proctozone cre -hc 2.5%</i>	2	
QBREXZA PAD 2.4%	4	QL (30 pledgets / 30 days)
RECTIV OIN 0.4%	4	
<i>tacrolimus oint 0.1%</i>	3	
<i>tacrolimus oint 0.03%</i>	3	
TARGETIN GEL 1%	5	NM, PA; DL
VALCHLOR GEL 0.016%	5	NM, LA, PA; DL
ZYCLARA PUMP CRE 2.5%	5	DL

DERMATOLOGY, SCABICIDES AND PEDICULIDES

<i>malathion lotion 0.5%</i>	2	
<i>permethrin cream 5%</i>	2	
<i>spinosad susp 0.9%</i>	2	

DERMATOLOGY, WOUND CARE AGENTS

<i>lactated ringer's for irrigation</i>	3	
REGRANEX GEL 0.01%	5	QL (30 gm / 30 days); DL
<i>ringer's solution for irrigation</i>	3	
SANTYL OIN 250/GM	3	
<i>sodium chloride irrigation soln 0.9%</i>	3	
<i>water for irrigation, sterile irrigation soln</i>	3	

MOUTH/THROAT/DENTAL AGENTS

ARESTIN MIS 1MG	4	NM
<i>cevimeline hcl cap 30 mg</i>	3	
<i>chlorhexidine gluconate soln 0.12%</i>	2	
<i>clotrimazole troche 10 mg</i>	2	
<i>lidocaine hcl viscous soln 2%</i>	2	
<i>nystatin susp 100000 unit/ml</i>	2	
<i>periogard sol 0.12%</i>	2	
<i>pilocarpine hcl tab 5 mg</i>	2	
<i>pilocarpine hcl tab 7.5 mg</i>	2	
<i>sf 5000 plus cre 1.1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide dental paste 0.1%</i>	2	

Index

A	
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	7
<i>abacavir sulfate tab 300 mg (base equiv)</i>	8
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	9
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	9
ABELCET INJ 5MG/ML	7
ABILIFY MAIN INJ 300MG	52
ABILIFY MAIN INJ 400MG	52
<i>abiraterone acetate tab 250 mg</i>	18
<i>abiraterone acetate tab 500 mg</i>	18
ABRAXANE INJ 100MG	20
<i>acamprosate calcium tab delayed release 333 mg</i>	61
<i>acarbose tab 100 mg</i>	63
<i>acarbose tab 25 mg</i>	63
<i>acarbose tab 50 mg</i>	63
<i>accutane cap 10mg</i>	101
<i>accutane cap 20mg</i>	101
<i>accutane cap 30mg</i>	101
<i>accutane cap 40mg</i>	101
<i>acebutolol hcl cap 200 mg</i>	34
<i>acebutolol hcl cap 400 mg</i>	34
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	2
<i>acetaminophen w/ codeine tab 300-15 mg</i>	2
<i>acetaminophen w/ codeine tab 300-30 mg</i>	2
<i>acetaminophen w/ codeine tab 300-60 mg</i>	2
<i>acetazolamide cap er 12hr 500 mg</i> ...37	
<i>acetazolamide tab 125 mg</i>	37
<i>acetazolamide tab 250 mg</i>	37
<i>acetic acid otic soln 2%</i>	96
<i>acetylcysteine inhal soln 10%</i>	98
<i>acetylcysteine inhal soln 20%</i>	98
<i>acitretin cap 10 mg</i>	102
<i>acitretin cap 17.5 mg</i>	102
<i>acitretin cap 25 mg</i>	102
ACTHAR INJ 80UNIT	73
ACTHIB INJ	91
ACTIMMUNE INJ 2MU/0.5	89
<i>acyclovir cap 200 mg</i>	10
<i>acyclovir oint 5%</i>	104
<i>acyclovir sodium iv soln 50 mg/ml</i>	10
<i>acyclovir susp 200 mg/5ml</i>	10
<i>acyclovir tab 400 mg</i>	10
<i>acyclovir tab 800 mg</i>	11
ADACEL INJ.....	91
<i>adefovir dipivoxil tab 10 mg</i>	11
ADEMPAS TAB 0.5MG	39
ADEMPAS TAB 1.5MG	39
ADEMPAS TAB 1MG	39
ADEMPAS TAB 2.5MG	40
ADEMPAS TAB 2MG	40
ADRENALIN INJ 1MG/ML	38
ADVAIR DISKU AER 100/50.....	100
ADVAIR DISKU AER 250/50.....	100
ADVAIR DISKU AER 500/50.....	100
ADVAIR HFA AER 115/21	100
ADVAIR HFA AER 230/21	100
ADVAIR HFA AER 45/21	100
AFINITOR DIS TAB 2MG.....	20
AFINITOR DIS TAB 3MG.....	20
AFINITOR DIS TAB 5MG.....	20
AIMOVIG INJ 140MG/ML	58
AIMOVIG INJ 70MG/ML	58
AJOVY INJ 225/1.5	58
<i>ala-cort cre 2.5%</i>	102
<i>albendazole tab 200 mg</i>	4
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	98
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	98
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	98
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	98
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	98
<i>albuterol sulfate syrup 2 mg/5ml</i>	98
<i>albuterol sulfate tab 2 mg</i>	98
<i>albuterol sulfate tab 4 mg</i>	98
<i>alclometasone dipropionate cream 0.05%</i>	102
<i>alclometasone dipropionate oint 0.05%</i>	102
ALECENSA CAP 150MG	20

<i>alendronate sodium oral soln 70 mg/75ml</i>	66	<i>amiloride hcl tab 5 mg</i>	37
<i>alendronate sodium tab 10 mg</i>	66	<i>aminocaproic acid tab 1000 mg</i>	86
<i>alendronate sodium tab 35 mg</i>	66	<i>aminocaproic acid tab 500 mg</i>	86
<i>alendronate sodium tab 70 mg</i>	66	<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	31
<i>alfuzosin hcl tab er 24hr 10 mg</i>	83	<i>amiodarone hcl tab 100 mg</i>	31
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	38	<i>amiodarone hcl tab 200 mg</i>	31
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	38	<i>amiodarone hcl tab 400 mg</i>	31
<i>allopurinol tab 100 mg</i>	1	<i>amitriptyline hcl tab 10 mg</i>	47
<i>allopurinol tab 300 mg</i>	1	<i>amitriptyline hcl tab 100 mg</i>	47
<i>almotriptan malate tab 12.5 mg</i>	58	<i>amitriptyline hcl tab 150 mg</i>	47
<i>almotriptan malate tab 6.25 mg</i>	58	<i>amitriptyline hcl tab 25 mg</i>	47
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	82	<i>amitriptyline hcl tab 50 mg</i>	47
<i>alose tron hcl tab 1 mg (base equiv)</i> ..	82	<i>amitriptyline hcl tab 75 mg</i>	47
ALPHAGAN P SOL 0.1%	95	<i>amlodipine besylate tab 10 mg (base equivalent)</i>	35
ALPRAZOLAM CON 1 MG/ML	40	<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	35
<i>alprazolam tab 0.25 mg</i>	40	<i>amlodipine besylate tab 5 mg (base equivalent)</i>	35
<i>alprazolam tab 0.5 mg</i>	40	<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	27
<i>alprazolam tab 1 mg</i>	40	<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	27
<i>alprazolam tab 2 mg</i>	40	<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	26
ALTABAX OIN 1%	101	<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	26
<i>altavera tab</i>	67	<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	26
ALUNBRIG PAK	20	<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	27
ALUNBRIG TAB 180MG	21	<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	29
ALUNBRIG TAB 30MG	20	<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	29
ALUNBRIG TAB 90MG	21	<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	29
<i>alyacen tab 1/35</i>	67	<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	29
<i>alyq tab 20mg</i>	40	<i>amlodipine besylate-valsartan tab 10-160 mg</i>	29
<i>amabelz tab 0.5-0.1</i>	71	<i>amlodipine besylate-valsartan tab 10-320 mg</i>	29
<i>amabelz tab 1-0.5mg</i>	71	<i>amlodipine besylate-valsartan tab 5-160 mg</i>	29
<i>amantadine hcl cap 100 mg</i>	50		
<i>amantadine hcl soln 50 mg/5ml</i>	50		
<i>amantadine hcl tab 100 mg</i>	50		
<i>ambrisentan tab 10 mg</i>	40		
<i>ambrisentan tab 5 mg</i>	40		
<i>amcinonide cream 0.1%</i>	102		
<i>amcinonide lotion 0.1%</i>	102		
<i>amethia tab</i>	67		
<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 & hydrochlorothiazide tab 5-50 mg</i>	37		

<i>amlodipine besylate-valsartan tab 5-320 mg</i>	29	<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	57
<i>amoxapine tab 100 mg</i>	47	<i>amphetamine-dextroamphetamine tab 15 mg</i>	57
<i>amoxapine tab 150 mg</i>	47	<i>amphetamine-dextroamphetamine tab 20 mg</i>	57
<i>amoxapine tab 25 mg</i>	47	<i>amphetamine-dextroamphetamine tab 30 mg</i>	57
<i>amoxapine tab 50 mg</i>	47	<i>amphetamine-dextroamphetamine tab 5 mg</i>	56
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	14	<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	56
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	14	<i>amphotericin b for iv soln 50 mg</i>	7
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	14	<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	15
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	14	<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	15
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	14	<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	15
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	14	<i>ampicillin cap 250 mg</i>	15
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	14	<i>ampicillin cap 500 mg</i>	15
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	14	<i>ampicillin for susp 250 mg/5ml</i>	15
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	14	<i>ampicillin sodium for inj 1 gm</i>	15
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	14	<i>ampicillin sodium for inj 125 mg</i>	15
<i>amoxicillin (trihydrate) cap 250 mg</i> ..	14	<i>ampicillin sodium for iv soln 10 gm</i> ..	15
<i>amoxicillin (trihydrate) cap 500 mg</i> ..	14	<i>anagrelide hcl cap 0.5 mg</i>	86
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	14	<i>anagrelide hcl cap 1 mg</i>	86
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	14	<i>anastrozole tab 1 mg</i>	18
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	14	<i>ANORO ELLIPT AER 62.5-25</i>	97
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	14	<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	95
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	14	<i>aprepitant capsule 125 mg</i>	79
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	15	<i>aprepitant capsule 40 mg</i>	79
<i>amoxicillin (trihydrate) tab 500 mg</i> ..	15	<i>aprepitant capsule 80 mg</i>	79
<i>amoxicillin (trihydrate) tab 875 mg</i> ..	15	<i>aprepitant capsule therapy pack 80 & 125 mg</i>	79
<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	82	<i>apri tab</i>	67
<i>amphetamine-dextroamphetamine tab 10 mg</i>	56	<i>APTIOM TAB 200MG</i>	41
		<i>APTIOM TAB 400MG</i>	41
		<i>APTIOM TAB 600MG</i>	41
		<i>APTIOM TAB 800MG</i>	41
		<i>APTIVUS CAP 250MG</i>	8
		<i>ARALAST NP INJ 1000MG</i>	98
		<i>aranelle tab</i>	67
		<i>ARCALYST INJ 220MG</i>	89
		<i>ARESTIN MIS 1MG</i>	105

<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	98	<i>atazanavir sulfate cap 150 mg (base equiv)</i>	8
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	84	<i>atazanavir sulfate cap 200 mg (base equiv)</i>	8
<i>aripiprazole oral solution 1 mg/ml</i>	52	<i>atazanavir sulfate cap 300 mg (base equiv)</i>	8
<i>aripiprazole orally disintegrating tab 10 mg</i>	52	<i>atenolol & chlorthalidone tab 100-25 mg</i>	33
<i>aripiprazole orally disintegrating tab 15 mg</i>	52	<i>atenolol & chlorthalidone tab 50-25 mg</i>	33
<i>aripiprazole tab 10 mg</i>	52	<i>atenolol tab 100 mg</i>	34
<i>aripiprazole tab 15 mg</i>	52	<i>atenolol tab 25 mg</i>	34
<i>aripiprazole tab 2 mg</i>	52	<i>atenolol tab 50 mg</i>	34
<i>aripiprazole tab 20 mg</i>	52	ATGAM INJ 250MG	89
<i>aripiprazole tab 30 mg</i>	52	<i>atomoxetine hcl cap 10 mg (base equiv)</i>	57
<i>aripiprazole tab 5 mg</i>	52	<i>atomoxetine hcl cap 100 mg (base equiv)</i>	57
ARISTADA INJ 1064MG	52	<i>atomoxetine hcl cap 18 mg (base equiv)</i>	57
ARISTADA INJ 441MG/1.....	52	<i>atomoxetine hcl cap 25 mg (base equiv)</i>	57
ARISTADA INJ 662MG/2.....	52	<i>atomoxetine hcl cap 40 mg (base equiv)</i>	57
ARISTADA INJ 882MG/3.....	52	<i>atomoxetine hcl cap 60 mg (base equiv)</i>	57
ARISTADA INJ INITIO	52	<i>atomoxetine hcl cap 80 mg (base equiv)</i>	57
<i>armodafinil tab 150 mg</i>	61	<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	32
<i>armodafinil tab 200 mg</i>	61	<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	32
<i>armodafinil tab 250 mg</i>	61	<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	32
<i>armodafinil tab 50 mg</i>	61	<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	32
ARMOUR THYRO TAB 120MG	76	<i>atovaquone susp 750 mg/5ml</i>	4
ARMOUR THYRO TAB 15MG	76	<i>atovaquone-proguanil hcl tab 250-100 mg</i>	7
ARMOUR THYRO TAB 180MG	76	<i>atropine sulfate ophth soln 1%</i>	96
ARMOUR THYRO TAB 240MG	76	ATROVENT HFA AER 17MCG	97
ARMOUR THYRO TAB 300MG	76	AUBAGIO TAB 14MG.....	60
ARMOUR THYRO TAB 30MG	76	AUBAGIO TAB 7MG.....	60
ARMOUR THYRO TAB 60MG	76	<i>aubra eq tab 0.1-0.02</i>	67
ARMOUR THYRO TAB 90MG	76	AURYXIA TAB 210MG.....	75
ARNUITY ELPT INH 100MCG	100	AUSTEDO TAB 12MG	59
ARNUITY ELPT INH 200MCG	100	AUSTEDO TAB 6MG	59
ARNUITY ELPT INH 50MCG	100		
ARRANON INJ 5MG/ML.....	17		
ARZERRA CON 100/5ML.....	21		
<i>ascomp/cod cap 30mg</i>	2		
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	52		
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	52		
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	52		
<i>ashlyna tab</i>	67		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	87		

AUSTEDO TAB 9MG	59	BAQSIMI ONE POW 3MG/DOSE	73
AVASTIN INJ.....	21	BASAGLAR INJ 100UNIT.....	65
AVASTIN INJ 400/16ML.....	21	BCG VACCINE INJ 50MG	91
<i>aviane tab</i>	67	BD SWAB REG PAD SNGL USE	65
AVONEX PEN KIT 30MCG.....	60	BELEODAQ INJ 500MG.....	21
AVONEX PREFL KIT 30MCG.....	60	<i>benazepril & hydrochlorothiazide tab</i>	
AYVAKIT TAB 100MG	21	10-12.5 mg	27
AYVAKIT TAB 200MG	21	<i>benazepril & hydrochlorothiazide tab</i>	
AYVAKIT TAB 25MG.....	21	20-12.5 mg	27
AYVAKIT TAB 300MG	21	<i>benazepril & hydrochlorothiazide tab</i>	
AYVAKIT TAB 50MG.....	21	20-25 mg	27
<i>azacitidine for inj 100 mg</i>	17	<i>benazepril & hydrochlorothiazide tab 5-</i>	
AZASITE SOL 1%	94	6.25 mg	27
AZATHIOPRINE INJ 100MG.....	89	<i>benazepril hcl tab 10 mg</i>	27
<i>azathioprine tab 100 mg</i>	89	<i>benazepril hcl tab 20 mg</i>	27
<i>azathioprine tab 50 mg</i>	89	<i>benazepril hcl tab 40 mg</i>	27
<i>azathioprine tab 75 mg</i>	89	<i>benazepril hcl tab 5 mg</i>	27
<i>azelaic acid gel 15%</i>	104	BENLYSTA INJ 120MG.....	90
<i>azelastine hcl nasal spray 0.1% (137</i>		BENLYSTA INJ 200MG/ML.....	90
<i>mcg/spray)</i>	97	BENLYSTA INJ 400MG.....	90
<i>azelastine hcl nasal spray 0.15%</i>		<i>benzoyl peroxide-erythromycin gel 5-</i>	
<i>(205.5 mcg/spray)</i>	97	3%	101
<i>azelastine hcl ophth soln 0.05%</i>	95	<i>benztropine mesylate inj 1 mg/ml</i>	50
<i>azelastine hcl-fluticasone prop nasal</i>		<i>benztropine mesylate tab 0.5 mg</i>	50
<i>spray 137-50 mcg/act</i>	97	<i>benztropine mesylate tab 1 mg</i>	50
<i>azithromycin for susp 100 mg/5ml</i> ...	13	<i>benztropine mesylate tab 2 mg</i>	50
<i>azithromycin for susp 200 mg/5ml</i> ...	13	<i>bepotastine besilate ophth soln 1.5%</i> 95	
<i>azithromycin iv for soln 500 mg</i>	13	BESREMI SOL 500MCG	19
<i>azithromycin tab 250 mg</i>	13	<i>betaine powder for oral solution</i>	73
<i>azithromycin tab 500 mg</i>	13	<i>betamethasone dipropionate</i>	
<i>azithromycin tab 600 mg</i>	13	<i>augmented cream 0.05%</i>	102
<i>aztreonam for inj 1 gm</i>	4	<i>betamethasone dipropionate</i>	
B		<i>augmented gel 0.05%</i>	102
<i>baciim inj 50000unt</i>	4	<i>betamethasone dipropionate</i>	
<i>bacitracin ophth oint 500 unit/gm</i>	94	<i>augmented lotion 0.05%</i>	102
<i>bacitracin-polymyxin b ophth oint</i>	94	<i>betamethasone dipropionate</i>	
<i>bacitracin-polymyxin-neomycin-hc</i>		<i>augmented oint 0.05%</i>	103
<i>ophth oint 1%</i>	93	<i>betamethasone dipropionate cream</i>	
<i>baclofen tab 10 mg</i>	60	0.05%	103
<i>baclofen tab 20 mg</i>	61	<i>betamethasone dipropionate lotion</i>	
BAFIERTAM CAP 95MG	60	0.05%	103
BALCOLTRA TAB 0.1-20	67	<i>betamethasone dipropionate oint</i>	
<i>balsalazide disodium cap 750 mg</i>	81	0.05%	103
BALVERSA TAB 3MG	21	<i>betamethasone valerate cream 0.1%</i>	
BALVERSA TAB 4MG	21	<i>(base equivalent)</i>	103
BALVERSA TAB 5MG	21	<i>betamethasone valerate lotion 0.1%</i>	
<i>balziva tab</i>	67	<i>(base equivalent)</i>	103

<i>betamethasone valerate oint 0.1% (base equivalent)</i>	103	<i>briellyn tab</i>	67
BETASERON INJ 0.3MG	60	BRILINTA TAB 60MG	87
<i>betaxolol hcl ophth soln 0.5%</i>	95	BRILINTA TAB 90MG	87
<i>betaxolol hcl tab 10 mg</i>	34	<i>brimonidine tartrate ophth soln 0.15%</i>	95
<i>betaxolol hcl tab 20 mg</i>	34	<i>brimonidine tartrate ophth soln 0.2%</i> 95	
<i>bethanechol chloride tab 10 mg</i>	83	<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	95
<i>bethanechol chloride tab 25 mg</i>	83	<i>brinzolamide ophth susp 1%</i>	95
<i>bethanechol chloride tab 5 mg</i>	83	BRIVIACT INJ 50MG/5ML	41
<i>bethanechol chloride tab 50 mg</i>	83	BRIVIACT SOL 10MG/ML	41
BETOPTIC-S SUS 0.25% OP	95	BRIVIACT TAB 100MG	41
BEVESPI AER 9-4.8MCG	97	BRIVIACT TAB 10MG	41
<i>bexarotene cap 75 mg</i>	19	BRIVIACT TAB 25MG	41
<i>bexarotene gel 1%</i>	104	BRIVIACT TAB 50MG	41
BEXSERO INJ	91	BRIVIACT TAB 75MG	41
<i>bicalutamide tab 50 mg</i>	18	<i>bromfenac sodium ophth soln 0.09%</i> (base equiv) (once-daily)	94
BICILLIN C-R INJ 1200000	15	<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	50
BICILLIN C-R INJ 900/300	15	BRUKINSA CAP 80MG	21
BICILLIN L-A INJ 1200000	15	<i>budesonide delayed release particles cap 3 mg</i>	81
BICILLIN L-A INJ 2400000	15	<i>budesonide inhalation susp 0.25 mg/2ml</i>	100
BICILLIN L-A INJ 600000	15	<i>budesonide inhalation susp 0.5 mg/2ml</i>	100
BICNU INJ 100MG	16	<i>budesonide inhalation susp 1 mg/2ml</i>	100
BIJUVA CAP 1-100MG	71	<i>budesonide tab er 24hr 9 mg</i>	81
BIKTARVY TAB	9	<i>bumetanide tab 0.5 mg</i>	37
<i>bimatoprost ophth soln 0.03%</i>	95	<i>bumetanide tab 1 mg</i>	37
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	33	<i>bumetanide tab 2 mg</i>	37
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	33	<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	3
<i>bisoprolol & hydrochlorothiazide tab 5- 6.25 mg</i>	33	<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	61
<i>bisoprolol fumarate tab 10 mg</i>	34	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	61
<i>bisoprolol fumarate tab 5 mg</i>	34	<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	61
BIVIGAM INJ 10%	88	<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	61
<i>bleomycin sulfate for inj 15 unit</i>	17	<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	61
<i>bleomycin sulfate for inj 30 unit</i>	17	<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	61
BLEPHAMIDE OIN S.O.P.	94		
<i>blisovi 24 tab fe 1/20</i>	67		
<i>blisovi fe tab 1.5/30</i>	67		
BOOSTRIX INJ	91		
BOSULIF TAB 100MG	21		
BOSULIF TAB 400MG	21		
BOSULIF TAB 500MG	21		
BRAFTOVI CAP 75MG	21		
BREO ELLIPTA INH 100-25	100		
BREO ELLIPTA INH 200-25	100		
BREZTRI AERO AER SPHERE	98		

<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>2-0.5 mg (base equiv)</i>	61	BYETTA INJ 10MCG	63
<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>8-2 mg (base equiv)</i>	61	BYETTA INJ 5MCG	63
<i>buprenorphine td patch weekly 10</i> <i>mcg/hr</i>	2	C	
<i>buprenorphine td patch weekly 15</i> <i>mcg/hr</i>	2	<i>cabergoline tab 0.5 mg</i>	73
<i>buprenorphine td patch weekly 20</i> <i>mcg/hr</i>	2	CABLIVI KIT 11MG	86
<i>buprenorphine td patch weekly 5</i> <i>mcg/hr</i>	2	CABOMETYX TAB 20MG	21
<i>buprenorphine td patch weekly 7.5</i> <i>mcg/hr</i>	2	CABOMETYX TAB 40MG	21
<i>bupropion hcl (smoking deterrent) tab</i> <i>er 12hr 150 mg</i>	62	CABOMETYX TAB 60MG	21
<i>bupropion hcl tab 100 mg</i>	47	<i>calcipotriene cream 0.005%</i>	102
<i>bupropion hcl tab 75 mg</i>	47	<i>calcipotriene foam 0.005%</i>	103
<i>bupropion hcl tab er 12hr 100 mg</i>	47	<i>calcipotriene oint 0.005%</i>	102
<i>bupropion hcl tab er 12hr 150 mg</i>	47	<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	102
<i>bupropion hcl tab er 12hr 200 mg</i>	47	<i>calcipotriene-betamethasone</i> <i>dipropionate oint 0.005-0.064%</i> ..	103
<i>bupropion hcl tab er 24hr 150 mg</i>	47	<i>calcipotriene-betamethasone</i> <i>dipropionate susp 0.005-0.064%</i> ..	103
<i>bupropion hcl tab er 24hr 300 mg</i>	47	<i>calcitonin (salmon) nasal soln 200</i> <i>unit/act</i>	66
<i>bupirone hcl tab 10 mg</i>	40	<i>calcitriol cap 0.25 mcg</i>	79
<i>bupirone hcl tab 15 mg</i>	40	<i>calcitriol cap 0.5 mcg</i>	79
<i>bupirone hcl tab 30 mg</i>	40	<i>calcitriol inj 1 mcg/ml</i>	79
<i>bupirone hcl tab 5 mg</i>	40	<i>calcitriol oint 3 mcg/gm</i>	102
<i>bupirone hcl tab 7.5 mg</i>	40	<i>calcitriol oral soln 1 mcg/ml</i>	79
<i>busulfan inj 6 mg/ml</i>	16	<i>calcium acetate (phosphate binder) cap</i> <i>667 mg (169 mg ca)</i>	75
<i>butalbital-acetaminophen tab 50-325</i> <i>mg</i>	1	<i>calcium acetate (phosphate binder) tab</i> <i>667 mg</i>	75
<i>butalbital-acetaminophen-caff w/ cod</i> <i>cap 50-325-40-30 mg</i>	3	CALQUENCE CAP 100MG	21
<i>butalbital-acetaminophen-caffeine cap</i> <i>50-300-40 mg</i>	1	CALQUENCE TAB 100MG	21
<i>butalbital-acetaminophen-caffeine cap</i> <i>50-325-40 mg</i>	1	<i>camila tab 0.35mg</i>	68
<i>butalbital-acetaminophen-caffeine tab</i> <i>50-325-40 mg</i>	1	<i>camrese lo tab</i>	68
<i>butalbital-aspirin-caffeine cap 50-325-</i> <i>40 mg</i>	1	<i>candesartan cilexetil tab 16 mg</i>	30
<i>butorphanol tartrate inj 1 mg/ml</i>	3	<i>candesartan cilexetil tab 32 mg</i>	30
<i>butorphanol tartrate inj 2 mg/ml</i>	3	<i>candesartan cilexetil tab 4 mg</i>	30
<i>butorphanol tartrate nasal soln 10</i> <i>mg/ml</i>	3	<i>candesartan cilexetil tab 8 mg</i>	30
BYDUREON BC INJ 2/0.85ML	63	<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 16-12.5 mg</i>	29
BYDUREON INJ 2MG	63	<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-12.5 mg</i>	29
		<i>candesartan cilexetil-</i> <i>hydrochlorothiazide tab 32-25 mg</i> .	29
		CAPASTAT SUL INJ 1GM	10
		CAPLYTA CAP 10.5MG	52
		CAPLYTA CAP 21MG	52

CAPLYTA CAP 42MG.....	52	<i>carteolol hcl ophth soln 1%</i>	95
CAPRELSA TAB 100MG.....	21	<i>cartia xt cap 120/24hr</i>	35
CAPRELSA TAB 300MG.....	21	<i>cartia xt cap 180/24hr</i>	35
<i>captopril tab 100 mg</i>	27	<i>cartia xt cap 240/24hr</i>	35
<i>captopril tab 12.5 mg</i>	27	<i>cartia xt cap 300/24hr</i>	35
<i>captopril tab 25 mg</i>	27	<i>carvedilol phosphate cap er 24hr 10</i> <i>mg</i>	34
<i>captopril tab 50 mg</i>	27	<i>carvedilol phosphate cap er 24hr 20</i> <i>mg</i>	34
<i>carbamazepine cap er 12hr 100 mg</i> ..	41	<i>carvedilol phosphate cap er 24hr 40</i> <i>mg</i>	34
<i>carbamazepine cap er 12hr 200 mg</i> ..	41	<i>carvedilol phosphate cap er 24hr 80</i> <i>mg</i>	34
<i>carbamazepine cap er 12hr 300 mg</i> ..	41	<i>carvedilol tab 12.5 mg</i>	34
<i>carbamazepine chew tab 100 mg</i>	41	<i>carvedilol tab 25 mg</i>	34
<i>carbamazepine susp 100 mg/5ml</i>	41	<i>carvedilol tab 3.125 mg</i>	34
<i>carbamazepine tab 200 mg</i>	41	<i>carvedilol tab 6.25 mg</i>	34
<i>carbamazepine tab er 12hr 100 mg</i> ..	41	CAYSTON INH 75MG.....	4
<i>carbamazepine tab er 12hr 200 mg</i> ..	41	<i>cefaclor cap 250 mg</i>	12
<i>carbamazepine tab er 12hr 400 mg</i> ..	41	<i>cefaclor cap 500 mg</i>	12
<i>carbidopa & levodopa orally</i>		<i>cefadroxil cap 500 mg</i>	12
<i>disintegrating tab 10-100 mg</i>	50	<i>cefadroxil for susp 250 mg/5ml</i>	12
<i>carbidopa & levodopa orally</i>		<i>cefadroxil for susp 500 mg/5ml</i>	12
<i>disintegrating tab 25-100 mg</i>	50	<i>cefadroxil tab 1 gm</i>	12
<i>carbidopa & levodopa orally</i>		<i>cefazolin sodium for inj 1 gm</i>	12
<i>disintegrating tab 25-250 mg</i>	50	<i>cefazolin sodium for inj 10 gm</i>	12
<i>carbidopa & levodopa tab 10-100 mg</i>	50	<i>cefazolin sodium for inj 500 mg</i>	12
<i>carbidopa & levodopa tab 25-100 mg</i>	50	<i>cefdinir cap 300 mg</i>	12
<i>carbidopa & levodopa tab 25-250 mg</i>	50	<i>cefdinir for susp 125 mg/5ml</i>	12
<i>carbidopa & levodopa tab er 25-100</i> <i>mg</i>	51	<i>cefdinir for susp 250 mg/5ml</i>	12
<i>carbidopa & levodopa tab er 50-200</i> <i>mg</i>	51	<i>cefepime hcl for inj 1 gm</i>	12
<i>carbidopa tab 25 mg</i>	51	<i>cefepime hcl for inj 2 gm</i>	12
<i>carbidopa-levodopa-entacapone tabs</i> <i>12.5-50-200 mg</i>	51	<i>cefixime cap 400 mg</i>	12
<i>carbidopa-levodopa-entacapone tabs</i> <i>18.75-75-200 mg</i>	51	<i>cefixime for susp 100 mg/5ml</i>	12
<i>carbidopa-levodopa-entacapone tabs</i> <i>25-100-200 mg</i>	51	<i>cefixime for susp 200 mg/5ml</i>	12
<i>carbidopa-levodopa-entacapone tabs</i> <i>31.25-125-200 mg</i>	51	<i>cefotetan disodium for inj 1 gm</i>	12
<i>carbidopa-levodopa-entacapone tabs</i> <i>37.5-150-200 mg</i>	51	<i>cefotetan disodium for inj 2 gm</i>	12
<i>carbidopa-levodopa-entacapone tabs</i> <i>50-200-200 mg</i>	51	<i>cefoxitin sodium for iv soln 1 gm</i>	12
<i>carboplatin iv soln 150 mg/15ml</i>	16	<i>cefoxitin sodium for iv soln 10 gm</i>	12
<i>carboplatin iv soln 450 mg/45ml</i>	16	<i>cefoxitin sodium for iv soln 2 gm</i>	12
<i>carboplatin iv soln 50 mg/5ml</i>	16	<i>cefpodoxime proxetil for susp 100</i> <i>mg/5ml</i>	12
<i>carboplatin iv soln 600 mg/60ml</i>	16	<i>cefpodoxime proxetil for susp 50</i> <i>mg/5ml</i>	12
<i>carglumic acid soluble tab 200 mg</i>	73	<i>cefpodoxime proxetil tab 100 mg</i>	12
		<i>cefpodoxime proxetil tab 200 mg</i>	12
		<i>cefprozil for susp 125 mg/5ml</i>	12

<i>cefprozil for susp 250 mg/5ml</i>	12	<i>ciclopirox olamine cream 0.77% (base equiv)</i>	101
<i>cefprozil tab 250 mg</i>	12	<i>ciclopirox olamine susp 0.77% (base equiv)</i>	102
<i>cefprozil tab 500 mg</i>	12	<i>ciclopirox shampoo 1%</i>	102
<i>ceftazidime for inj 1 gm</i>	12	<i>ciclopirox solution 8%</i>	102
<i>ceftazidime for inj 6 gm</i>	12	<i>cidofovir iv inj 75 mg/ml</i>	11
<i>ceftriaxone sodium for inj 1 gm</i>	12	<i>cilostazol tab 100 mg</i>	86
<i>ceftriaxone sodium for inj 10 gm</i>	12	<i>cilostazol tab 50 mg</i>	86
<i>ceftriaxone sodium for inj 2 gm</i>	12	CILOXAN OIN 0.3% OP	94
<i>ceftriaxone sodium for inj 250 mg</i>	12	CIMDUO TAB 300-300	9
<i>ceftriaxone sodium for inj 500 mg</i>	12	<i>cinacalcet hcl tab 30 mg (base equiv)</i>	73
<i>cefuroxime axetil tab 250 mg</i>	12	<i>cinacalcet hcl tab 60 mg (base equiv)</i>	73
<i>cefuroxime axetil tab 500 mg</i>	12	<i>cinacalcet hcl tab 90 mg (base equiv)</i>	73
<i>cefuroxime sodium for inj 750 mg</i>	12	CINRYZE SOL 500 UNIT	86
<i>cefuroxime sodium for iv soln 1.5 gm</i>	12	CIPRO HC SUS OTIC.....	96
<i>celecoxib cap 100 mg</i>	1	<i>ciprofloxacin 200 mg/100ml in d5w</i> ..	13
<i>celecoxib cap 200 mg</i>	1	<i>ciprofloxacin 400 mg/200ml in d5w</i> ..	13
<i>celecoxib cap 400 mg</i>	1	<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	94
<i>celecoxib cap 50 mg</i>	1	<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	96
CELONTIN CAP 300MG	41	<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	13
<i>cephalexin cap 250 mg</i>	13	<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	14
<i>cephalexin cap 500 mg</i>	13	<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	14
<i>cephalexin for susp 125 mg/5ml</i>	13	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	14
<i>cephalexin for susp 250 mg/5ml</i>	13	<i>ciprofloxacin iv soln 200 mg/20ml (1%)</i>	14
<i>cephalexin tab 250 mg</i>	13	<i>ciprofloxacin iv soln 400 mg/40ml (1%)</i>	14
<i>cephalexin tab 500 mg</i>	13	<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	96
<i>cevimeline hcl cap 30 mg</i>	105	<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	16
CHEMET CAP 100MG.....	67	<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i> ..	16
<i>chlordiazepoxide hcl cap 10 mg</i>	40	<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	47
<i>chlordiazepoxide hcl cap 25 mg</i>	40	<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	47
<i>chlordiazepoxide hcl cap 5 mg</i>	40		
<i>chlorhexidine gluconate soln 0.12%</i> 105			
<i>chloroquine phosphate tab 250 mg</i>	7		
<i>chloroquine phosphate tab 500 mg</i>	7		
<i>chlorpromazine hcl inj 50 mg/2ml</i>	52		
<i>chlorpromazine hcl tab 10 mg</i>	52		
<i>chlorpromazine hcl tab 100 mg</i>	52		
<i>chlorpromazine hcl tab 200 mg</i>	53		
<i>chlorpromazine hcl tab 25 mg</i>	52		
<i>chlorpromazine hcl tab 50 mg</i>	52		
<i>chlorthalidone tab 25 mg</i>	37		
<i>chlorthalidone tab 50 mg</i>	37		
<i>cholestyramine light powder packets 4 gm</i>	33		
<i>cholestyramine powder packets 4 gm</i> 33			
<i>ciclopirox gel 0.77%</i>	101		

<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	47	<i>clobetasol propionate shampoo 0.05%</i>	103
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	47	<i>clobetasol propionate soln 0.05%...</i>	103
<i>clarithromycin for susp 125 mg/5ml</i> .	13	<i>clobetasol propionate spray 0.05%.</i>	103
<i>clarithromycin for susp 250 mg/5ml</i> .	13	<i>clocortolone pivalate cream 0.1%...</i>	103
<i>clarithromycin tab 250 mg</i>	13	<i>clofarabine iv soln 1 mg/ml</i>	17
<i>clarithromycin tab 500 mg</i>	13	<i>clomipramine hcl cap 25 mg</i>	47
<i>clarithromycin tab er 24hr 500 mg</i> ...	13	<i>clomipramine hcl cap 50 mg</i>	47
<i>CLEOCIN SUP 100MG</i>	84	<i>clonazepam orally disintegrating tab 0.125 mg</i>	41
<i>clindamycin hcl cap 150 mg</i>	4	<i>clonazepam orally disintegrating tab 0.25 mg</i>	41
<i>clindamycin hcl cap 300 mg</i>	4	<i>clonazepam orally disintegrating tab 0.5 mg</i>	41
<i>clindamycin hcl cap 75 mg</i>	4	<i>clonazepam orally disintegrating tab 1 mg</i>	41
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	4	<i>clonazepam orally disintegrating tab 2 mg</i>	41
<i>clindamycin phosphate gel 1%</i>	101	<i>clonazepam tab 0.5 mg</i>	41
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	5	<i>clonazepam tab 1 mg</i>	41
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	5	<i>clonazepam tab 2 mg</i>	41
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	5	<i>clonidine hcl tab 0.1 mg</i>	38
<i>clindamycin phosphate inj 300 mg/2ml</i>	5	<i>clonidine hcl tab 0.2 mg</i>	38
<i>clindamycin phosphate inj 600 mg/4ml</i>	5	<i>clonidine hcl tab 0.3 mg</i>	38
<i>clindamycin phosphate inj 900 mg/6ml</i>	5	<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	87
<i>clindamycin phosphate lotion 1%</i> ...	101	<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	87
<i>clindamycin phosphate soln 1%</i>	101	<i>clorazepate dipotassium tab 15 mg</i> ..	42
<i>clindamycin phosphate swab 1%</i>	101	<i>clorazepate dipotassium tab 3.75 mg</i>	42
<i>clindamycin phosphate vaginal cream 2%</i>	84	<i>clorazepate dipotassium tab 7.5 mg</i> .	42
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	101	<i>clotrimazole cream 1%</i>	102
<i>clobazam suspension 2.5 mg/ml</i>	41	<i>clotrimazole soln 1%</i>	102
<i>clobazam tab 10 mg</i>	41	<i>clotrimazole troche 10 mg</i>	105
<i>clobazam tab 20 mg</i>	41	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	102
<i>clobetasol e cre 0.05%</i>	103	<i>clozapine orally disintegrating tab 100 mg</i>	53
<i>clobetasol propionate cream 0.05%</i>	103	<i>clozapine orally disintegrating tab 12.5 mg</i>	53
<i>clobetasol propionate emulsion foam 0.05%</i>	103	<i>clozapine orally disintegrating tab 150 mg</i>	53
<i>clobetasol propionate foam 0.05%</i> .	103	<i>clozapine orally disintegrating tab 200 mg</i>	53
<i>clobetasol propionate gel 0.05%</i>	103	<i>clozapine orally disintegrating tab 25 mg</i>	53
<i>clobetasol propionate lotion 0.05%</i> .	103	<i>clozapine tab 100 mg</i>	53
<i>clobetasol propionate oint 0.05%</i> ...	103		

<i>clozapine tab 200 mg</i>	53	<i>cyclosporine modified cap 100 mg</i>	90
<i>clozapine tab 25 mg</i>	53	<i>cyclosporine modified cap 25 mg</i>	90
<i>clozapine tab 50 mg</i>	53	<i>cyclosporine modified cap 50 mg</i>	90
COARTEM TAB 20-120MG.....	7	<i>cyclosporine modified oral soln 100</i>	
<i>colchicine tab 0.6 mg</i>	1	<i>mg/ml</i>	90
<i>colchicine w/ probenecid tab 0.5-500</i>		<i>cyproheptadine hcl tab 4 mg</i>	97
<i>mg</i>	1	CYRAMZA INJ 100/10ML	21
<i>colesevelam hcl tab 625 mg</i>	33	CYRAMZA INJ 500/50ML	21
<i>colestipol hcl granule packets 5 gm</i> ..	33	CYSTADROPS SOL 0.37%.....	96
<i>colestipol hcl tab 1 gm</i>	33	CYSTAGON CAP 150MG.....	74
<i>colistimethate sod for inj 150 mg</i>		CYSTAGON CAP 50MG	74
<i>(colistin base activity)</i>	5	CYSTARAN SOL 0.44%.....	96
COMBIVENT AER 20-100	97	<i>cytarabine inj 20 mg/ml</i>	17
COMETRIQ KIT 100MG.....	21	<i>cytarabine inj pf 100 mg/ml</i>	17
COMETRIQ KIT 140MG.....	21	<i>cytarabine inj pf 20 mg/ml</i>	17
COMETRIQ KIT 60MG.....	21	D	
COMPLERA TAB	9	D10W/NAACL INJ 0.2%	92
<i>compro sup 25mg</i>	79	D2.5W/NAACL INJ 0.45%.....	92
<i>constulose sol 10gm/15</i>	81	<i>dacarbazine for inj 100 mg</i>	19
COPIKTRA CAP 15MG.....	21	<i>dacarbazine for inj 200 mg</i>	19
COPIKTRA CAP 25MG.....	21	<i>dalfampridine tab er 12hr 10 mg</i>	60
CORLANOR TAB 5MG	38	DALIRESP TAB 250MCG	99
CORLANOR TAB 7.5MG	38	DALIRESP TAB 500MCG	99
CORTROPHIN GEL 80UNIT.....	74	<i>danazol cap 100 mg</i>	70
COTELLIC TAB 20MG	21	<i>danazol cap 200 mg</i>	71
CREON CAP 12000UNT.....	82	<i>danazol cap 50 mg</i>	70
CREON CAP 24000UNT.....	82	<i>dapsone tab 100 mg</i>	5
CREON CAP 3000UNIT	82	<i>dapsone tab 25 mg</i>	5
CREON CAP 36000UNT.....	82	DAPTACEL INJ	91
CREON CAP 6000UNIT	82	<i>daptomycin for iv soln 500 mg</i>	5
<i>cromolyn sodium ophth soln 4%</i>	95	<i>darifenacin hydrobromide tab er 24hr</i>	
<i>cromolyn sodium oral conc 100 mg/5ml</i>		<i>15 mg (base equiv)</i>	84
.....	82	<i>darifenacin hydrobromide tab er 24hr</i>	
<i>cromolyn sodium soln nebu 20 mg/2ml</i>		<i>7.5 mg (base equiv)</i>	84
.....	99	DARZALEX SOL 100MG/5M.....	21
<i>cryselle-28 tab 28 tabs</i>	68	DARZALEX SOL 400MG/20	21
<i>cyclobenzaprine hcl tab 10 mg</i>	61	<i>daunorubicin hcl iv soln 20 mg/4ml</i>	
<i>cyclobenzaprine hcl tab 5 mg</i>	61	<i>(base equiv)</i>	17
CYCLOPHOSPH TAB 25MG	16	DAURISMO TAB 100MG.....	21
CYCLOPHOSPH TAB 50MG	16	DAURISMO TAB 25MG	21
<i>cyclophosphamide cap 25 mg</i>	16	<i>deblitane tab 0.35mg</i>	68
<i>cyclophosphamide cap 50 mg</i>	16	<i>decitabine for inj 50 mg</i>	17
<i>cyclosporine (ophth) emulsion 0.05%</i>		<i>deferasirox granules packet 180 mg</i> .	67
.....	96	<i>deferasirox granules packet 360 mg</i> .	67
<i>cyclosporine cap 100 mg</i>	90	<i>deferasirox granules packet 90 mg</i> ...	67
<i>cyclosporine cap 25 mg</i>	90	<i>deferasirox tab 180 mg</i>	67
<i>cyclosporine iv soln 50 mg/ml</i>	90	<i>deferasirox tab 360 mg</i>	67

<i>deferasirox tab 90 mg</i>	67	<i>dexamethasone tab 0.75 mg</i>	72
<i>deferasirox tab for oral susp 125 mg</i>	67	<i>dexamethasone tab 1 mg</i>	72
<i>deferasirox tab for oral susp 250 mg</i>	67	<i>dexamethasone tab 1.5 mg</i>	72
<i>deferasirox tab for oral susp 500 mg</i>	67	<i>dexamethasone tab 2 mg</i>	72
<i>deferiprone tab 1000 mg</i>	67	<i>dexamethasone tab 4 mg</i>	72
<i>deferiprone tab 500 mg</i>	67	<i>dexamethasone tab 6 mg</i>	72
DELSTRIGO TAB.....	9	<i>dexlansoprazole cap delayed release</i>	30
<i>delyla tab 0.1-0.02</i>	68	<i>mg</i>	83
DEPEN TITRA TAB 250MG.....	67	<i>dexlansoprazole cap delayed release</i>	60
DEPO-MEDROL INJ 20MG/ML	72	<i>mg</i>	83
DEPO-MEDROL INJ 40MG/ML	72	<i>dexmethylphenidate hcl tab 10 mg</i> ...	57
DEPO-MEDROL INJ 80MG/ML	72	<i>dexmethylphenidate hcl tab 2.5 mg</i> ..	57
DEPO-SQ PROV INJ 104	68	<i>dexmethylphenidate hcl tab 5 mg</i>	57
DESCOVY TAB 120-15MG	9	<i>dextrazoxane hcl for inj 250 mg (base</i>	
DESCOVY TAB 200/25MG	9	<i>equivalent)</i>	26
<i>desipramine hcl tab 10 mg</i>	47	<i>dextroamphetamine sulfate oral</i>	
<i>desipramine hcl tab 100 mg</i>	47	<i>solution 5 mg/5ml</i>	57
<i>desipramine hcl tab 150 mg</i>	47	<i>dextroamphetamine sulfate tab 10 mg</i>	
<i>desipramine hcl tab 25 mg</i>	47	.....	57
<i>desipramine hcl tab 50 mg</i>	47	<i>dextroamphetamine sulfate tab 5 mg</i>	57
<i>desipramine hcl tab 75 mg</i>	47	<i>dextrose 10% w/ sodium chloride</i>	
<i>desloratadine tab 5 mg</i>	97	<i>0.45%</i>	92
<i>desmopressin acetate nasal spray soln</i>		<i>dextrose 5% in lactated ringers</i>	92
<i>0.01%</i>	74	<i>dextrose 5% w/ sodium chloride 0.2%</i>	
<i>desmopressin acetate tab 0.1 mg</i>	74	.....	92
<i>desmopressin acetate tab 0.2 mg</i>	74	<i>dextrose 5% w/ sodium chloride 0.45%</i>	
<i>desogest-eth estrad & eth estrad tab</i>		.....	92
<i>0.15-0.02/0.01 mg(21/5)</i>	68	<i>dextrose 5% w/ sodium chloride 0.9%</i>	
<i>desogestrel & ethinyl estradiol tab 0.15</i>		.....	92
<i>mg-30 mcg</i>	68	<i>dextrose inj 10%</i>	93
<i>desonide cream 0.05%</i>	103	<i>dextrose inj 5%</i>	93
<i>desonide lotion 0.05%</i>	103	DIACOMIT CAP 250MG.....	42
<i>desonide oint 0.05%</i>	103	DIACOMIT CAP 500MG.....	42
<i>desvenlafaxine succinate tab er 24hr</i>		DIACOMIT PAK 250MG.....	42
<i>100 mg (base equiv)</i>	47	DIACOMIT PAK 500MG.....	42
<i>desvenlafaxine succinate tab er 24hr</i>		DIASTAT ACDL GEL 12.5-20	42
<i>25 mg (base equiv)</i>	47	DIASTAT ACDL GEL 5-10MG	42
<i>desvenlafaxine succinate tab er 24hr</i>		DIASTAT PED GEL 2.5M GEL.....	42
<i>50 mg (base equiv)</i>	47	<i>diazepam conc 5 mg/ml</i>	42
<i>dexamethasone sodium phosphate inj</i>		<i>diazepam oral soln 1 mg/ml</i>	42
<i>10 mg/ml</i>	72	<i>diazepam rectal gel delivery system 10</i>	
<i>dexamethasone sodium phosphate inj</i>		<i>mg</i>	42
<i>120 mg/30ml</i>	72	<i>diazepam rectal gel delivery system 2.5</i>	
<i>dexamethasone sodium phosphate</i>		<i>mg</i>	42
<i>ophth soln 0.1%</i>	95	<i>diazepam rectal gel delivery system 20</i>	
<i>dexamethasone soln 0.5 mg/5ml</i>	72	<i>mg</i>	42
<i>dexamethasone tab 0.5 mg</i>	72	<i>diazepam tab 10 mg</i>	42

<i>diazepam tab 2 mg</i>	42	<i>diltiazem hcl coated beads tab er 24hr</i>	
<i>diazepam tab 5 mg</i>	42	180 mg	35
<i>diazoxide susp 50 mg/ml</i>	73	<i>diltiazem hcl coated beads tab er 24hr</i>	
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	104	240 mg	36
<i>diclofenac sodium ophth soln 0.1%</i> ...95		<i>diltiazem hcl coated beads tab er 24hr</i>	
<i>diclofenac sodium soln 1.5%</i>	104	300 mg	36
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl coated beads tab er 24hr</i>	
50 mg	1	360 mg	36
<i>diclofenac sodium tab delayed release</i>		<i>diltiazem hcl coated beads tab er 24hr</i>	
75 mg	1	420 mg	36
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	<i>diltiazem hcl extended release beads</i>	
<i>dicloxacillin sodium cap 250 mg</i>	15	cap er 24hr 360 mg	36
<i>dicloxacillin sodium cap 500 mg</i>	15	<i>diltiazem hcl extended release beads</i>	
<i>dicyclomine hcl cap 10 mg</i>	80	cap er 24hr 420 mg	36
<i>dicyclomine hcl oral soln 10 mg/5ml</i> .81		<i>diltiazem hcl iv soln 50 mg/10ml (5</i>	
<i>dicyclomine hcl tab 20 mg</i>	81	mg/ml)	36
DIFICID SUS	13	<i>diltiazem hcl tab 120 mg</i>	36
DIFICID TAB 200MG	13	<i>diltiazem hcl tab 30 mg</i>	36
<i>difluprednate ophth emulsion 0.05%</i>	95	<i>diltiazem hcl tab 60 mg</i>	36
<i>digitek tab 0.125mg</i>	38	<i>diltiazem hcl tab 90 mg</i>	36
<i>digitek tab 0.25mg</i>	38	<i>dilt-xr cap 120mg</i>	35
<i>digoxin inj 0.25 mg/ml</i>	38	<i>dilt-xr cap 180mg</i>	35
<i>digoxin oral soln 0.05 mg/ml</i>	38	<i>dilt-xr cap 240mg</i>	35
<i>digoxin tab 125 mcg (0.125 mg)</i>	38	<i>dimethyl fumarate capsule delayed</i>	
<i>digoxin tab 250 mcg (0.25 mg)</i>	38	release 120 mg	60
<i>dihydroergotamine mesylate inj 1</i>		<i>dimethyl fumarate capsule delayed</i>	
mg/ml.....	58	release 240 mg	60
<i>dihydroergotamine mesylate nasal</i>		<i>dimethyl fumarate capsule dr starter</i>	
spray 4 mg/ml	58	pack 120 mg & 240 mg	60
DILANTIN CAP 100MG.....	42	DIP/TET PED INJ 25-5LFU	91
DILANTIN CAP 30MG	42	<i>diphenhydramine hcl inj 50 mg/ml</i> ...97	
DILANTIN CHW 50MG	42	<i>diphenoxylate w/ atropine liq 2.5-0.025</i>	
DILANTIN-125 SUS 125/5ML	42	mg/5ml.....	82
<i>diltiazem hcl cap er 12hr 120 mg</i>	35	<i>diphenoxylate w/ atropine tab 2.5-</i>	
<i>diltiazem hcl cap er 12hr 60 mg</i>	35	0.025 mg	82
<i>diltiazem hcl cap er 12hr 90 mg</i>	35	<i>disopyramide phosphate cap 100 mg</i>	31
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>disopyramide phosphate cap 150 mg</i>	31
120 mg	35	<i>disulfiram tab 250 mg</i>	62
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>disulfiram tab 500 mg</i>	62
180 mg	35	<i>divalproex sodium cap delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		sprinkle 125 mg	42
240 mg	35	<i>divalproex sodium tab delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		125 mg	42
300 mg	35	<i>divalproex sodium tab delayed release</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		250 mg	42
360 mg	35	<i>divalproex sodium tab delayed release</i>	
		500 mg	42

<i>divalproex sodium tab er 24 hr 250 mg</i>	<i>doxorubicin hcl liposomal inj (for iv</i>
.....42	<i>infusion) 2 mg/ml.....17</i>
<i>divalproex sodium tab er 24 hr 500 mg</i>	<i>doxy 100 inj 100mg .....16</i>
.....42	<i>doxycycline hyclate cap 100 mg .....16</i>
DOCETAXEL INJ 160/16ML .....20	<i>doxycycline hyclate cap 50 mg.....16</i>
DOCETAXEL INJ 80MG/4ML .....20	<i>doxycycline hyclate tab 100 mg .....16</i>
<i>dofetilide cap 125 mcg (0.125 mg) ...31</i>	<i>doxycycline hyclate tab 20 mg .....16</i>
<i>dofetilide cap 250 mcg (0.25 mg) .....31</i>	<i>doxycycline monohydrate cap 100 mg</i>
<i>dofetilide cap 500 mcg (0.5 mg) .....31</i>	.....16
DOJOLVI LIQ 100% .....74	<i>doxycycline monohydrate cap 50 mg 16</i>
<i>dolishale tab 90-20mcg.....68</i>	<i>doxycycline monohydrate cap 75 mg 16</i>
<i>donepezil hydrochloride orally</i>	<i>doxycycline monohydrate for susp 25</i>
<i>disintegrating tab 10 mg .....46</i>	<i>mg/5ml.....16</i>
<i>donepezil hydrochloride orally</i>	<i>doxycycline monohydrate tab 100 mg</i>
<i>disintegrating tab 5 mg .....46</i>	.....16
<i>donepezil hydrochloride tab 10 mg ...46</i>	<i>doxycycline monohydrate tab 150 mg</i>
<i>donepezil hydrochloride tab 23 mg ...46</i>	.....16
<i>donepezil hydrochloride tab 5 mg ....46</i>	<i>doxycycline monohydrate tab 50 mg 16</i>
DORIBAX INJ 250MG 5	<i>doxycycline monohydrate tab 75 mg 16</i>
<i>dorzolamide hcl ophth soln 2% .....95</i>	DRIZALMA CAP 20MG DR .....48
<i>dorzolamide hcl-timolol maleate ophth</i>	DRIZALMA CAP 30MG DR .....48
<i>soln 22.3-6.8 mg/ml .....96</i>	DRIZALMA CAP 40MG DR .....48
<i>dotti dis 0.025mg .....71</i>	DRIZALMA CAP 60MG DR .....48
<i>dotti dis 0.0375mg .....71</i>	<i>dronabinol cap 10 mg .....80</i>
<i>dotti dis 0.05mg.....71</i>	<i>dronabinol cap 2.5 mg .....79</i>
<i>dotti dis 0.075mg .....71</i>	<i>dronabinol cap 5 mg .....80</i>
<i>dotti dis 0.1mg .....71</i>	<i>drosiprenone-ethinyl estradiol tab 3-</i>
DOVATO TAB 50-300MG..... 9	<i>0.02 mg .....68</i>
<i>doxazosin mesylate tab 1 mg.....28</i>	<i>drosiprenone-ethinyl estradiol tab 3-</i>
<i>doxazosin mesylate tab 2 mg.....28</i>	<i>0.03 mg .....68</i>
<i>doxazosin mesylate tab 4 mg.....28</i>	DROXIA CAP 200MG .....86
<i>doxazosin mesylate tab 8 mg.....28</i>	DROXIA CAP 300MG .....87
<i>doxepin hcl (sleep) tab 3 mg (base</i>	DROXIA CAP 400MG .....87
<i>equiv) .....57</i>	<i>droxidopa cap 100 mg .....38</i>
<i>doxepin hcl (sleep) tab 6 mg (base</i>	<i>droxidopa cap 200 mg .....38</i>
<i>equiv) .....57</i>	<i>droxidopa cap 300 mg .....38</i>
<i>doxepin hcl cap 10 mg .....47</i>	<i>duloxetine hcl enteric coated pellets</i>
<i>doxepin hcl cap 100 mg .....47</i>	<i>cap 20 mg (base eq).....48</i>
<i>doxepin hcl cap 150 mg .....48</i>	<i>duloxetine hcl enteric coated pellets</i>
<i>doxepin hcl cap 25 mg .....47</i>	<i>cap 30 mg (base eq).....48</i>
<i>doxepin hcl cap 50 mg .....47</i>	<i>duloxetine hcl enteric coated pellets</i>
<i>doxepin hcl cap 75 mg .....47</i>	<i>cap 40 mg (base eq).....48</i>
<i>doxepin hcl conc 10 mg/ml.....48</i>	<i>duloxetine hcl enteric coated pellets</i>
<i>doxercalciferol cap 0.5 mcg .....79</i>	<i>cap 60 mg (base eq).....48</i>
<i>doxercalciferol cap 1 mcg .....79</i>	DUPIXENT INJ 100/0.67 .....87
<i>doxercalciferol cap 2.5 mcg .....79</i>	DUPIXENT INJ 200/1.14.....87
<i>doxorubicin hcl inj 2 mg/ml .....17</i>	DUPIXENT INJ 200MG .....87

DUPIXENT INJ 300/2ML87
 dutasteride cap 0.5 mg83
 dutasteride-tamsulosin hcl cap 0.5-0.4
 mg83

E

e.e.s. 400 tab 400mg13
 EDURANT TAB 25MG..... 8
 efavirenz cap 200 mg 8
 efavirenz cap 50 mg 8
 efavirenz tab 600 mg..... 8
 efavirenz-emtricitabine-tenofovir df tab
 600-200-300 mg 9
 efavirenz-lamivudine-tenofovir df tab
 400-300-300 mg 9
 efavirenz-lamivudine-tenofovir df tab
 600-300-300 mg 9
 EGRIFTA SV INJ 2MG.....74
 eletriptan hydrobromide tab 20 mg
 (base equivalent)58
 eletriptan hydrobromide tab 40 mg
 (base equivalent)58
 ELIGARD INJ 22.5MG.....18
 ELIGARD INJ 30MG.....18
 ELIGARD INJ 45MG.....18
 ELIGARD INJ 7.5MG.....18
 ELIQUIS ST P TAB 5MG84
 ELIQUIS TAB 2.5MG84
 ELIQUIS TAB 5MG84
 ELITEK INJ 1.5MG26
 ELITEK INJ 7.5MG26
 EMCYT CAP 140MG.....18
 EMGALITY INJ 100MG/ML.....58
 EMGALITY INJ 120MG/ML.....58
 emoquette tab68
 EMLICITI INJ 300MG21
 EMLICITI INJ 400MG21
 EMSAM DIS 12MG/24H48
 EMSAM DIS 6MG/24HR48
 EMSAM DIS 9MG/24HR48
 emtricitabine caps 200 mg 8
 emtricitabine-tenofovir disoproxil
 fumarate tab 100-150 mg 9
 emtricitabine-tenofovir disoproxil
 fumarate tab 133-200 mg 9
 emtricitabine-tenofovir disoproxil
 fumarate tab 167-250 mg10

emtricitabine-tenofovir disoproxil
 fumarate tab 200-300 mg10
 EMTRIVA SOL 10MG/ML 8
 EMVERM CHW 100MG 5
 enalapril maleate & hydrochlorothiazide
 tab 10-25 mg.....27
 enalapril maleate & hydrochlorothiazide
 tab 5-12.5 mg.....27
 enalapril maleate tab 10 mg28
 enalapril maleate tab 2.5 mg28
 enalapril maleate tab 20 mg28
 enalapril maleate tab 5 mg28
 ENBREL INJ 25/0.5ML.....87
 ENBREL INJ 25MG87
 ENBREL INJ 50MG/ML.....87
 ENBREL MINI INJ 50MG/ML87
 ENBREL SRCLK INJ 50MG/ML.....87
 ENGERIX-B INJ 10/0.5ML.....91
 ENGERIX-B INJ 20MCG/ML91
 enoxaparin sodium inj 300 mg/3ml ..84
 enoxaparin sodium inj soln pref syr 100
 mg/ml.....85
 enoxaparin sodium inj soln pref syr 120
 mg/0.8ml85
 enoxaparin sodium inj soln pref syr 150
 mg/ml.....85
 enoxaparin sodium inj soln pref syr 30
 mg/0.3ml84
 enoxaparin sodium inj soln pref syr 40
 mg/0.4ml85
 enoxaparin sodium inj soln pref syr 60
 mg/0.6ml85
 enoxaparin sodium inj soln pref syr 80
 mg/0.8ml85
 enpresse-28 tab.....68
 enskyce tab.....68
 ENSPRYNG INJ.....59
 entacapone tab 200 mg51
 entecavir tab 0.5 mg11
 entecavir tab 1 mg11
 ENTRESTO TAB 24-26MG29
 ENTRESTO TAB 49-51MG29
 ENTRESTO TAB 97-103MG29
 enulose sol 10gm/1581
 EPCLUSA PAK 150-37.511
 EPCLUSA PAK 200-50MG.....11
 EPCLUSA TAB 200-50MG.....11

EPCLUSA TAB 400-100.....	11	<i>erythromycin tab delayed release 333</i>	333
EPIDIOLEX SOL 100MG/ML.....	42	<i>mg</i>	13
<i>epinastine hcl ophth soln 0.05%</i>	95	<i>erythromycin tab delayed release 500</i>	500
<i>epinephrine solution auto-injector 0.15</i>		<i>mg</i>	13
<i>mg/0.15ml (1:1000)</i>	99	<i>erythromycin w/ delayed release</i>	
<i>epinephrine solution auto-injector 0.15</i>		<i>particles cap 250 mg</i>	13
<i>mg/0.3ml (1:2000)</i>	99	ESBRIET CAP 267MG	99
<i>epinephrine solution auto-injector 0.3</i>		ESBRIET TAB 267MG	99
<i>mg/0.3ml (1:1000)</i>	99	ESBRIET TAB 801MG	99
<i>epirubicin hcl iv soln 200 mg/100ml (2</i>		<i>escitalopram oxalate soln 5 mg/5ml</i>	
<i>mg/ml)</i>	17	<i>(base equiv)</i>	48
<i>epitol tab 200mg</i>	42	<i>escitalopram oxalate tab 10 mg (base</i>	
<i>eplerenone tab 25 mg</i>	28	<i>equiv)</i>	48
<i>eplerenone tab 50 mg</i>	28	<i>escitalopram oxalate tab 20 mg (base</i>	
EPRONTIA SOL 25MG/ML	42	<i>equiv)</i>	48
ERBITUX INJ 100MG	21	<i>escitalopram oxalate tab 5 mg (base</i>	
ERBITUX INJ 200MG	21	<i>equiv)</i>	48
<i>ergoloid mesylates tab 1 mg</i>	46	<i>estradiol & norethindrone acetate tab</i>	
<i>ergotamine w/ caffeine tab 1-100 mg</i>		<i>0.5-0.1 mg</i>	71
	58	<i>estradiol & norethindrone acetate tab</i>	
ERIVEDGE CAP 150MG	22	<i>1-0.5 mg</i>	71
ERLEADA TAB 60MG	18	<i>estradiol tab 0.5 mg</i>	71
<i>erlotinib hcl tab 100 mg (base</i>		<i>estradiol tab 1 mg</i>	71
<i>equivalent)</i>	22	<i>estradiol tab 2 mg</i>	71
<i>erlotinib hcl tab 150 mg (base</i>		<i>estradiol td patch twice weekly 0.025</i>	
<i>equivalent)</i>	22	<i>mg/24hr</i>	71
<i>erlotinib hcl tab 25 mg (base</i>		<i>estradiol td patch twice weekly 0.0375</i>	
<i>equivalent)</i>	22	<i>mg/24hr</i>	71
<i>errin tab 0.35mg</i>	68	<i>estradiol td patch twice weekly 0.05</i>	
<i>ertapenem sodium for inj 1 gm (base</i>		<i>mg/24hr</i>	71
<i>equivalent)</i>	5	<i>estradiol td patch twice weekly 0.075</i>	
ERWINAZE INJ 10000UNT	19	<i>mg/24hr</i>	71
<i>ery pad 2%</i>	101	<i>estradiol td patch twice weekly 0.1</i>	
<i>ery-tab tab 250mg ec</i>	13	<i>mg/24hr</i>	71
<i>ery-tab tab 333mg ec</i>	13	<i>estradiol td patch weekly 0.025</i>	
<i>ery-tab tab 500mg ec</i>	13	<i>mg/24hr</i>	71
ERYTHROCIN INJ 500MG	13	<i>estradiol td patch weekly 0.0375</i>	
<i>erythrocin tab 250mg</i>	13	<i>mg/24hr (37.5 mcg/24hr)</i>	71
<i>erythromycin ethylsuccinate tab 400</i>		<i>estradiol td patch weekly 0.05 mg/24hr</i>	
<i>mg</i>	13		71
<i>erythromycin gel 2%</i>	101	<i>estradiol td patch weekly 0.06 mg/24hr</i>	
<i>erythromycin ophth oint 5 mg/gm</i>	94		71
<i>erythromycin soln 2%</i>	101	<i>estradiol td patch weekly 0.075</i>	
<i>erythromycin tab 250 mg</i>	13	<i>mg/24hr</i>	71
<i>erythromycin tab 500 mg</i>	13	<i>estradiol td patch weekly 0.1 mg/24hr</i>	
<i>erythromycin tab delayed release 250</i>			71
<i>mg</i>	13	<i>estradiol vaginal cream 0.1 mg/gm</i>	71

<i>estradiol vaginal tab 10 mcg</i>	71
<i>estradiol valerate im in oil 20 mg/ml</i>	71
<i>estropipate tab 1.5 mg</i>	71
<i>estropipate tab 3 mg</i>	71
<i>ethambutol hcl tab 100 mg</i>	10
<i>ethambutol hcl tab 400 mg</i>	10
<i>ethosuximide cap 250 mg</i>	42
<i>ethosuximide soln 250 mg/5ml</i>	42
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	68
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	68
<i>ETOPOPHOS INJ 100MG</i>	20
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	20
<i>etravirine tab 100 mg</i>	8
<i>etravirine tab 200 mg</i>	8
<i>EUCRISA OIN 2%</i>	104
<i>EULEXIN CAP 125MG</i>	18
<i>euthyrox tab 100mcg</i>	76
<i>euthyrox tab 112mcg</i>	76
<i>euthyrox tab 125mcg</i>	76
<i>euthyrox tab 137mcg</i>	76
<i>euthyrox tab 150mcg</i>	76
<i>euthyrox tab 175mcg</i>	76
<i>euthyrox tab 200mcg</i>	76
<i>euthyrox tab 25mcg</i>	76
<i>euthyrox tab 50mcg</i>	76
<i>euthyrox tab 75mcg</i>	76
<i>euthyrox tab 88mcg</i>	76
<i>everolimus tab 0.25 mg</i>	90
<i>everolimus tab 0.5 mg</i>	90
<i>everolimus tab 0.75 mg</i>	90
<i>everolimus tab 1 mg</i>	90
<i>everolimus tab 10 mg</i>	22
<i>everolimus tab 2.5 mg</i>	22
<i>everolimus tab 5 mg</i>	22
<i>everolimus tab 7.5 mg</i>	22
<i>everolimus tab for oral susp 2 mg</i>	22
<i>everolimus tab for oral susp 3 mg</i>	22
<i>everolimus tab for oral susp 5 mg</i>	22
<i>EVOTAZ TAB 300-150</i>	10
<i>EVRYSDI SOL</i>	59
<i>exemestane tab 25 mg</i>	18
<i>EXKIVITY CAP 40MG</i>	22
<i>EXSERVAN MIS 50MG</i>	59
<i>EYLEA INJ 2/0.05ML</i>	96
<i>ezetimibe tab 10 mg</i>	33
<i>ezetimibe-simvastatin tab 10-10 mg</i>	33
<i>ezetimibe-simvastatin tab 10-20 mg</i>	33
<i>ezetimibe-simvastatin tab 10-40 mg</i>	33
<i>ezetimibe-simvastatin tab 10-80 mg</i>	33
F	
<i>falmina tab</i>	68
<i>famciclovir tab 125 mg</i>	11
<i>famciclovir tab 250 mg</i>	11
<i>famciclovir tab 500 mg</i>	11
<i>famotidine for susp 40 mg/5ml</i>	81
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	81
<i>famotidine preservative free inj 20 mg/2ml</i>	81
<i>famotidine tab 20 mg</i>	81
<i>famotidine tab 40 mg</i>	81
<i>FANAPT TAB 10MG</i>	53
<i>FANAPT TAB 12MG</i>	53
<i>FANAPT TAB 1MG</i>	53
<i>FANAPT TAB 2MG</i>	53
<i>FANAPT TAB 4MG</i>	53
<i>FANAPT TAB 6MG</i>	53
<i>FANAPT TAB 8MG</i>	53
<i>FARXIGA TAB 10MG</i>	63
<i>FARXIGA TAB 5MG</i>	63
<i>FARYDAK CAP 10MG</i>	22
<i>FARYDAK CAP 15MG</i>	22
<i>FARYDAK CAP 20MG</i>	22
<i>FASENRA INJ 30MG/ML</i>	99
<i>FASENRA PEN INJ 30MG/ML</i>	99
<i>FASLODEX INJ 250/5ML</i>	18
<i>febuxostat tab 40 mg</i>	1
<i>febuxostat tab 80 mg</i>	1
<i>felbamate susp 600 mg/5ml</i>	42
<i>felbamate tab 400 mg</i>	42
<i>felbamate tab 600 mg</i>	42
<i>felodipine tab er 24hr 10 mg</i>	36
<i>felodipine tab er 24hr 2.5 mg</i>	36
<i>felodipine tab er 24hr 5 mg</i>	36
<i>femynor tab 0.25-35</i>	68
<i>fenofibrate micronized cap 134 mg</i> ...	32
<i>fenofibrate micronized cap 200 mg</i> ...	32
<i>fenofibrate micronized cap 43 mg</i>	32
<i>fenofibrate micronized cap 67 mg</i>	32
<i>fenofibrate tab 145 mg</i>	32
<i>fenofibrate tab 160 mg</i>	32

<i>fenofibrate tab 48 mg</i>	32	<i>flecainide acetate tab 100 mg</i>	31
<i>fenofibrate tab 54 mg</i>	32	<i>flecainide acetate tab 150 mg</i>	31
<i>fentanyl citrate buccal tab 100 mcg</i> <i>(base equiv)</i>	3	<i>flecainide acetate tab 50 mg</i>	31
<i>fentanyl citrate buccal tab 200 mcg</i> <i>(base equiv)</i>	3	FLOVENT DISK AER 100MCG	100
<i>fentanyl citrate buccal tab 400 mcg</i> <i>(base equiv)</i>	3	FLOVENT DISK AER 250MCG	100
<i>fentanyl citrate buccal tab 600 mcg</i> <i>(base equiv)</i>	3	FLOVENT DISK AER 50MCG	100
<i>fentanyl citrate buccal tab 800 mcg</i> <i>(base equiv)</i>	3	FLOVENT HFA AER 110MCG	100
<i>fentanyl citrate lozenge on a handle</i> <i>1200 mcg</i>	3	FLOVENT HFA AER 220MCG	100
<i>fentanyl citrate lozenge on a handle</i> <i>1600 mcg</i>	3	FLOVENT HFA AER 44MCG	100
<i>fentanyl citrate lozenge on a handle</i> <i>200 mcg</i>	3	<i>fluconazole for susp 10 mg/ml</i>	7
<i>fentanyl citrate lozenge on a handle</i> <i>400 mcg</i>	3	<i>fluconazole for susp 40 mg/ml</i>	7
<i>fentanyl citrate lozenge on a handle</i> <i>600 mcg</i>	3	<i>fluconazole in nacl 0.9% inj 200</i> <i>mg/100ml</i>	7
<i>fentanyl citrate lozenge on a handle</i> <i>800 mcg</i>	3	<i>fluconazole in nacl 0.9% inj 400</i> <i>mg/200ml</i>	7
<i>fentanyl td patch 72hr 100 mcg/hr</i>	2	<i>fluconazole tab 100 mg</i>	7
<i>fentanyl td patch 72hr 12 mcg/hr</i>	2	<i>fluconazole tab 150 mg</i>	7
<i>fentanyl td patch 72hr 25 mcg/hr</i>	2	<i>fluconazole tab 200 mg</i>	7
<i>fentanyl td patch 72hr 50 mcg/hr</i>	2	<i>fluconazole tab 50 mg</i>	7
<i>fentanyl td patch 72hr 75 mcg/hr</i>	2	<i>flucytosine cap 250 mg</i>	7
<i>fesoterodine fumarate tab er 24hr 4</i> <i>mg</i>	84	<i>flucytosine cap 500 mg</i>	7
<i>fesoterodine fumarate tab er 24hr 8</i> <i>mg</i>	84	<i>fludarabine phosphate for inj 50 mg</i> .17	
FETZIMA CAP 120MG	48	<i>fludrocortisone acetate tab 0.1 mg</i> ...	72
FETZIMA CAP 20MG	48	<i>flunisolide nasal soln 25 mcg/act</i> <i>(0.025%)</i>	100
FETZIMA CAP 40MG	48	<i>fluocinolone acetonide (otic) oil 0.01%</i>	96
FETZIMA CAP 80MG	48	<i>fluocinolone acetonide cream 0.01%</i>	103
FETZIMA CAP TITRATIO	48	<i>fluocinolone acetonide cream 0.025%</i>	103
<i>finasteride tab 5 mg</i>	83	<i>fluocinolone acetonide oil 0.01% (scalp</i> <i>oil)</i>	103
FINTEPLA SOL 2.2MG/ML	42	<i>fluocinolone acetonide oint 0.025%</i> 103	
FIRDAPSE TAB 10MG	59	<i>fluocinolone acetonide soln 0.01%</i> .103	
FIRMAGON INJ 120MG	18	<i>fluocinonide cream 0.05%</i>	103
FIRMAGON INJ 80MG	18	<i>fluocinonide emulsified base cream</i> <i>0.05%</i>	103
FIRVANQ SOL 25MG/ML	5	<i>fluocinonide gel 0.05%</i>	103
FIRVANQ SOL 50MG/ML	5	<i>fluocinonide oint 0.05%</i>	103
<i>flavoxate hcl tab 100 mg</i>	83	<i>fluocinonide soln 0.05%</i>	103
FLEBOGAMMA INJ 5GM/50ML	88	<i>fluorometholone ophth susp 0.1%</i> ...	95
		FLUROPLEX CRE 1%	104
		<i>fluorouracil cream 0.5%</i>	104
		<i>fluorouracil cream 5%</i>	104
		<i>fluorouracil iv soln 1 gm/20ml (50</i> <i>mg/ml)</i>	17

<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	17	<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	85
<i>fluorouracil soln 2%</i>	104	<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	85
<i>fluorouracil soln 5%</i>	104	<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	85
<i>fluoxetine hcl cap 10 mg</i>	48	<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	85
<i>fluoxetine hcl cap 20 mg</i>	48	<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	98
<i>fluoxetine hcl cap 40 mg</i>	48	FORTEO INJ 600/2.4.....	66
<i>fluoxetine hcl solution 20 mg/5ml</i>	48	<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	8
<i>fluphenazine decanoate inj 25 mg/ml</i> 53		<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	5
<i>fluphenazine hcl elixir 2.5 mg/5ml</i> ...53		<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	27
<i>fluphenazine hcl inj 2.5 mg/ml</i>	53	<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	27
<i>fluphenazine hcl oral conc 5 mg/ml</i> ...53		<i>fosinopril sodium tab 10 mg</i>	28
<i>fluphenazine hcl tab 1 mg</i>	53	<i>fosinopril sodium tab 20 mg</i>	28
<i>fluphenazine hcl tab 10 mg</i>	53	<i>fosinopril sodium tab 40 mg</i>	28
<i>fluphenazine hcl tab 2.5 mg</i>	53	<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	42
<i>fluphenazine hcl tab 5 mg</i>	53	FOTIVDA CAP 0.89MG.....	22
<i>flurazepam hcl cap 15 mg</i>	57	FOTIVDA CAP 1.34MG.....	22
<i>flurazepam hcl cap 30 mg</i>	57	FRAGMIN INJ 10000/ML.....	85
<i>flurbiprofen sodium ophth soln 0.03%</i>	95	FRAGMIN INJ 12500UNT	85
<i>flutamide cap 125 mg</i>	18	FRAGMIN INJ 15000UNT	85
FLUTIC/VILAN INH 100-25	100	FRAGMIN INJ 18000UNT	85
FLUTIC/VILAN INH 200-25	100	FRAGMIN INJ 2500/0.2	85
FLUTICAS HFA AER 110MCG	100	FRAGMIN INJ 5000/0.2	85
FLUTICAS HFA AER 220MCG	100	FRAGMIN INJ 7500/0.3	85
FLUTICAS HFA AER 44MCG.....	100	FRAGMIN INJ 95000UNT	85
<i>fluticasone propionate cream 0.05%</i>	103	<i>furosemide inj 10 mg/ml</i>	37
<i>fluticasone propionate lotion 0.05%</i> 103		<i>furosemide oral soln 10 mg/ml</i>	37
<i>fluticasone propionate nasal susp 50 mcg/act</i>	100	<i>furosemide tab 20 mg</i>	37
<i>fluticasone propionate oint 0.005%</i> 103		<i>furosemide tab 40 mg</i>	37
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	100	<i>furosemide tab 80 mg</i>	37
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	100	FUZEON INJ 90MG	8
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	100	FYCOMPA SUS 0.5MG/ML	42
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	32	FYCOMPA TAB 10MG.....	43
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	32	FYCOMPA TAB 12MG.....	43
<i>fluvoxamine maleate tab 100 mg</i>	40	FYCOMPA TAB 2MG	43
<i>fluvoxamine maleate tab 25 mg</i>	40	FYCOMPA TAB 4MG	43
<i>fluvoxamine maleate tab 50 mg</i>	40	FYCOMPA TAB 6MG	43
FML FORTE SUS 0.25% OP	95	FYCOMPA TAB 8MG	43
FML OIN 0.1% OP	95		

G	
<i>gabapentin cap 100 mg</i>	43
<i>gabapentin cap 300 mg</i>	43
<i>gabapentin cap 400 mg</i>	43
<i>gabapentin oral soln 250 mg/5ml</i>	43
<i>gabapentin tab 600 mg</i>	43
<i>gabapentin tab 800 mg</i>	43
GALAFOLD CAP 123MG	74
<i>galantamine hydrobromide cap er 24hr</i> <i>16 mg</i>	46
<i>galantamine hydrobromide cap er 24hr</i> <i>24 mg</i>	46
<i>galantamine hydrobromide cap er 24hr</i> <i>8 mg</i>	46
<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	46
<i>galantamine hydrobromide tab 12 mg</i>	46
<i>galantamine hydrobromide tab 4 mg</i>	46
<i>galantamine hydrobromide tab 8 mg</i>	46
GAMASTAN INJ	88
GAMMAGARD INJ 10GM/100	89
GAMMAGARD INJ 2.5GM/25.....	88
GAMMAGARD INJ 20GM/200	89
GAMMAGARD INJ 30GM/300	89
GAMMAGARD INJ 5GM/50ML	89
GAMMAGARD SD INJ 10GM HU	89
GAMMAGARD SD INJ 5GM HU	89
GAMMAKED INJ 10GM/100	89
GAMMAKED INJ 1GM/10ML.....	89
GAMMAKED INJ 20GM/200	89
GAMMAKED INJ 5GM/50ML.....	89
GAMMAPLEX INJ 10%	89
GAMMAPLEX INJ 5%	89
GAMUNEX-C INJ 10GM/100	89
GAMUNEX-C INJ 1GM/10ML.....	89
GAMUNEX-C INJ 20GM/200	89
GAMUNEX-C INJ 40/400ML.....	89
GAMUNEX-C INJ 5GM/50ML.....	89
GARDASIL 9 INJ.....	91
<i>gatifloxacin ophth soln 0.5%</i>	94
GATTEX KIT 5MG	82
GAUZE PADS & DRESSINGS - PADS 2 X 2	65
<i>gavilyte-c sol</i>	81
<i>gavilyte-g sol</i>	81
GAVRETO CAP 100MG.....	22
<i>gemcitabine hcl for inj 1 gm</i>	17
<i>gemcitabine hcl for inj 2 gm</i>	17
<i>gemcitabine hcl for inj 200 mg</i>	17
<i>gemfibrozil tab 600 mg</i>	32
<i>gemmily cap 1/20</i>	68
GEMTESA TAB 75MG	84
<i>generlac sol 10gm/15</i>	81
<i>gengraf cap 100mg</i>	90
<i>gengraf cap 25mg</i>	90
<i>gengraf sol 100mg/ml</i>	90
<i>gentak oin 0.3% op</i>	94
<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>	101
<i>gentamicin sulfate inj 40 mg/ml</i>	5
<i>gentamicin sulfate oint 0.1%</i>	101
<i>gentamicin sulfate ophth soln 0.3%</i> ..	94
GENVOYA TAB	10
GEODON INJ 20MG.....	53
GILENYA CAP 0.5MG.....	60
GILOTRIF TAB 20MG.....	22
GILOTRIF TAB 30MG.....	22
GILOTRIF TAB 40MG.....	22
GLASSIA INJ.....	99
<i>glatiramer acetate soln prefilled syringe</i> <i>20 mg/ml</i>	60
<i>glatiramer acetate soln prefilled syringe</i> <i>40 mg/ml</i>	60
<i>glatopa inj 20mg/ml</i>	60
<i>glatopa inj 40mg/ml</i>	60
<i>glimepiride tab 1 mg</i>	63
<i>glimepiride tab 2 mg</i>	63
<i>glimepiride tab 4 mg</i>	63
<i>glipizide tab 10 mg</i>	63
<i>glipizide tab 5 mg</i>	63
<i>glipizide tab er 24hr 10 mg</i>	63
<i>glipizide tab er 24hr 2.5 mg</i>	63
<i>glipizide tab er 24hr 5 mg</i>	63
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	63
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	63
<i>glipizide-metformin hcl tab 5-500 mg</i>	63
GLUCAGON KIT 1MG	73
<i>glycopyrrolate inj 0.2 mg/ml</i>	81

<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	81	HARVONI PAK.....	11
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	81	HARVONI PAK 45-200MG	11
<i>glycopyrrolate tab 1 mg</i>	81	HARVONI TAB 90-400MG	11
<i>glycopyrrolate tab 2 mg</i>	81	HAVRIX INJ 1440UNIT	91
GLYXAMBI TAB 10-5 MG	63	HAVRIX INJ 720UNIT	91
GLYXAMBI TAB 25-5 MG	63	HELIDAC MIS THERAPY	82
<i>granisetron hcl tab 1 mg</i>	80	HEP SOD/D5W INJ 25000UNT.....	85
GRANIX INJ 300/0.5	86	<i>heparin sodium (porcine) inj 1000 unit/ml</i>	85
GRANIX INJ 300/1ML.....	86	<i>heparin sodium (porcine) inj 10000 unit/ml</i>	85
GRANIX INJ 480/0.8	86	<i>heparin sodium (porcine) inj 20000 unit/ml</i>	85
GRANIX INJ 480/1.6	86	<i>heparin sodium (porcine) inj 5000 unit/ml</i>	85
GRASTEK SUB 2800BAU.....	89	HERCEPTIN INJ 150MG	22
<i>griseofulvin microsize susp 125 mg/5ml</i>	7	HERCEPTIN INJ 440MG	22
<i>griseofulvin microsize tab 500 mg</i>	7	HETLIOZ CAP 20MG.....	57
<i>griseofulvin ultramicrosize tab 125 mg</i>	7	HIBERIX SOL 10MCG	91
<i>griseofulvin ultramicrosize tab 250 mg</i>	7	HUMALOG INJ 100/ML	65
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	57	HUMALOG JR INJ 100/ML	65
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	57	HUMALOG KWIK INJ 100/ML.....	65
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	57	HUMALOG KWIK INJ 200/ML.....	65
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	57	HUMALOG MIX INJ 50/50	65
GVOKE HYPO 2 INJ .5/.1ML	73	HUMALOG MIX INJ 50/50KWP.....	65
GVOKE HYPO 2 INJ 1MG/.2ML.....	73	HUMALOG MIX INJ 75/25KWP.....	65
GVOKE PFS INJ	73	HUMALOG MIX SUS 75/25	65
H		HUMATROPE INJ 12MG	74
HALAVEN INJ 1MG/2ML.....	20	HUMATROPE INJ 24MG	74
<i>halobetasol propionate cream 0.05%</i>	103	HUMATROPE INJ 6MG	74
<i>halobetasol propionate oint 0.05%</i>	104	HUMIRA INJ 10/0.1ML	87
<i>haloperidol decanoate im soln 100 mg/ml</i>	53	HUMIRA INJ 20/0.2ML	88
<i>haloperidol decanoate im soln 50 mg/ml</i>	53	HUMIRA INJ 40/0.4ML	88
<i>haloperidol lactate inj 5 mg/ml</i>	53	HUMIRA KIT 40MG/0.8	88
<i>haloperidol lactate oral conc 2 mg/ml</i>	53	HUMIRA PEDIA INJ CROHNS.....	88
<i>haloperidol tab 0.5 mg</i>	53	HUMIRA PEN INJ 40/0.4ML.....	88
<i>haloperidol tab 1 mg</i>	53	HUMIRA PEN INJ 40MG/0.8	88
<i>haloperidol tab 10 mg</i>	53	HUMIRA PEN INJ 80/0.8ML.....	88
<i>haloperidol tab 2 mg</i>	53	HUMIRA PEN INJ CD/UC/HS.....	88
<i>haloperidol tab 20 mg</i>	53	HUMIRA PEN INJ PS/UV	88
<i>haloperidol tab 5 mg</i>	53	HUMIRA PEN KIT CD/UC/HS	88
		HUMIRA PEN KIT PED UC	88
		HUMIRA PEN KIT PS/UV	88
		HUMULIN INJ 70/30	65
		HUMULIN INJ 70/30KWP.....	65
		HUMULIN N INJ U-100	65
		HUMULIN N INJ U-100KWP.....	65

HUMULIN R INJ U-100	65	<i>hydroxyzine pamoate cap 50 mg</i>	97
HUMULIN R INJ U-500	65	I	
<i>hydralazine hcl tab 10 mg</i>	38	<i>ibandronate sodium iv soln 3 mg/3ml</i>	
<i>hydralazine hcl tab 100 mg</i>	39	<i>(base equivalent)</i>	66
<i>hydralazine hcl tab 25 mg</i>	39	<i>ibandronate sodium tab 150 mg (base</i>	
<i>hydralazine hcl tab 50 mg</i>	39	<i>equivalent)</i>	66
<i>hydrochlorothiazide cap 12.5 mg</i>	37	IBRANCE CAP 100MG.....	22
<i>hydrochlorothiazide tab 12.5 mg</i>	37	IBRANCE CAP 125MG.....	22
<i>hydrochlorothiazide tab 25 mg</i>	37	IBRANCE CAP 75MG	22
<i>hydrochlorothiazide tab 50 mg</i>	37	IBRANCE TAB 100MG.....	22
<i>hydrocodone-acetaminophen soln 7.5-</i>		IBRANCE TAB 125MG.....	22
<i>325 mg/15ml</i>	3	IBRANCE TAB 75MG	22
<i>hydrocodone-acetaminophen tab 10-</i>		<i>ibuprofen tab 400 mg</i>	1
<i>325 mg</i>	3	<i>ibuprofen tab 600 mg</i>	1
<i>hydrocodone-acetaminophen tab 5-300</i>		<i>ibuprofen tab 800 mg</i>	1
<i>mg</i>	3	<i>icatibant acetate inj 30 mg/3ml (base</i>	
<i>hydrocodone-acetaminophen tab 5-325</i>		<i>equivalent)</i>	87
<i>mg</i>	3	<i>iclevia tab</i>	68
<i>hydrocodone-acetaminophen tab 7.5-</i>		ICLUSIG TAB 10MG	22
<i>325 mg</i>	3	ICLUSIG TAB 15MG	22
<i>hydrocortisone butyrate cream 0.1%</i>		ICLUSIG TAB 30MG	22
.....	104	ICLUSIG TAB 45MG	22
<i>hydrocortisone butyrate oint 0.1%</i> .	104	<i>icosapent ethyl cap 1 gm</i>	33
<i>hydrocortisone butyrate soln 0.1%</i> .	104	<i>idarubicin hcl iv inj 10 mg/10ml (1</i>	
<i>hydrocortisone enema 100 mg/60ml</i> .	81	<i>mg/ml)</i>	17
<i>hydrocortisone lotion 2.5%</i>	104	<i>idarubicin hcl iv inj 20 mg/20ml (1</i>	
<i>hydrocortisone oint 2.5%</i>	104	<i>mg/ml)</i>	17
<i>hydrocortisone perianal cream 2.5%</i>		<i>idarubicin hcl iv inj 5 mg/5ml (1</i>	
.....	104	<i>mg/ml)</i>	17
<i>hydrocortisone tab 10 mg</i>	72	IDHIFA TAB 100MG	22
<i>hydrocortisone tab 20 mg</i>	72	IDHIFA TAB 50MG	22
<i>hydrocortisone tab 5 mg</i>	72	<i>ifosfamide for inj 1 gm</i>	17
<i>hydrocortisone valerate cream 0.2%</i>		<i>imatinib mesylate tab 100 mg (base</i>	
.....	104	<i>equivalent)</i>	22
<i>hydrocortisone valerate oint 0.2%</i> ..	104	<i>imatinib mesylate tab 400 mg (base</i>	
<i>hydromorphone hcl liqd 1 mg/ml</i>	3	<i>equivalent)</i>	22
<i>hydromorphone hcl tab 2 mg</i>	3	IMBRUVICA CAP 140MG	22
<i>hydromorphone hcl tab 4 mg</i>	3	IMBRUVICA CAP 70MG.....	22
<i>hydromorphone hcl tab 8 mg</i>	3	IMBRUVICA TAB 140MG	22
<i>hydroxychloroquine sulfate tab 200 mg</i>		IMBRUVICA TAB 280MG	22
.....	88	IMBRUVICA TAB 420MG	22
<i>hydroxyurea cap 500 mg</i>	19	IMBRUVICA TAB 560MG	23
<i>hydroxyzine hcl tab 10 mg</i>	97	<i>imipenem-cilastatin intravenous for</i>	
<i>hydroxyzine hcl tab 25 mg</i>	97	<i>soln 250 mg</i>	5
<i>hydroxyzine hcl tab 50 mg</i>	97	<i>imipenem-cilastatin intravenous for</i>	
<i>hydroxyzine pamoate cap 100 mg</i>	97	<i>soln 500 mg</i>	5
<i>hydroxyzine pamoate cap 25 mg</i>	97	<i>imipramine hcl tab 10 mg</i>	48

<i>imipramine hcl tab 25 mg</i>	48	INVEGA TRINZ INJ 819MG.....	54
<i>imipramine hcl tab 50 mg</i>	48	INVIRASE TAB 500MG	8
<i>imiquimod cream 5%</i>	105	INVOKAMET TAB 150-1000	63
IMOVAX RABIE INJ 2.5/ML	91	INVOKAMET TAB 150-500	63
IMPAVIDO CAP 50MG.....	5	INVOKAMET TAB 50-1000	63
INBRIJA CAP 42MG.....	51	INVOKAMET TAB 50-500MG	63
INCRELEX INJ 40MG/4ML	74	INVOKAMET XR TAB 150-1000.....	63
INCRUSE ELPT INH 62.5MCG	97	INVOKAMET XR TAB 150-500	63
<i>indapamide tab 1.25 mg</i>	37	INVOKAMET XR TAB 50-1000	63
<i>indapamide tab 2.5 mg</i>	37	INVOKAMET XR TAB 50-500MG.....	63
INFANRIX INJ	91	INVOKANA TAB 100MG	63
INGREZZA CAP 40-80MG.....	59	INVOKANA TAB 300MG	63
INGREZZA CAP 40MG	59	IOPIDINE SOL 1% OP	96
INGREZZA CAP 60MG	59	IPOL INJ INACTIVE	91
INGREZZA CAP 80MG	59	<i>ipratropium bromide inhal soln 0.02%</i>	97
INLYTA TAB 1MG.....	23	<i>ipratropium bromide nasal soln 0.03%</i> <i>(21 mcg/spray)</i>	97
INLYTA TAB 5MG.....	23	<i>ipratropium bromide nasal soln 0.06%</i> <i>(42 mcg/spray)</i>	97
INQOVI TAB 35-100MG	17	<i>ipratropium-albuterol nebu soln 0.5-</i> <i>2.5(3) mg/3ml</i>	97
INREBIC CAP 100MG	23	<i>irbesartan tab 150 mg</i>	30
INSULIN LISP INJ 100/ML	65	<i>irbesartan tab 300 mg</i>	30
INSULIN LISP INJ JUNIOR	65	<i>irbesartan tab 75 mg</i>	30
INSULIN LISP INJ PROTAMIN	65	<i>irbesartan-hydrochlorothiazide tab</i> <i>150-12.5 mg</i>	29
INSULIN PEN NEEDLE	65	<i>irbesartan-hydrochlorothiazide tab</i> <i>300-12.5 mg</i>	29
INSULIN SYRINGE (DISP) U-100 0.3 ML.....	65	IRESSA TAB 250MG.....	23
INSULIN SYRINGE (DISP) U-100 1 ML	65	<i>irinotecan hcl inj 100 mg/5ml (20</i> <i>mg/ml)</i>	19
INSULIN SYRINGE (DISP) U-100 1/2 ML.....	65	<i>irinotecan hcl inj 40 mg/2ml (20</i> <i>mg/ml)</i>	19
INTELENCE TAB 25MG	8	<i>irinotecan hcl inj 500 mg/25ml (20</i> <i>mg/ml)</i>	19
INTRALIPID INJ 20%	93	ISENTRESS CHW 100MG.....	8
INTRALIPID INJ 30%	93	ISENTRESS CHW 25MG.....	8
INTRON A INJ 10MU	89	ISENTRESS HD TAB 600MG.....	8
INTRON A INJ 18MU	89	ISENTRESS POW 100MG	8
INTRON A INJ 25MU	89	ISENTRESS TAB 400MG	8
INTRON A INJ 50MU	89	<i>isibloom tab</i>	68
<i>introvale tab</i>	68	ISOLYTE-P INJ /D5W	92
INVEGA HAFYE INJ 1092MG.....	53	ISOLYTE-S INJ PH 7.4.....	92
INVEGA HAFYE INJ 1560MG.....	53	<i>isoniazid inj 100 mg/ml</i>	10
INVEGA SUST INJ 117/0.75.....	54	<i>isoniazid syrup 50 mg/5ml</i>	10
INVEGA SUST INJ 156MG/ML.....	54	<i>isoniazid tab 100 mg</i>	10
INVEGA SUST INJ 234/1.5.....	54		
INVEGA SUST INJ 39/0.25.....	53		
INVEGA SUST INJ 78/0.5ML	53		
INVEGA TRINZ INJ 273MG.....	54		
INVEGA TRINZ INJ 410MG.....	54		
INVEGA TRINZ INJ 546MG.....	54		

<i>isoniazid tab 300 mg</i>	10	JARDIANCE TAB 10MG	63
ISOPROPYL ALCOHOL 0.7 ML/ML.....	65	JARDIANCE TAB 25MG	63
<i>isosorbide dinitrate tab 10 mg</i>	39	<i>jasmiel tab 3-0.02mg</i>	68
<i>isosorbide dinitrate tab 20 mg</i>	39	JENTADUETO TAB 2.5-1000.....	64
<i>isosorbide dinitrate tab 30 mg</i>	39	JENTADUETO TAB 2.5-500	63
<i>isosorbide dinitrate tab 5 mg</i>	39	JENTADUETO TAB 2.5-850	64
<i>isosorbide mononitrate tab 10 mg</i>	39	JENTADUETO TAB XR.....	64
<i>isosorbide mononitrate tab 20 mg</i>	39	JEVTANA INJ 60/1.5ML	20
<i>isosorbide mononitrate tab er 24hr 120</i>		<i>juleber tab</i>	68
<i>mg</i>	39	JULUCA TAB 50-25MG.....	10
<i>isosorbide mononitrate tab er 24hr 30</i>		<i>junel 1.5/30 tab</i>	68
<i>mg</i>	39	<i>junel 1/20 tab</i>	68
<i>isosorbide mononitrate tab er 24hr 60</i>		<i>junel fe 24 tab 1/20</i>	68
<i>mg</i>	39	<i>junel fe tab 1.5/30</i>	68
<i>isradipine cap 2.5 mg</i>	36	<i>junel fe tab 1/20</i>	68
<i>isradipine cap 5 mg</i>	36	JYNARQUE PAK 15MG	74
ISTODAX OVR INJ 10MG	23	JYNARQUE PAK 30-15MG	74
ISTURISA TAB 10MG	74	JYNARQUE PAK 45-15MG	74
ISTURISA TAB 1MG	74	JYNARQUE PAK 60-30MG	74
ISTURISA TAB 5MG	74	JYNARQUE PAK 90-30MG	74
<i>itraconazole cap 100 mg</i>	7	JYNARQUE TAB 15MG	74
<i>ivermectin tab 3 mg</i>	5	JYNARQUE TAB 30MG	74
IXEMPRA KIT INJ 15MG.....	20	K	
IXIARO INJ	91	KADCYLA INJ 100MG	23
J		KADCYLA INJ 160MG	23
JAKAFI TAB 10MG	23	<i>kaitlib fe chw</i>	68
JAKAFI TAB 15MG	23	KALYDECO PAK 25MG	99
JAKAFI TAB 20MG	23	KALYDECO PAK 50MG	99
JAKAFI TAB 25MG	23	KALYDECO PAK 75MG	99
JAKAFI TAB 5MG	23	KALYDECO TAB 150MG	99
<i>jantoven tab 10mg</i>	85	<i>kariva tab 28 day</i>	68
<i>jantoven tab 1mg</i>	85	<i>kcl 10 meq/l (0.075%) in dextrose 5%</i>	
<i>jantoven tab 2.5mg</i>	85	<i>& nacl 0.45% inj</i>	92
<i>jantoven tab 2mg</i>	85	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i>	
<i>jantoven tab 3mg</i>	85	<i>nacl 0.2% inj</i>	92
<i>jantoven tab 4mg</i>	85	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i>	
<i>jantoven tab 5mg</i>	85	<i>nacl 0.45% inj</i>	92
<i>jantoven tab 6mg</i>	85	<i>kcl 20 meq/l (0.15%) in dextrose 5% &</i>	
<i>jantoven tab 7.5mg</i>	85	<i>nacl 0.9% inj</i>	92
JANUMET TAB 50-1000	63	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	
JANUMET TAB 50-500MG	63	.....	92
JANUMET XR TAB 100-1000.....	63	<i>kcl 30 meq/l (0.224%) in dextrose 5%</i>	
JANUMET XR TAB 50-1000	63	<i>& nacl 0.45% inj</i>	92
JANUMET XR TAB 50-500MG.....	63	<i>kcl 40 meq/l (0.3%) in dextrose 5% &</i>	
JANUVIA TAB 100MG	63	<i>nacl 0.45% inj</i>	92
JANUVIA TAB 25MG.....	63	KCL/D5W/LACT INJ 20MEQ/L.....	92
JANUVIA TAB 50MG.....	63	KCL/D5W/NACL INJ 0.3/0.9%.....	92

<i>kelnor 1/50 tab</i>	68	<i>lacosamide tab 150 mg</i>	43
<i>kelnor tab 1/35</i>	68	<i>lacosamide tab 200 mg</i>	43
KERENDIA TAB 10MG	38	<i>lacosamide tab 50 mg</i>	43
KERENDIA TAB 20MG	38	<i>lactated ringer's for irrigation</i>	105
KESIMPTA INJ 20/.4ML	60	<i>lactated ringer's solution</i>	92
<i>ketoconazole cream 2%</i>	102	<i>lactic acid (ammonium lactate) cream</i>	
<i>ketoconazole shampoo 2%</i>	102	12%	105
<i>ketoconazole tab 200 mg</i>	7	<i>lactic acid (ammonium lactate) lotion</i>	
<i>ketorolac tromethamine ophth soln</i>		12%	105
0.4%	95	<i>lactulose solution 10 gm/15ml</i>	81
<i>ketorolac tromethamine ophth soln</i>		<i>lamivudine oral soln 10 mg/ml</i>	8
0.5%	95	<i>lamivudine tab 100 mg (hbv)</i>	11
KEYTRUDA INJ 100MG/4M	23	<i>lamivudine tab 150 mg</i>	8
KINERET INJ	88	<i>lamivudine tab 300 mg</i>	8
KINRIX INJ	91	<i>lamivudine-zidovudine tab 150-300 mg</i>	
KISQALI 200 PAK FEMARA.....	20	.....	10
KISQALI 400 PAK FEMARA.....	20	<i>lamotrigine orally disintegrating tab</i>	
KISQALI 600 PAK FEMARA.....	20	100 mg	43
KISQALI TAB 200DOSE	23	<i>lamotrigine orally disintegrating tab</i>	
KISQALI TAB 400DOSE	23	200 mg	43
KISQALI TAB 600DOSE	23	<i>lamotrigine orally disintegrating tab 25</i>	
<i>klor-con 10 tab 10meq er</i>	93	mg	43
<i>klor-con 8 tab 8meq er</i>	93	<i>lamotrigine orally disintegrating tab 50</i>	
<i>klor-con m10 tab 10meq er</i>	93	mg	43
<i>klor-con m15 tab 15meq er</i>	93	<i>lamotrigine tab 100 mg</i>	43
<i>klor-con m20 tab 20meq er</i>	93	<i>lamotrigine tab 150 mg</i>	43
<i>klor-con pak 20meq</i>	93	<i>lamotrigine tab 200 mg</i>	43
<i>klor-con/ef tab 25meq ef</i>	93	<i>lamotrigine tab 25 mg</i>	43
KLOXXADO SPR 8MG	62	<i>lamotrigine tab chewable dispersible 25</i>	
KORLYM TAB 300MG	74	mg	43
KOSELUGO CAP 10MG	23	<i>lamotrigine tab chewable dispersible 5</i>	
KOSELUGO CAP 25MG	23	mg	43
<i>kurvelo tab 0.15/30</i>	68	<i>lamotrigine tab disint 25 (14) & 50 mg</i>	
KYNMOBI MIS 10MG	51	(14) & 100 mg (7) kit	43
KYNMOBI MIS 15MG	51	<i>lamotrigine tab er 24hr 100 mg</i>	43
KYNMOBI MIS 20MG	51	<i>lamotrigine tab er 24hr 200 mg</i>	43
KYNMOBI MIS 25MG	51	<i>lamotrigine tab er 24hr 25 mg</i>	43
KYNMOBI MIS 30MG	51	<i>lamotrigine tab er 24hr 250 mg</i>	43
KYPROLIS SOL 30MG	23	<i>lamotrigine tab er 24hr 300 mg</i>	43
KYPROLIS SOL 60MG	23	<i>lamotrigine tab er 24hr 50 mg</i>	43
L		<i>lansoprazole cap delayed release 15</i>	
<i>labetalol hcl iv soln 5 mg/ml</i>	34	mg	83
<i>labetalol hcl tab 100 mg</i>	34	<i>lansoprazole cap delayed release 30</i>	
<i>labetalol hcl tab 200 mg</i>	34	mg	83
<i>labetalol hcl tab 300 mg</i>	34	<i>lanthanum carbonate chew tab 1000</i>	
<i>lacosamide oral solution 10 mg/ml</i> ...	43	mg (elemental)	76
<i>lacosamide tab 100 mg</i>	43		

<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	76	LEUKERAN TAB 2MG	17
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	76	<i>leuprolide acetate inj kit 5 mg/ml</i>	18
LANTUS INJ 100/ML.....	65	<i>levabuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	98
LANTUS SOLOS INJ 100/ML.....	65	<i>levabuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	98
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	23	<i>levabuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	98
<i>larin fe tab 1.5/30</i>	68	<i>levabuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	98
<i>larin fe tab 1/20</i>	68	<i>levabuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	98
<i>larin tab 1.5/30</i>	68	LEVEMIR INJ.....	66
<i>larin tab 1/20</i>	68	LEVEMIR INJ FLEXTOUC	66
<i>larissia tab</i>	69	<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	43
LARTRUVO INJ 10MG/ML.....	23	<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	43
LARTRUVO INJ 190/19ML	23	<i>levetiracetam oral soln 100 mg/ml</i> ...	43
<i>latanoprost ophth soln 0.005%</i>	96	<i>levetiracetam tab 1000 mg</i>	44
LATUDA TAB 120MG	54	<i>levetiracetam tab 250 mg</i>	43
LATUDA TAB 20MG	54	<i>levetiracetam tab 500 mg</i>	43
LATUDA TAB 40MG.....	54	<i>levetiracetam tab 750 mg</i>	44
LATUDA TAB 60MG.....	54	<i>levetiracetam tab er 24hr 500 mg</i> ...	44
LATUDA TAB 80MG.....	54	<i>levetiracetam tab er 24hr 750 mg</i> ...	44
<i>layolis fe chw</i>	69	<i>levobunolol hcl ophth soln 0.5%</i>	96
<i>leena tab</i>	69	<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	74
<i>leflunomide tab 10 mg</i>	88	<i>levocarnitine tab 330 mg</i>	74
<i>leflunomide tab 20 mg</i>	88	<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	97
<i>lenalidomide cap 10 mg</i>	19	<i>levocetirizine dihydrochloride tab 5 mg</i>	97
<i>lenalidomide cap 15 mg</i>	19	<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	14
<i>lenalidomide cap 25 mg</i>	19	<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	14
<i>lenalidomide cap 5 mg</i>	19	<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	14
LENVIMA CAP 10 MG	23	<i>levofloxacin iv soln 25 mg/ml</i>	14
LENVIMA CAP 12MG	23	<i>levofloxacin ophth soln 0.5%</i>	94
LENVIMA CAP 14 MG	23	<i>levofloxacin oral soln 25 mg/ml</i>	14
LENVIMA CAP 18 MG	23	<i>levofloxacin tab 250 mg</i>	14
LENVIMA CAP 20 MG	23	<i>levofloxacin tab 500 mg</i>	14
LENVIMA CAP 24 MG	23	<i>levofloxacin tab 750 mg</i>	14
LENVIMA CAP 4MG	23	<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)</i>	26
LENVIMA CAP 8 MG	23		
<i>lessina tab</i>	69		
<i>letrozole tab 2.5 mg</i>	18		
<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		
<i>leucovorin calcium tab 25 mg</i>	26		
<i>leucovorin calcium tab 5 mg</i>	26		

<i>levonest tab</i>	69	<i>levothyroxine sodium tab 25 mcg</i>	77
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	69	<i>levothyroxine sodium tab 300 mcg</i> ...	77
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	69	<i>levothyroxine sodium tab 50 mcg</i>	77
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	69	<i>levothyroxine sodium tab 75 mcg</i>	77
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	69	<i>levothyroxine sodium tab 88 mcg</i>	77
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	69	<i>levoxyl tab 100mcg</i>	77
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	69	<i>levoxyl tab 112mcg</i>	77
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	69	<i>levoxyl tab 125mcg</i>	77
<i>levora-28 tab 0.15/30</i>	69	<i>levoxyl tab 137mcg</i>	77
<i>levo-t tab 100mcg</i>	77	<i>levoxyl tab 150mcg</i>	77
<i>levo-t tab 112mcg</i>	77	<i>levoxyl tab 175mcg</i>	77
<i>levo-t tab 125mcg</i>	77	<i>levoxyl tab 200mcg</i>	77
<i>levo-t tab 137mcg</i>	77	<i>levoxyl tab 25mcg</i>	77
<i>levo-t tab 150mcg</i>	77	<i>levoxyl tab 50mcg</i>	77
<i>levo-t tab 175mcg</i>	77	<i>levoxyl tab 75mcg</i>	77
<i>levo-t tab 200 mcg</i>	77	<i>levoxyl tab 88mcg</i>	77
<i>levo-t tab 25mcg</i>	76	<i>LEXIVA SUS 50MG/ML</i>	8
<i>levo-t tab 300 mcg</i>	77	<i>lidocaine hcl local inj 2%</i>	4
<i>levo-t tab 50mcg</i>	76	<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	4
<i>levo-t tab 75mcg</i>	76	<i>lidocaine hcl soln 4%</i>	104
<i>levo-t tab 88mcg</i>	76	<i>lidocaine hcl viscous soln 2%</i>	105
<i>levothyroxine sodium cap 100 mcg</i> ...	77	<i>lidocaine oint 5%</i>	104
<i>levothyroxine sodium cap 112 mcg</i> ...	77	<i>lidocaine patch 5%</i>	104
<i>levothyroxine sodium cap 125 mcg</i> ...	77	<i>lidocaine-prilocaine cream 2.5-2.5%</i>	104
<i>levothyroxine sodium cap 13 mcg</i> ...	77	<i>linezolid for susp 100 mg/5ml</i>	5
<i>levothyroxine sodium cap 137 mcg</i> ...	77	<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	5
<i>levothyroxine sodium cap 150 mcg</i> ...	77	<i>linezolid tab 600 mg</i>	5
<i>levothyroxine sodium cap 175 mcg</i> ...	77	<i>LINZESS CAP 145MCG</i>	82
<i>levothyroxine sodium cap 200 mcg</i> ...	77	<i>LINZESS CAP 290MCG</i>	82
<i>levothyroxine sodium cap 25 mcg</i> ...	77	<i>LINZESS CAP 72MCG</i>	82
<i>levothyroxine sodium cap 50 mcg</i> ...	77	<i>liothyronine sodium iv soln 10 mcg/ml</i>	77
<i>levothyroxine sodium cap 75 mcg</i> ...	77	<i>liothyronine sodium tab 25 mcg</i>	78
<i>levothyroxine sodium cap 88 mcg</i> ...	77	<i>liothyronine sodium tab 5 mcg</i>	78
<i>levothyroxine sodium tab 100 mcg</i> ...	77	<i>liothyronine sodium tab 50 mcg</i>	78
<i>levothyroxine sodium tab 112 mcg</i> ...	77	<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	27
<i>levothyroxine sodium tab 125 mcg</i> ...	77	<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	27
<i>levothyroxine sodium tab 137 mcg</i> ...	77	<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	27
<i>levothyroxine sodium tab 150 mcg</i> ...	77	<i>lisinopril tab 10 mg</i>	28
<i>levothyroxine sodium tab 175 mcg</i> ...	77	<i>lisinopril tab 2.5 mg</i>	28
<i>levothyroxine sodium tab 200 mcg</i> ...	77	<i>lisinopril tab 20 mg</i>	28

<i>lisinopril tab 30 mg</i>	28	<i>loteprednol etabonate ophth gel 0.5%</i>	95
<i>lisinopril tab 40 mg</i>	28	<i>loteprednol etabonate ophth susp 0.5%</i>	95
<i>lisinopril tab 5 mg</i>	28	<i>lovastatin tab 10 mg</i>	32
<i>lithium carbonate cap 150 mg</i>	59	<i>lovastatin tab 20 mg</i>	32
<i>lithium carbonate cap 300 mg</i>	59	<i>lovastatin tab 40 mg</i>	32
<i>lithium carbonate cap 600 mg</i>	59	<i>low-ogestrel tab</i>	69
<i>lithium carbonate tab 300 mg</i>	59	<i>loxapine succinate cap 10 mg</i>	54
<i>lithium carbonate tab er 300 mg</i>	59	<i>loxapine succinate cap 25 mg</i>	54
<i>lithium carbonate tab er 450 mg</i>	59	<i>loxapine succinate cap 5 mg</i>	54
LITHIUM SOL 8MEQ/5ML.....	59	<i>loxapine succinate cap 50 mg</i>	54
LIVALO TAB 1MG.....	32	<i>lubiprostone cap 24 mcg</i>	82
LIVALO TAB 2MG.....	32	<i>lubiprostone cap 8 mcg</i>	82
LIVALO TAB 4MG.....	32	LUCENTIS SOL 0.3MG.....	96
LIVTENCITY TAB 200MG.....	11	LUCENTIS SOL 0.5MG.....	96
LOKELMA PAK 5GM.....	67	<i>luliconazole cream 1%</i>	102
LONSURF TAB 15-6.14.....	17	LUMAKRAS TAB 120MG	23
LONSURF TAB 20-8.19.....	17	LUMIGAN SOL 0.01%	96
<i>loperamide hcl cap 2 mg</i>	82	LUPKYNIS CAP 7.9MG	90
<i>lopinavir-ritonavir soln 400-100</i> <i>mg/5ml (80-20 mg/ml)</i>	10	LUPR DEP-PED INJ 11.25MG	74
<i>lopinavir-ritonavir tab 100-25 mg</i>	10	LUPR DEP-PED INJ 15MG	74
<i>lopinavir-ritonavir tab 200-50 mg</i>	10	LUPR DEP-PED INJ 7.5MG	74
<i>lorazepam con 2mg/ml</i>	40	LUPRON DEPOT INJ 11.25MG.....	18
<i>lorazepam tab 0.5 mg</i>	40	LUPRON DEPOT INJ 22.5MG	18
<i>lorazepam tab 1 mg</i>	40	LUPRON DEPOT INJ 3.75MG	18
<i>lorazepam tab 2 mg</i>	41	LUPRON DEPOT INJ 30MG	18
LORBRENA TAB 100MG	23	LUPRON DEPOT INJ 45MG	18
LORBRENA TAB 25MG	23	LUPRON DEPOT INJ 7.5MG	18
LOREEV XR CAP 1.5MG	41	<i>lutura tab</i>	69
LOREEV XR CAP 1MG	41	LYBALVI TAB 10-10MG.....	54
LOREEV XR CAP 2MG	41	LYBALVI TAB 15-10MG.....	54
LOREEV XR CAP 3MG	41	LYBALVI TAB 20-10MG.....	54
<i>loryna tab 3-0.02mg</i>	69	LYBALVI TAB 5-10MG	54
<i>losartan potassium &</i> <i>hydrochlorothiazide tab 100-12.5 mg</i>	29	<i>lyleq tab 0.35mg</i>	69
<i>losartan potassium &</i> <i>hydrochlorothiazide tab 100-25 mg</i>	29	<i>lyllana dis 0.025mg</i>	71
<i>losartan potassium &</i> <i>hydrochlorothiazide tab 50-12.5 mg</i>	29	<i>lyllana dis 0.0375mg</i>	71
<i>losartan potassium tab 100 mg</i>	30	<i>lyllana dis 0.05mg</i>	71
<i>losartan potassium tab 25 mg</i>	30	<i>lyllana dis 0.075mg</i>	71
<i>losartan potassium tab 50 mg</i>	30	<i>lyllana dis 0.1mg</i>	71
LOTEMAX OIN 0.5%	95	LYNPARZA TAB 100MG.....	23
LOTEMAX SM GEL 0.38%	95	LYNPARZA TAB 150MG.....	23
		LYSODREN TAB 500MG	18
		LYUMJEV INJ 100UT/ML	66
		LYUMJEV KWPN INJ 100UT/ML.....	66
		LYUMJEV KWPN INJ 200UT/ML.....	66
		<i>lyza tab 0.35mg</i>	69

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<i>magnesium sulfate inj 50%</i>	92	MENACTRA INJ	91
<i>malathion lotion 0.5%</i>	105	MENQUADFI INJ.....	91
<i>maraviroc tab 150 mg</i>	8	MENVEO INJ	91
<i>maraviroc tab 300 mg</i>	8	<i>mercaptapurine tab 50 mg</i>	18
<i>marlissa tab 0.15/30</i>	69	<i>meropenem iv for soln 1 gm</i>	5
MARPLAN TAB 10MG.....	48	<i>meropenem iv for soln 500 mg</i>	5
MATULANE CAP 50MG.....	20	<i>merzee cap 1/20</i>	69
MAVYRET PAK 50-20MG	11	<i>mesalamine cap dr 400 mg</i>	81
MAVYRET TAB 100-40MG	11	<i>mesalamine cap er 24hr 0.375 gm</i> ...	81
MAYZENT PAK STARTER.....	60	<i>mesalamine enema 4 gm</i>	81
MAYZENT TAB 0.25MG.....	60	<i>mesalamine suppos 1000 mg</i>	81
MAYZENT TAB 1MG	60	<i>mesalamine tab delayed release 1.2</i> <i>gm</i>	81
MAYZENT TAB 2MG	60	<i>mesalamine tab delayed release 800</i> <i>mg</i>	81
<i>meclizine hcl tab 12.5 mg</i>	80	<i>mesna inj 100 mg/ml</i>	26
<i>meclizine hcl tab 25 mg</i>	80	MESNEX TAB 400MG.....	26
<i>medroxyprogesterone acetate im susp</i> <i>150 mg/ml</i>	69	<i>metaxalone tab 800 mg</i>	61
<i>medroxyprogesterone acetate im susp</i> <i>prefilled syr 150 mg/ml</i>	69	<i>metformin hcl tab 1000 mg</i>	64
<i>medroxyprogesterone acetate tab 10</i> <i>mg</i>	76	<i>metformin hcl tab 500 mg</i>	64
<i>medroxyprogesterone acetate tab 2.5</i> <i>mg</i>	76	<i>metformin hcl tab 850 mg</i>	64
<i>medroxyprogesterone acetate tab 5 mg</i>	76	<i>metformin hcl tab er 24hr 500 mg</i>	64
<i>mefloquine hcl tab 250 mg</i>	7	<i>metformin hcl tab er 24hr 750 mg</i>	64
<i>megestrol acetate susp 40 mg/ml</i>	76	<i>methazolamide tab 25 mg</i>	38
<i>megestrol acetate susp 625 mg/5ml</i>	76	<i>methazolamide tab 50 mg</i>	38
<i>megestrol acetate tab 20 mg</i>	18	<i>methenamine hippurate tab 1 gm</i>	5
<i>megestrol acetate tab 40 mg</i>	18	<i>methimazole tab 10 mg</i>	78
MEKINIST TAB 0.5MG	23	<i>methimazole tab 5 mg</i>	78
MEKINIST TAB 2MG.....	24	METHITEST TAB 10MG.....	62
MEKTOVI TAB 15MG	24	<i>methocarbamol tab 500 mg</i>	61
<i>meloxicam tab 15 mg</i>	1	<i>methocarbamol tab 750 mg</i>	61
<i>meloxicam tab 7.5 mg</i>	1	<i>methotrexate sodium for inj 1 gm</i>	18
<i>melphalan hcl for inj 50 mg (base</i> <i>equiv)</i>	17	<i>methotrexate sodium inj 50 mg/2ml</i> <i>(25 mg/ml)</i>	18
<i>memantine hcl cap er 24hr 14 mg</i>	46	<i>methotrexate sodium inj pf 50 mg/2ml</i> <i>(25 mg/ml)</i>	18
<i>memantine hcl cap er 24hr 21 mg</i>	46	<i>methotrexate sodium tab 2.5 mg (base</i> <i>equiv)</i>	88
<i>memantine hcl cap er 24hr 28 mg</i>	46	<i>methoxsalen rapid cap 10 mg</i>	102
<i>memantine hcl cap er 24hr 7 mg</i>	46	<i>methscopolamine bromide tab 2.5 mg</i>	81
<i>memantine hcl oral solution 2 mg/ml</i>	46	<i>methscopolamine bromide tab 5 mg</i>	81
<i>memantine hcl tab 10 mg</i>	46	<i>methylphenidate hcl soln 10 mg/5ml</i>	57
<i>memantine hcl tab 28 x 5 mg & 21 x</i> <i>10 mg titration pack</i>	46	<i>methylphenidate hcl soln 5 mg/5ml</i>	57
<i>memantine hcl tab 5 mg</i>	46	<i>methylphenidate hcl tab 10 mg</i>	57
		<i>methylphenidate hcl tab 20 mg</i>	57
		<i>methylphenidate hcl tab 5 mg</i>	57

<i>methylprednisolone acetate inj susp 40 mg/ml</i>	72	<i>metronidazole iv soln 500 mg/100ml</i> .	5
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	72	<i>metronidazole lotion 0.75%</i>	105
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	72	<i>metronidazole tab 250 mg</i>	5
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	72	<i>metronidazole tab 500 mg</i>	5
<i>methylprednisolone tab 16 mg</i>	73	<i>metronidazole vaginal gel 0.75%</i>	84
<i>methylprednisolone tab 32 mg</i>	73	<i>metyrosine cap 250 mg</i>	39
<i>methylprednisolone tab 4 mg</i>	73	<i>mexiletine hcl cap 150 mg</i>	31
<i>methylprednisolone tab 8 mg</i>	73	<i>mexiletine hcl cap 200 mg</i>	31
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	73	<i>mexiletine hcl cap 250 mg</i>	31
<i>methyltestosterone cap 10 mg</i>	62	<i>micafungin sodium for iv soln 100 mg</i> 7	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	80	<i>micafungin sodium for iv soln 50 mg</i> .	7
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	80	<i>micrgstin 24 tab fe 1/20</i>	69
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	80	<i>microgestin tab 1.5/30</i>	69
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	80	<i>microgestin tab 1/20</i>	69
<i>metolazone tab 10 mg</i>	38	<i>microgestin tab fe 1/20</i>	69
<i>metolazone tab 2.5 mg</i>	38	<i>microgestin tab fe1.5/30</i>	69
<i>metolazone tab 5 mg</i>	38	<i>midodrine hcl tab 10 mg</i>	39
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	34	<i>midodrine hcl tab 2.5 mg</i>	39
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	34	<i>midodrine hcl tab 5 mg</i>	39
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	33	<i>miglitol tab 100 mg</i>	64
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	34	<i>miglitol tab 25 mg</i>	64
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	34	<i>miglitol tab 50 mg</i>	64
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	34	<i>miglustat cap 100 mg</i>	74
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	34	<i>minocycline hcl cap 100 mg</i>	16
<i>metoprolol tartrate tab 100 mg</i>	34	<i>minocycline hcl cap 50 mg</i>	16
<i>metoprolol tartrate tab 25 mg</i>	34	<i>minocycline hcl cap 75 mg</i>	16
<i>metoprolol tartrate tab 37.5 mg</i>	34	<i>minocycline hcl tab 100 mg</i>	16
<i>metoprolol tartrate tab 50 mg</i>	34	<i>minocycline hcl tab 50 mg</i>	16
<i>metoprolol tartrate tab 75 mg</i>	34	<i>minocycline hcl tab 75 mg</i>	16
<i>metronidazole cream 0.75%</i>	105	<i>minoxidil tab 10 mg</i>	39
<i>metronidazole gel 0.75%</i>	105	<i>minoxidil tab 2.5 mg</i>	39
		<i>mirtazapine orally disintegrating tab 15 mg</i>	48
		<i>mirtazapine orally disintegrating tab 30 mg</i>	48
		<i>mirtazapine orally disintegrating tab 45 mg</i>	48
		<i>mirtazapine tab 15 mg</i>	48
		<i>mirtazapine tab 30 mg</i>	48
		<i>mirtazapine tab 45 mg</i>	48
		<i>mirtazapine tab 7.5 mg</i>	48
		<i>misoprostol tab 100 mcg</i>	82
		<i>misoprostol tab 200 mcg</i>	82
		<i>mitomycin for iv soln 20 mg</i>	17
		<i>mitomycin for iv soln 40 mg</i>	17
		<i>mitomycin for iv soln 5 mg</i>	17

<i>mitoxantrone hcl inj conc 20 mg/10ml</i> <i>(2 mg/ml)</i>	20	<i>mupirocin calcium cream 2%</i>	101
<i>mitoxantrone hcl inj conc 25</i> <i>mg/12.5ml (2 mg/ml)</i>	20	<i>mupirocin oint 2%</i>	101
<i>mitoxantrone hcl inj conc 30 mg/15ml</i> <i>(2 mg/ml)</i>	20	MYALEPT INJ 11.3MG	74
M-M-R II INJ	91	MYCAPSSA CAP 20MG	74
<i>modafinil tab 100 mg</i>	61	<i>mycophenolate mofetil cap 250 mg</i> ..	90
<i>modafinil tab 200 mg</i>	61	<i>mycophenolate mofetil for oral susp</i> <i>200 mg/ml</i>	90
<i>moexipril hcl tab 15 mg</i>	28	<i>mycophenolate mofetil hcl for iv soln</i> <i>500 mg (base equiv)</i>	90
<i>moexipril hcl tab 7.5 mg</i>	28	<i>mycophenolate mofetil tab 500 mg</i> ..	90
<i>molindone hcl tab 10 mg</i>	54	<i>mycophenolate sodium tab dr 180 mg</i> <i>(mycophenolic acid equiv)</i>	90
<i>molindone hcl tab 25 mg</i>	54	<i>mycophenolate sodium tab dr 360 mg</i> <i>(mycophenolic acid equiv)</i>	90
<i>molindone hcl tab 5 mg</i>	54	<i>myorisan cap 10mg</i>	101
<i>mometasone furoate cream 0.1%</i> ..	104	<i>myorisan cap 20mg</i>	101
<i>mometasone furoate nasal susp 50</i> <i>mcg/act</i>	100	<i>myorisan cap 30mg</i>	101
<i>mometasone furoate oint 0.1%</i>	104	<i>myorisan cap 40mg</i>	101
<i>mometasone furoate solution 0.1%</i> <i>(lotion)</i>	104	MYRBETRIQ TAB 25MG	84
<i>montelukast sodium chew tab 4 mg</i> <i>(base equiv)</i>	98	MYRBETRIQ TAB 50MG	84
<i>montelukast sodium chew tab 5 mg</i> <i>(base equiv)</i>	98	N	
<i>montelukast sodium tab 10 mg (base</i> <i>equiv)</i>	98	<i>nabumetone tab 500 mg</i>	1
<i>morphine sulfate oral soln 10 mg/5ml</i> 3		<i>nabumetone tab 750 mg</i>	1
<i>morphine sulfate oral soln 100 mg/5ml</i> <i>(20 mg/ml)</i>	3	<i>nadolol tab 20 mg</i>	34
<i>morphine sulfate oral soln 20 mg/5ml</i> 3		<i>nadolol tab 40 mg</i>	34
<i>morphine sulfate suppos 10 mg</i>	3	<i>nadolol tab 80 mg</i>	34
<i>morphine sulfate tab 15 mg</i>	4	<i>nafcillin sodium for inj 1 gm</i>	15
<i>morphine sulfate tab 30 mg</i>	4	<i>nafcillin sodium for inj 2 gm</i>	15
<i>morphine sulfate tab er 100 mg</i>	2	<i>nafcillin sodium for iv soln 10 gm</i>	15
<i>morphine sulfate tab er 15 mg</i>	2	<i>naloxone hcl inj 0.4 mg/ml</i>	62
<i>morphine sulfate tab er 200 mg</i>	2	<i>naloxone hcl nasal spray 4 mg/0.1ml</i> 62	
<i>morphine sulfate tab er 30 mg</i>	2	<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	62
<i>morphine sulfate tab er 60 mg</i>	2	<i>naloxone hcl soln prefilled syringe 2</i> <i>mg/2ml</i>	62
MOVANTIK TAB 12.5MG	82	<i>naltrexone hcl tab 50 mg</i>	62
MOVANTIK TAB 25MG	82	NAMZARIC CAP	46
<i>moxifloxacin hcl ophth soln 0.5% (base</i> <i>equiv)</i>	94	NAMZARIC CAP 14-10MG	46
<i>moxifloxacin hcl tab 400 mg (base</i> <i>equiv)</i>	14	NAMZARIC CAP 21-10MG	46
MOZOBIL INJ	86	NAMZARIC CAP 28-10MG	46
MULPLETA TAB 3MG	87	NAMZARIC CAP 7-10MG	46
MULTAQ TAB 400MG	31	<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>	58

<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	
.....	58
NARCAN SPR 4MG	62
NATACYN SUS 5% OP	94
<i>nateglinide tab 120 mg</i>	64
<i>nateglinide tab 60 mg</i>	64
NATPARA INJ 100MCG	66
NATPARA INJ 25MCG	66
NATPARA INJ 50MCG	66
NATPARA INJ 75MCG	66
NAYZILAM SPR 5MG	44
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	35
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	34
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	35
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	34
<i>necon tab 0.5/35</i>	69
NEEDLES, INSULIN DISP., SAFETY ...	66
<i>nefazodone hcl tab 100 mg</i>	49
<i>nefazodone hcl tab 150 mg</i>	49
<i>nefazodone hcl tab 200 mg</i>	49
<i>nefazodone hcl tab 250 mg</i>	49
<i>nefazodone hcl tab 50 mg</i>	49
<i>neomycin sulfate tab 500 mg</i>	5
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	94
<i>neomycin-polymyx-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i> ..	94
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	94
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	94
<i>neomycin-polymyxin-hc ophth susp</i> ..	94
<i>neomycin-polymyxin-hc otic soln 1%</i>	97
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	97
NERLYNX TAB 40MG	24
NEUPRO DIS 1MG/24HR.....	51
NEUPRO DIS 2MG/24HR.....	51
NEUPRO DIS 3MG/24HR.....	51
NEUPRO DIS 4MG/24HR.....	51
NEUPRO DIS 6MG/24HR.....	51
NEUPRO DIS 8MG/24HR.....	51
NEVANAC SUS 0.1%	95
<i>nevirapine susp 50 mg/5ml</i>	8
<i>nevirapine tab 200 mg</i>	8
<i>nevirapine tab er 24hr 100 mg</i>	8
<i>nevirapine tab er 24hr 400 mg</i>	8
NEXAVAR TAB 200MG	24
NEXTSTELLIS TAB 3-14.2MG	69
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	33
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	33
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	33
<i>niacor tab 500mg</i>	33
<i>nicardipine hcl cap 20 mg</i>	36
<i>nicardipine hcl cap 30 mg</i>	36
NICOTROL INH	62
NICOTROL NS SPR 10MG/ML	62
<i>nifedipine tab er 24hr 30 mg</i>	36
<i>nifedipine tab er 24hr 60 mg</i>	36
<i>nifedipine tab er 24hr 90 mg</i>	36
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	36
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	36
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	36
<i>nikki tab 3-0.02mg</i>	69
<i>nilutamide tab 150 mg</i>	18
<i>nimodipine cap 30 mg</i>	36
NINLARO CAP 2.3MG	24
NINLARO CAP 3MG.....	24
NINLARO CAP 4MG	24
NIPENT INJ 10MG.....	20
<i>nisoldipine tab er 24hr 17 mg</i>	36
<i>nisoldipine tab er 24hr 20 mg</i>	36
<i>nisoldipine tab er 24hr 25.5 mg</i>	36
<i>nisoldipine tab er 24hr 30 mg</i>	36
<i>nisoldipine tab er 24hr 34 mg</i>	36
<i>nisoldipine tab er 24hr 40 mg</i>	36
<i>nisoldipine tab er 24hr 8.5 mg</i>	36
<i>nitazoxanide tab 500 mg</i>	5
<i>nitisinone cap 10 mg</i>	74
<i>nitisinone cap 2 mg</i>	74
<i>nitisinone cap 5 mg</i>	74
NITRO-BID OIN 2%.....	39
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	6

<i>nitrofurantoin macrocrystalline cap 25 mg</i>	5	<i>norethindrone tab 0.35 mg</i>	70
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	6	<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	70
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	6	<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	70
NITROGLYCER INJ 5MG/ML.....	39	<i>norlyroc tab 0.35mg</i>	70
<i>nitroglycerin sl tab 0.3 mg</i>	39	NORPACE CAP 100MG CR.....	31
<i>nitroglycerin sl tab 0.4 mg</i>	39	NORPACE CAP 150MG CR.....	31
<i>nitroglycerin sl tab 0.6 mg</i>	39	<i>nortrel tab 0.5/35</i>	70
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	39	<i>nortrel tab 1/35</i>	70
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	39	<i>nortrel tab 7/7/7</i>	70
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	39	<i>nortriptyline hcl cap 10 mg</i>	49
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	39	<i>nortriptyline hcl cap 25 mg</i>	49
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	39	<i>nortriptyline hcl cap 50 mg</i>	49
NITROSTAT SUB 0.3MG.....	39	<i>nortriptyline hcl cap 75 mg</i>	49
NITROSTAT SUB 0.4MG.....	39	<i>nortriptyline hcl soln 10 mg/5ml</i>	49
NITROSTAT SUB 0.6MG.....	39	NORVIR POW 100MG	8
NIVESTYM INJ 300/0.5	86	NORVIR SOL 80MG/ML.....	8
NIVESTYM INJ 300MCG	86	NORVIR TAB 100MG	8
NIVESTYM INJ 480/0.8	86	NOURIANZ TAB 20MG.....	51
NIVESTYM INJ 480MCG	86	NOURIANZ TAB 40MG.....	51
<i>nizatidine cap 150 mg</i>	81	NOXAFIL SUS 40MG/ML	7
<i>nizatidine cap 300 mg</i>	81	<i>np thyroid tab 120mg</i>	78
<i>nora-be tab 0.35mg</i>	69	<i>np thyroid tab 15mg</i>	78
NORDITROPIN INJ 10/1.5ML.....	74	<i>np thyroid tab 30mg</i>	78
NORDITROPIN INJ 15/1.5ML.....	74	<i>np thyroid tab 60mg</i>	78
NORDITROPIN INJ 30/3ML	74	<i>np thyroid tab 90mg</i>	78
NORDITROPIN INJ 5/1.5ML	74	NUBEQA TAB 300MG	18
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	69	NUEDEXTA CAP 20-10MG	59
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	69	NULOJIX INJ 250MG	90
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	70	NUPLAZID CAP 34MG.....	54
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	70	NUPLAZID TAB 10MG.....	54
<i>norethindrone acetate tab 5 mg</i>	76	NUZYRA INJ 100MG.....	16
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	72	NUZYRA TAB 150MG.....	16
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	72	<i>nyamyc pow 100000</i>	102
		<i>nylia tab 1/35</i>	70
		<i>nylia tab 7/7/7</i>	70
		<i>nymyo tab 0.25-35</i>	70
		<i>nystatin cream 100000 unit/gm</i>	102
		<i>nystatin oint 100000 unit/gm</i>	102
		<i>nystatin susp 100000 unit/ml</i>	105
		<i>nystatin tab 500000 unit</i>	7
		<i>nystatin topical powder 100000 unit/gm</i>	102
		<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	102

nystatin-triamcinolone oint 100000-0.1 unit/gm-%.....102
nystop pow 100000102
○
 OCTAGAM INJ 1GM.....89
 OCTAGAM INJ 2GM/20ML89
octreotide acetate inj 100 mcg/ml (0.1 mg/ml)75
octreotide acetate inj 1000 mcg/ml (1 mg/ml)75
octreotide acetate inj 200 mcg/ml (0.2 mg/ml)75
octreotide acetate inj 50 mcg/ml (0.05 mg/ml)74
octreotide acetate inj 500 mcg/ml (0.5 mg/ml)75
 ODACTRA SUB89
 ODEFSEY TAB10
 ODOMZO CAP 200MG24
 OFEV CAP 100MG99
 OFEV CAP 150MG99
ofloxacin ophth soln 0.3%94
ofloxacin otic soln 0.3%97
ofloxacin tab 300 mg14
ofloxacin tab 400 mg14
olanzapine for im inj 10 mg54
olanzapine orally disintegrating tab 10 mg54
olanzapine orally disintegrating tab 15 mg54
olanzapine orally disintegrating tab 20 mg54
olanzapine orally disintegrating tab 5 mg54
olanzapine tab 10 mg54
olanzapine tab 15 mg54
olanzapine tab 2.5 mg54
olanzapine tab 20 mg54
olanzapine tab 5 mg54
olanzapine tab 7.5 mg54
olmesartan medoxomil tab 20 mg30
olmesartan medoxomil tab 40 mg30
olmesartan medoxomil tab 5 mg30
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg29

olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg29
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg .29
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg30
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg30
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg30
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg30
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg30
olopatadine hcl nasal soln 0.6%97
olopatadine hcl ophth soln 0.1% (base equivalent)95
olopatadine hcl ophth soln 0.2% (base equivalent)95
omega-3-acid ethyl esters cap 1 gm .33
omeprazole cap delayed release 10 mg83
omeprazole cap delayed release 20 mg83
omeprazole cap delayed release 40 mg83
 OMNIPOD DASH MIS PODS66
 OMNIPOD MIS CLASSIC66
 OMNIPOD PDM KIT CLASSIC.....66
ondansetron hcl inj 40 mg/20ml (2 mg/ml)80
ondansetron hcl oral soln 4 mg/5ml..80
ondansetron hcl tab 4 mg.....80
ondansetron hcl tab 8 mg.....80
ondansetron orally disintegrating tab 4 mg80
ondansetron orally disintegrating tab 8 mg80
 ONUREG TAB 200MG20
 ONUREG TAB 300MG20
 OPSUMIT TAB 10MG40

ORFADIN CAP 20MG	75	<i>oxybutynin chloride tab er 24hr 10 mg</i>	
ORFADIN SUS 4MG/ML	75	.....	84
ORGOVYX TAB 120MG	18	<i>oxybutynin chloride tab er 24hr 15 mg</i>	
ORIAHNN CAP.....	72	.....	84
ORKAMBI GRA 100-125	99	<i>oxybutynin chloride tab er 24hr 5 mg</i>	
ORKAMBI GRA 150-188	99	.....	84
ORKAMBI GRA 75-94MG.....	99	<i>oxycodone hcl conc 100 mg/5ml (20</i>	
ORKAMBI TAB 100-125	99	<i>mg/ml)</i>	4
ORKAMBI TAB 200-125	99	<i>oxycodone hcl soln 5 mg/5ml</i>	4
ORLADEYO CAP 110MG	87	<i>oxycodone hcl tab 10 mg</i>	4
ORLADEYO CAP 150MG	87	<i>oxycodone hcl tab 15 mg</i>	4
ORTIKOS CAP 6MG ER	81	<i>oxycodone hcl tab 20 mg</i>	4
ORTIKOS CAP 9MG ER	81	<i>oxycodone hcl tab 30 mg</i>	4
<i>oseltamivir phosphate cap 30 mg (base</i>		<i>oxycodone hcl tab 5 mg</i>	4
<i>equiv)</i>	11	<i>oxycodone hcl tab er 12hr deter 10 mg</i>	
<i>oseltamivir phosphate cap 45 mg (base</i>		.....	2
<i>equiv)</i>	11	<i>oxycodone hcl tab er 12hr deter 20 mg</i>	
<i>oseltamivir phosphate cap 75 mg (base</i>		.....	2
<i>equiv)</i>	11	<i>oxycodone hcl tab er 12hr deter 40 mg</i>	
<i>oseltamivir phosphate for susp 6</i>		.....	2
<i>mg/ml (base equiv)</i>	11	<i>oxycodone hcl tab er 12hr deter 80 mg</i>	
OTEZLA TAB 10/20/30	88	.....	2
OTEZLA TAB 30MG	88	<i>oxycodone w/ acetaminophen tab 10-</i>	
<i>oxacillin sodium for inj 1 gm (base</i>		<i>325 mg</i>	4
<i>equivalent)</i>	15	<i>oxycodone w/ acetaminophen tab 2.5-</i>	
<i>oxacillin sodium for inj 2 gm (base</i>		<i>325 mg</i>	4
<i>equivalent)</i>	15	<i>oxycodone w/ acetaminophen tab 5-</i>	
<i>oxacillin sodium for iv soln 10 gm</i>		<i>325 mg</i>	4
<i>(base equivalent)</i>	15	<i>oxycodone w/ acetaminophen tab 7.5-</i>	
<i>oxaliplatin for iv inj 100 mg</i>	17	<i>325 mg</i>	4
<i>oxaliplatin iv soln 100 mg/20ml</i>	17	OXYCONTIN TAB 10MG ER	2
<i>oxaliplatin iv soln 50 mg/10ml</i>	17	OXYCONTIN TAB 15MG ER	2
<i>oxandrolone tab 10 mg</i>	62	OXYCONTIN TAB 20MG ER	2
<i>oxandrolone tab 2.5 mg</i>	62	OXYCONTIN TAB 30MG ER	2
<i>oxazepam cap 10 mg.....</i>	41	OXYCONTIN TAB 40MG ER	2
<i>oxazepam cap 15 mg.....</i>	41	OXYCONTIN TAB 60MG ER	2
<i>oxazepam cap 30 mg.....</i>	41	OXYCONTIN TAB 80MG ER	2
OXBRYTA TAB 300MG	87	<i>oxymorphone hcl tab 10 mg</i>	4
OXBRYTA TAB 500MG	87	<i>oxymorphone hcl tab 5 mg</i>	4
<i>oxcarbazepine susp 300 mg/5ml (60</i>		OZEMPIC INJ 2/1.5ML.....	64
<i>mg/ml)</i>	44	OZEMPIC INJ 4MG/3ML	64
<i>oxcarbazepine tab 150 mg</i>	44	OZEMPIC INJ 8MG/3ML	64
<i>oxcarbazepine tab 300 mg</i>	44	P	
<i>oxcarbazepine tab 600 mg</i>	44	<i>pacerone tab 100mg.....</i>	31
OXERVATE SOL 20MCG/ML.....	96	<i>pacerone tab 200mg.....</i>	31
<i>oxybutynin chloride syrup 5 mg/5ml.</i>	84	<i>pacerone tab 400mg.....</i>	31
<i>oxybutynin chloride tab 5 mg.....</i>	84		

<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	20	PEMAZYRE TAB 9MG	24
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	20	PEN G PROC INJ 60000	15
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	20	PEN GK/DEXTR INJ 20000/ML	15
<i>paliperidone tab er 24hr 1.5 mg</i>	54	PEN GK/DEXTR INJ 40000/ML	15
<i>paliperidone tab er 24hr 3 mg</i>	54	PEN GK/DEXTR INJ 60000/ML	15
<i>paliperidone tab er 24hr 6 mg</i>	55	<i>penicillamine tab 250 mg</i>	67
<i>paliperidone tab er 24hr 9 mg</i>	55	<i>penicillin g potassium for inj 20000000 unit</i>	15
<i>pamidronate disodium iv soln 3 mg/ml</i>	66	<i>penicillin g sodium for inj 5000000 unit</i>	15
<i>pamidronate disodium iv soln 9 mg/ml</i>	66	<i>penicillin v potassium for soln 125 mg/5ml</i>	15
PANRETIN GEL 0.1%	105	<i>penicillin v potassium for soln 250 mg/5ml</i>	15
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	83	<i>penicillin v potassium tab 250 mg</i>	15
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	83	<i>penicillin v potassium tab 500 mg</i>	15
PANZYGA SOL 10/100ML	89	PENTACEL INJ	91
PANZYGA SOL 1GM/10ML	89	<i>pentamidine isethionate for inj soln 300 mg</i>	6
PANZYGA SOL 2.5/25ML	89	<i>pentamidine isethionate for nebulization soln 300 mg</i>	6
PANZYGA SOL 20/200ML	89	<i>pentoxifylline tab er 400 mg</i>	87
PANZYGA SOL 30/300ML	89	<i>perindopril erbumine tab 2 mg</i>	28
PANZYGA SOL 5GM/50ML	89	<i>perindopril erbumine tab 4 mg</i>	28
<i>paricalcitol cap 1 mcg</i>	79	<i>perindopril erbumine tab 8 mg</i>	28
<i>paricalcitol cap 2 mcg</i>	79	<i>periogard sol 0.12%</i>	105
<i>paricalcitol cap 4 mcg</i>	79	PERJETA INJ 420/14ML	24
<i>paricalcitol iv soln 2 mcg/ml</i>	79	<i>permethrin cream 5%</i>	105
<i>paramomycin sulfate cap 250 mg</i>	6	<i>perphenazine tab 16 mg</i>	55
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	49	<i>perphenazine tab 2 mg</i>	55
<i>paroxetine hcl tab 10 mg</i>	49	<i>perphenazine tab 4 mg</i>	55
<i>paroxetine hcl tab 20 mg</i>	49	<i>perphenazine tab 8 mg</i>	55
<i>paroxetine hcl tab 30 mg</i>	49	PERSERIS INJ 120MG	55
<i>paroxetine hcl tab 40 mg</i>	49	PERSERIS INJ 90MG	55
<i>paroxetine hcl tab er 24hr 12.5 mg</i> ..	49	<i>pfizerpen inj 20000000</i>	15
<i>paroxetine hcl tab er 24hr 25 mg</i>	49	<i>phenelzine sulfate tab 15 mg</i>	49
<i>paroxetine hcl tab er 24hr 37.5 mg</i> ..	49	<i>phenobarbital elixir 20 mg/5ml</i>	44
PASER GRA 4GM	10	<i>phenobarbital tab 100 mg</i>	44
PEDIARIX INJ 0.5ML	91	<i>phenobarbital tab 15 mg</i>	44
PEDVAX HIB INJ	91	<i>phenobarbital tab 16.2 mg</i>	44
<i>peg/nasul/c/ sol nacl/pot</i>	82	<i>phenobarbital tab 30 mg</i>	44
PEGASYS INJ	11	<i>phenobarbital tab 32.4 mg</i>	44
PEGASYS INJ 180MCG/M	11	<i>phenobarbital tab 60 mg</i>	44
PEMAZYRE TAB 13.5MG	24	<i>phenobarbital tab 64.8 mg</i>	44
PEMAZYRE TAB 4.5MG	24	<i>phenobarbital tab 97.2 mg</i>	44
		<i>phenytoin chew tab 50 mg</i>	44

<i>phenytoin sodium extended cap 100 mg</i>	44	<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	94
<i>phenytoin sodium extended cap 200 mg</i>	44	POMALYST CAP 1MG	19
<i>phenytoin sodium extended cap 300 mg</i>	44	POMALYST CAP 2MG	19
<i>phenytoin sodium inj 50 mg/ml</i>	44	POMALYST CAP 3MG	19
<i>phenytoin susp 125 mg/5ml</i>	44	POMALYST CAP 4MG	19
PIFELTRO TAB 100MG	8	<i>portia-28 tab</i>	70
<i>pilocarpine hcl ophth soln 1%</i>	96	<i>posaconazole tab delayed release 100 mg</i>	7
<i>pilocarpine hcl ophth soln 2%</i>	96	POT CHL/NACL INJ 20MEQ/L.....	92
<i>pilocarpine hcl ophth soln 4%</i>	96	POT CHL/NACL INJ 40MEQ/L.....	92
<i>pilocarpine hcl tab 5 mg</i>	105	POT CHLORIDE INJ 10MEQ	92
<i>pilocarpine hcl tab 7.5 mg</i>	105	POT CHLORIDE INJ 20MEQ	92
<i>pimecrolimus cream 1%</i>	105	POT CHLORIDE INJ 40MEQ	92
<i>pimozide tab 1 mg</i>	55	<i>pot chloride tab 25meq ef</i>	93
<i>pimozide tab 2 mg</i>	55	<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	92
<i>pimtrea tab</i>	70	<i>potassium chloride cap er 10 meq</i>	93
<i>pindolol tab 10 mg</i>	35	<i>potassium chloride cap er 8 meq</i>	93
<i>pindolol tab 5 mg</i>	35	<i>potassium chloride inj 2 meq/ml</i>	93
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	64	<i>potassium chloride microencapsulated crys er tab 10 meq</i>	93
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	64	<i>potassium chloride microencapsulated crys er tab 15 meq</i>	93
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	64	<i>potassium chloride microencapsulated crys er tab 20 meq</i>	93
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	64	<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	93
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	64	<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	93
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	15	<i>potassium chloride tab er 10 meq</i>	93
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	16	<i>potassium chloride tab er 20 meq (1500 mg)</i>	93
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	16	<i>potassium chloride tab er 8 meq (600 mg)</i>	93
PIQRAY 200MG TAB DOSE.....	24	<i>potassium citrate tab er 10 meq (1080 mg)</i>	83
PIQRAY 250MG TAB DOSE.....	24	<i>potassium citrate tab er 15 meq (1620 mg)</i>	83
PIQRAY 300MG TAB DOSE.....	24	<i>potassium citrate tab er 5 meq (540 mg)</i>	83
<i>pirfenidone tab 267 mg</i>	99	PRADAXA CAP 110MG	85
<i>pirfenidone tab 801 mg</i>	99	PRADAXA CAP 150MG	85
<i>pirmella tab 1/35</i>	70	PRADAXA CAP 75MG.....	85
PLASMA-LYTE INJ -148	92	PRALUENT INJ 150MG/ML	33
PLASMA-LYTE INJ -A.....	92	PRALUENT INJ 75MG/ML	33
PLEGRIDY INJ	60		
PLEGRIDY INJ PEN.....	60		
<i>podofilox soln 0.5%</i>	105		

<i>pramipexole dihydrochloride tab 0.125 mg</i>	51	<i>pregabalin cap 50 mg</i>	44
<i>pramipexole dihydrochloride tab 0.25 mg</i>	51	<i>pregabalin cap 75 mg</i>	44
<i>pramipexole dihydrochloride tab 0.5 mg</i>	51	<i>pregabalin soln 20 mg/ml</i>	44
<i>pramipexole dihydrochloride tab 0.75 mg</i>	51	PREHEVBRIO SUS 10MCG/ML	91
<i>pramipexole dihydrochloride tab 1 mg</i>	51	PREMARIN INJ 25MG	72
<i>pramipexole dihydrochloride tab 1.5 mg</i>	51	PREMARIN TAB 0.3MG	72
<i>prasugrel hcl tab 10 mg (base equiv)</i>	87	PREMARIN TAB 0.45MG	72
<i>prasugrel hcl tab 5 mg (base equiv)</i>	.87	PREMARIN TAB 0.625MG.....	72
<i>pravastatin sodium tab 10 mg</i>	32	PREMARIN TAB 0.9MG	72
<i>pravastatin sodium tab 20 mg</i>	32	PREMARIN TAB 1.25MG	72
<i>pravastatin sodium tab 40 mg</i>	32	PREMARIN VAG CRE 0.625MG.....	72
<i>pravastatin sodium tab 80 mg</i>	32	PREMASOL SOL 10%	93
<i>praziquantel tab 600 mg</i>	6	PREMPRO TAB.....	72
<i>prazosin hcl cap 1 mg</i>	28	PREMPRO TAB 0.3-1.5	72
<i>prazosin hcl cap 2 mg</i>	28	PREMPRO TAB 0.45-1.5	72
<i>prazosin hcl cap 5 mg</i>	28	PREMPRO TAB 0.625-5	72
PRED MILD SUS 0.12% OP	95	PRETOMANID TAB 200MG	10
PRED SOD PHO SOL 1% OP.....	95	<i>prevalite pow 4gm pk</i>	33
PRED-G S.O.P OIN OP.....	94	PREVYMIS TAB 240MG.....	11
PRED-G SUS OP	94	PREVYMIS TAB 480MG.....	11
<i>prednisolone acetate ophth susp 1%</i>	95	PREZCOBIX TAB 800-150.....	10
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	73	PREZISTA SUS 100MG/ML.....	8
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	73	PREZISTA TAB 150MG	8
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	73	PREZISTA TAB 600MG	8
PREDNISON CON 5MG/ML	73	PREZISTA TAB 75MG	8
<i>prednisone oral soln 5 mg/5ml</i>	73	PREZISTA TAB 800MG	8
<i>prednisone tab 1 mg</i>	73	PRIFTIN TAB 150MG	10
<i>prednisone tab 10 mg</i>	73	PRIMAQUINE TAB 26.3MG	7
<i>prednisone tab 2.5 mg</i>	73	<i>primidone tab 250 mg</i>	44
<i>prednisone tab 20 mg</i>	73	<i>primidone tab 50 mg</i>	44
<i>prednisone tab 5 mg</i>	73	PRIORIX INJ	91
<i>prednisone tab 50 mg</i>	73	PRIVIGEN INJ 20GRAMS	89
<i>pregabalin cap 100 mg</i>	44	<i>probenecid tab 500 mg</i>	1
<i>pregabalin cap 150 mg</i>	44	<i>procainamide hcl inj 100 mg/ml</i>	31
<i>pregabalin cap 200 mg</i>	44	<i>prochlorperazine edisylate inj 10 mg/2ml</i>	80
<i>pregabalin cap 225 mg</i>	44	<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	80
<i>pregabalin cap 25 mg</i>	44	<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	80
<i>pregabalin cap 300 mg</i>	44	<i>prochlorperazine suppos 25 mg</i>	80
		PROCRIT INJ 10000/ML.....	86
		PROCRIT INJ 2000/ML	86
		PROCRIT INJ 20000/ML.....	86
		PROCRIT INJ 3000/ML	86
		PROCRIT INJ 4000/ML	86
		PROCRIT INJ 40000/ML.....	86

<i>procto-med cre hc 2.5%</i>	105	PROQUAD INJ	91
<i>procto-pak cre 1%</i>	105	PROSOL INJ 20%	93
<i>proctosol hc cre 2.5%</i>	105	<i>protriptyline hcl tab 10 mg</i>	49
<i>proctozone cre -hc 2.5%</i>	105	<i>protriptyline hcl tab 5 mg</i>	49
PROCYSBI GRA 300MG	75	PULMICORT INH 180MCG	100
PROCYSBI GRA 75MG	75	PULMICORT INH 90MCG.....	100
<i>progesterone cap 100 mg</i>	76	PULMOZYME SOL 1MG/ML	99
<i>progesterone cap 200 mg</i>	76	PURIXAN SUS 20MG/ML.....	18
PROGRAF GRA 0.2MG	90	<i>pyrazinamide tab 500 mg</i>	10
PROGRAF GRA 1MG	90	<i>pyridostigmine bromide tab 60 mg</i> ...	59
PROGRAF INJ 5MG/ML	90	<i>pyridostigmine bromide tab er 180 mg</i>	59
PROLASTIN-C INJ 1000MG	99	<i>pyrimethamine tab 25 mg</i>	6
PROLENSA SOL 0.07%.....	95	Q	
PROLEUKIN INJ 22MU	20	QBREXZA PAD 2.4%	105
PROLIA INJ 60MG/ML.....	66	QINLOCK TAB 50MG	24
PROMACTA PAK 25MG.....	87	QUADRACEL INJ.....	91
PROMACTA POW 12.5MG.....	87	QUADRACEL INJ 0.5ML	91
PROMACTA TAB 12.5MG.....	87	<i>quetiapine fumarate tab 100 mg</i>	55
PROMACTA TAB 25MG.....	87	<i>quetiapine fumarate tab 150 mg</i>	55
PROMACTA TAB 50MG.....	87	<i>quetiapine fumarate tab 200 mg</i>	55
PROMACTA TAB 75MG.....	87	<i>quetiapine fumarate tab 25 mg</i>	55
<i>promethazine hcl inj 25 mg/ml</i>	80	<i>quetiapine fumarate tab 300 mg</i>	55
<i>promethazine hcl inj 50 mg/ml</i>	80	<i>quetiapine fumarate tab 400 mg</i>	55
<i>promethazine hcl suppos 12.5 mg</i> ...	80	<i>quetiapine fumarate tab 50 mg</i>	55
<i>promethazine hcl suppos 25 mg</i>	80	<i>quetiapine fumarate tab er 24hr 150</i> <i>mg</i>	55
<i>promethazine hcl syrup 6.25 mg/5ml</i>	80	<i>quetiapine fumarate tab er 24hr 200</i> <i>mg</i>	55
<i>promethazine hcl tab 12.5 mg</i>	80	<i>quetiapine fumarate tab er 24hr 300</i> <i>mg</i>	55
<i>promethazine hcl tab 25 mg</i>	80	<i>quetiapine fumarate tab er 24hr 400</i> <i>mg</i>	55
<i>promethazine hcl tab 50 mg</i>	80	<i>quetiapine fumarate tab er 24hr 50 mg</i>	55
<i>promethegan sup 25mg</i>	80	<i>quinapril hcl tab 10 mg</i>	28
<i>promethegan sup 50mg</i>	80	<i>quinapril hcl tab 20 mg</i>	28
<i>propafenone hcl cap er 12hr 225 mg</i>	31	<i>quinapril hcl tab 40 mg</i>	28
<i>propafenone hcl cap er 12hr 325 mg</i>	31	<i>quinapril hcl tab 5 mg</i>	28
<i>propafenone hcl cap er 12hr 425 mg</i>	31	<i>quinapril-hydrochlorothiazide tab 10-</i> <i>12.5 mg</i>	27
<i>propafenone hcl tab 150 mg</i>	31	<i>quinapril-hydrochlorothiazide tab 20-</i> <i>12.5 mg</i>	27
<i>propafenone hcl tab 225 mg</i>	31	<i>quinapril-hydrochlorothiazide tab 20-25</i> <i>mg</i>	27
<i>propafenone hcl tab 300 mg</i>	31	<i>quinidine gluconate tab er 324 mg</i> ...	31
<i>propranolol hcl cap er 24hr 120 mg</i> ..	35	<i>quinidine sulfate tab 200 mg</i>	31
<i>propranolol hcl cap er 24hr 160 mg</i> ..	35		
<i>propranolol hcl cap er 24hr 60 mg</i>	35		
<i>propranolol hcl cap er 24hr 80 mg</i>	35		
<i>propranolol hcl tab 10 mg</i>	35		
<i>propranolol hcl tab 20 mg</i>	35		
<i>propranolol hcl tab 40 mg</i>	35		
<i>propranolol hcl tab 60 mg</i>	35		
<i>propranolol hcl tab 80 mg</i>	35		
<i>propylthiouracil tab 50 mg</i>	78		

<i>quinidine sulfate tab 300 mg</i>	31	RETACRIT INJ 40000UNT	86
<i>quinine sulfate cap 324 mg</i>	7	RETACRIT INJ 4000UNIT	86
R		RETEVMO CAP 40MG	24
RABAVERT INJ	91	RETEVMO CAP 80MG	24
<i>rabeprazole sodium ec tab 20 mg</i>	83	RETROVIR INJ 10MG/ML	8
<i>raloxifene hcl tab 60 mg</i>	75	REVLIMID CAP 10MG	19
<i>ramelteon tab 8 mg</i>	57	REVLIMID CAP 15MG	19
<i>ramipril cap 1.25 mg</i>	28	REVLIMID CAP 2.5MG	19
<i>ramipril cap 10 mg</i>	28	REVLIMID CAP 20MG	19
<i>ramipril cap 2.5 mg</i>	28	REVLIMID CAP 25MG	19
<i>ramipril cap 5 mg</i>	28	REVLIMID CAP 5MG	19
<i>ranitidine hcl inj 150 mg/6ml (25</i> <i>mg/ml)</i>	81	REXULTI TAB 0.25MG	55
<i>ranitidine hcl inj 50 mg/2ml (25</i> <i>mg/ml)</i>	81	REXULTI TAB 0.5MG	55
<i>ranolazine tab er 12hr 1000 mg</i>	39	REXULTI TAB 1MG.....	55
<i>ranolazine tab er 12hr 500 mg</i>	39	REXULTI TAB 2MG	55
<i>rasagiline mesylate tab 0.5 mg (base</i> <i>equiv)</i>	51	REXULTI TAB 3MG.....	55
<i>rasagiline mesylate tab 1 mg (base</i> <i>equiv)</i>	51	REXULTI TAB 4MG.....	55
RAVICTI LIQ 1.1GM/ML	75	REYATAZ POW 50MG	8
RAYALDEE CAP 30MCG.....	79	REZUROCK TAB 200MG.....	24
REBIF INJ 22/0.5	60	RHOPRESSA SOL 0.02%	96
REBIF INJ 44/0.5	60	<i>ribavirin cap 200 mg</i>	11
REBIF REBIDO INJ 22/0.5	60	<i>ribavirin tab 200 mg</i>	11
REBIF REBIDO INJ 44/0.5	60	RIDAURA CAP 3MG.....	88
REBIF REBIDO INJ TITRATN.....	60	<i>rifabutin cap 150 mg</i>	10
REBIF TITRTN INJ PACK	60	<i>rifampin cap 150 mg</i>	10
<i>reclipsen tab</i>	70	<i>rifampin cap 300 mg</i>	10
RECOMBIVA HB INJ 10MCG/ML	91	<i>rifampin for inj 600 mg</i>	10
RECOMBIVA HB INJ 5MCG/0.5	91	<i>riluzole tab 50 mg</i>	59
RECOMBIVA-HB INJ 40MCG/ML.....	91	<i>rimantadine hydrochloride tab 100 mg</i>	11
RECTIV OIN 0.4%	105	<i>ringer's solution</i>	93
REGRANEX GEL 0.01%.....	105	<i>ringer's solution for irrigation</i>	105
RELENZA MIS DISKHALE	11	RINVOQ TAB 15MG ER.....	88
RELISTOR INJ 12/0.6ML.....	82	RINVOQ TAB 30MG ER.....	88
RELISTOR INJ 8/0.4ML.....	82	RINVOQ TAB 45MG ER.....	88
<i>repaglinide tab 0.5 mg</i>	64	<i>risedronate sodium tab 150 mg</i>	66
<i>repaglinide tab 1 mg</i>	64	<i>risedronate sodium tab 30 mg</i>	66
<i>repaglinide tab 2 mg</i>	64	<i>risedronate sodium tab 35 mg</i>	66
RESTASIS EMU 0.05% OP	96	<i>risedronate sodium tab 5 mg</i>	66
RESTASIS MUL EMU 0.05% OP	96	<i>risedronate sodium tab delayed release</i> <i>35 mg</i>	67
RETACRIT INJ 10000UNT	86	RISPERDAL INJ 12.5MG	55
RETACRIT INJ 20000UNI	86	RISPERDAL INJ 25MG	55
RETACRIT INJ 2000UNIT	86	RISPERDAL INJ 37.5MG	55
RETACRIT INJ 3000UNIT	86	RISPERDAL INJ 50MG	55
		<i>risperidone orally disintegrating tab</i> <i>0.25 mg</i>	55

<i>risperidone orally disintegrating tab 0.5 mg</i>	55	<i>ropinirole hydrochloride tab 3 mg</i>	51
<i>risperidone orally disintegrating tab 1 mg</i>	55	<i>ropinirole hydrochloride tab 4 mg</i>	51
<i>risperidone orally disintegrating tab 2 mg</i>	55	<i>ropinirole hydrochloride tab 5 mg</i>	52
<i>risperidone orally disintegrating tab 3 mg</i>	55	<i>rosuvastatin calcium tab 10 mg</i>	32
<i>risperidone orally disintegrating tab 4 mg</i>	55	<i>rosuvastatin calcium tab 20 mg</i>	32
<i>risperidone soln 1 mg/ml</i>	55	<i>rosuvastatin calcium tab 40 mg</i>	32
<i>risperidone tab 0.25 mg</i>	56	<i>rosuvastatin calcium tab 5 mg</i>	32
<i>risperidone tab 0.5 mg</i>	55	ROTARIX SUS	91
<i>risperidone tab 1 mg</i>	56	ROTATEQ SOL.....	91
<i>risperidone tab 2 mg</i>	56	<i>roweepra tab 500mg</i>	44
<i>risperidone tab 3 mg</i>	56	ROZLYTREK CAP 100MG.....	24
<i>risperidone tab 4 mg</i>	56	ROZLYTREK CAP 200MG.....	24
<i>ritonavir tab 100 mg</i>	9	RUBRACA TAB 200MG.....	24
RITUXAN INJ 100MG.....	24	RUBRACA TAB 250MG.....	24
RITUXAN INJ 500MG.....	24	RUBRACA TAB 300MG.....	24
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	46	RUCONEST INJ 2100UNIT	87
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	46	<i>rufinamide susp 40 mg/ml</i>	44
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	46	<i>rufinamide tab 200 mg</i>	44
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	46	<i>rufinamide tab 400 mg</i>	44
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	46	RUKOBIA TAB 600MG ER.....	9
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	46	RYBELSUS TAB 14MG	64
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	46	RYBELSUS TAB 3MG	64
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	58	RYBELSUS TAB 7MG	64
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	58	RYDAPT CAP 25MG	24
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	58	RYTARY CAP 145MG	52
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	58	RYTARY CAP 195MG	52
ROCKLATAN DRO	96	RYTARY CAP 245MG	52
<i>ropinirole hydrochloride tab 0.25 mg</i> 51		RYTARY CAP 95MG	52
<i>ropinirole hydrochloride tab 0.5 mg</i> ..51		S	
<i>ropinirole hydrochloride tab 1 mg</i>	51	<i>salsalate tab 500 mg</i>	1
<i>ropinirole hydrochloride tab 2 mg</i>	51	<i>salsalate tab 750 mg</i>	1
		SANCUSO DIS 3.1MG	80
		SANDOSTATIN KIT LAR 10MG.....	75
		SANDOSTATIN KIT LAR 20MG.....	75
		SANDOSTATIN KIT LAR 30MG.....	75
		SANTYL OIN 250/GM	105
		<i>sapropterin dihydrochloride powder packet 100 mg</i>	75
		<i>sapropterin dihydrochloride powder packet 500 mg</i>	75
		<i>sapropterin dihydrochloride tab 100 mg</i>	75
		SCEMBLIX TAB 20MG.....	24
		SCEMBLIX TAB 40MG.....	24
		<i>scopolamine td patch 72hr 1 mg/3days</i>	80
		SECUADO DIS 3.8MG	56

SECUADO DIS 5.7MG.....	56	SIRTURO TAB 100MG	10
SECUADO DIS 7.6MG.....	56	SIRTURO TAB 20MG	10
<i>selegiline hcl cap 5 mg</i>	52	SKYRIZI INJ 150DOSE	88
<i>selegiline hcl tab 5 mg</i>	52	SKYRIZI INJ 150MG/ML	88
<i>selenium sulfide lotion 2.5%</i>	102	SKYRIZI INJ 360/2.4	88
SELZENTRY SOL 20MG/ML.....	9	SKYRIZI PEN INJ 150MG/ML.....	88
SELZENTRY TAB 25MG.....	9	SLYND TAB 4MG	70
SELZENTRY TAB 75MG.....	9	<i>sod sulfate-pot sulf-mg sulf oral sol</i>	
SEREVENT DIS AER 50MCG	98	<i>17.5-3.13-1.6 gm/177ml</i>	82
<i>sertraline hcl oral concentrate for</i>		<i>sodium chloride irrigation soln 0.9%</i>	
<i>solution 20 mg/ml</i>	49	.....	105
<i>sertraline hcl tab 100 mg</i>	49	<i>sodium chloride iv soln 0.45%</i>	93
<i>sertraline hcl tab 25 mg</i>	49	<i>sodium chloride iv soln 0.9%</i>	93
<i>sertraline hcl tab 50 mg</i>	49	<i>sodium chloride iv soln 3%</i>	93
<i>setlakin tab</i>	70	<i>sodium fluoride 2.2 mg</i>	93
<i>sevelamer carbonate packet 0.8 gm</i> .	76	<i>sodium polystyrene sulfonate powder</i>	
<i>sevelamer carbonate packet 2.4 gm</i> .	76	.....	67
<i>sevelamer carbonate tab 800 mg</i>	76	<i>solifenacin succinate tab 10 mg</i>	84
<i>sevelamer hcl tab 400 mg</i>	76	<i>solifenacin succinate tab 5 mg</i>	84
<i>sevelamer hcl tab 800 mg</i>	76	SOLTAMOX SOL 10MG/5ML	18
<i>sf 5000 plus cre 1.1%</i>	105	SOLU-CORTEF INJ 1000MG	73
<i>sharobel tab 0.35mg</i>	70	SOLU-CORTEF INJ 100MG	73
SHINGRIX INJ 50/0.5ML.....	91	SOLU-CORTEF INJ 250MG	73
SIGNIFOR INJ 0.3MG/ML.....	75	SOLU-CORTEF INJ 500MG	73
SIGNIFOR INJ 0.6MG/ML.....	75	SOLU-MEDROL INJ 1000MG.....	73
SIGNIFOR INJ 0.9MG/ML.....	75	SOLU-MEDROL INJ 125MG	73
SIGNIFOR LAR INJ 20MG.....	75	SOLU-MEDROL INJ 2GM	73
SIGNIFOR LAR INJ 40MG.....	75	SOLU-MEDROL INJ 40MG	73
SIGNIFOR LAR INJ 60MG.....	75	SOLU-MEDROL INJ 500MG	73
<i>sildenafil citrate for suspension 10</i>		SOMAVERT INJ 10MG	75
<i>mg/ml</i>	40	SOMAVERT INJ 15MG	75
<i>sildenafil citrate tab 20 mg</i>	40	SOMAVERT INJ 20MG	75
<i>silodosin cap 4 mg</i>	83	SOMAVERT INJ 25MG	75
<i>silodosin cap 8 mg</i>	83	SOMAVERT INJ 30MG	75
<i>silver sulfadiazine cream 1%</i>	101	<i>sorafenib tosylate tab 200 mg (base</i>	
SIMBRINZA SUS 1-0.2%	96	<i>equivalent)</i>	24
SIMULECT INJ 10MG.....	90	<i>sorine tab 120mg</i>	31
SIMULECT INJ 20MG	90	<i>sorine tab 160mg</i>	31
<i>simvastatin tab 10 mg</i>	33	<i>sorine tab 240mg</i>	31
<i>simvastatin tab 20 mg</i>	33	<i>sorine tab 80mg</i>	31
<i>simvastatin tab 40 mg</i>	33	<i>sotalol hcl (afib/afl) tab 120 mg</i>	32
<i>simvastatin tab 5 mg</i>	32	<i>sotalol hcl (afib/afl) tab 160 mg</i>	32
<i>simvastatin tab 80 mg</i>	33	<i>sotalol hcl (afib/afl) tab 80 mg</i>	31
<i>sirolimus oral soln 1 mg/ml</i>	90	<i>sotalol hcl tab 120 mg</i>	32
<i>sirolimus tab 0.5 mg</i>	90	<i>sotalol hcl tab 160 mg</i>	32
<i>sirolimus tab 1 mg</i>	90	<i>sotalol hcl tab 240 mg</i>	32
<i>sirolimus tab 2 mg</i>	90	<i>sotalol hcl tab 80 mg</i>	32

SOVALDI PAK 150MG.....	11	<i>sulfasalazin tab 500mg dr</i>	81
SOVALDI PAK 200MG.....	11	<i>sulfasalazine tab 500 mg</i>	81
SOVALDI TAB 400MG.....	11	<i>sumatriptan nasal spray 20 mg/act</i> ..	59
<i>spinosad susp 0.9%</i>	105	<i>sumatriptan nasal spray 5 mg/act</i>	58
<i>spironolactone & hydrochlorothiazide</i>		<i>sumatriptan succinate inj 6 mg/0.5ml</i>	
<i>tab 25-25 mg</i>	38	.....	59
<i>spironolactone tab 100 mg</i>	28	<i>sumatriptan succinate tab 100 mg</i> ...	59
<i>spironolactone tab 25 mg</i>	28	<i>sumatriptan succinate tab 25 mg</i>	59
<i>spironolactone tab 50 mg</i>	28	<i>sumatriptan succinate tab 50 mg</i>	59
<i>sprintec 28 tab 28 day</i>	70	<i>sunitinib malate cap 12.5 mg (base</i>	
SPRITAM TAB 1000MG.....	45	<i>equivalent)</i>	24
SPRITAM TAB 250MG.....	44	<i>sunitinib malate cap 25 mg (base</i>	
SPRITAM TAB 500MG.....	44	<i>equivalent)</i>	24
SPRITAM TAB 750MG.....	44	<i>sunitinib malate cap 37.5 mg (base</i>	
SPRYCEL TAB 100MG.....	24	<i>equivalent)</i>	24
SPRYCEL TAB 140MG.....	24	<i>sunitinib malate cap 50 mg (base</i>	
SPRYCEL TAB 20MG.....	24	<i>equivalent)</i>	25
SPRYCEL TAB 50MG.....	24	SUPRAX SUS 500/5ML	13
SPRYCEL TAB 70MG.....	24	SUPREP BOWEL SOL PREP KIT	82
SPRYCEL TAB 80MG.....	24	SYMBICORT AER 160-4.5	100
<i>sps sus 15gm/60</i>	67	SYMBICORT AER 80-4.5	100
<i>sronyx tab</i>	70	SYMDEKO TAB 50-75MG	99
<i>ssd cre 1%</i>	101	SYMLINPEN 60 INJ 1000MCG.....	64
STELARA INJ 45MG/0.5.....	88	SYMLN PEN 120 INJ 1000MCG	64
STELARA INJ 90MG/ML	88	SYMPAZAN MIS 10MG.....	45
STIVARGA TAB 40MG.....	24	SYMPAZAN MIS 20MG.....	45
<i>streptomycin sulfate for inj 1 gm</i>	6	SYMPAZAN MIS 5MG	45
STRIBILD TAB.....	10	SYMPROIC TAB 0.2MG	82
SUCRAID SOL 8500/ML.....	82	SYMTUZA TAB.....	10
<i>sucrafate susp 1 gm/10ml</i>	82	SYNAGIS INJ 100MG/ML	89
<i>sucrafate tab 1 gm</i>	82	SYNAGIS INJ 50MG	89
<i>sulfacetamide sodium lotion 10%</i>		SYNAREL SOL 2MG/ML.....	71
<i>(acne)</i>	101	SYNERCID INJ 500MG.....	6
<i>sulfacetamide sodium ophth oint 10%</i>		SYNJARDY TAB	64
.....	94	SYNJARDY TAB 12.5-500.....	64
<i>sulfacetamide sodium ophth soln 10%</i>		SYNJARDY TAB 5-1000MG	64
.....	94	SYNJARDY TAB 5-500MG.....	64
<i>sulfacetamide sodium-prednisolone</i>		SYNJARDY XR TAB.....	64
<i>ophth soln 10-0.23(0.25)%</i>	94	SYNJARDY XR TAB 10-1000.....	64
<i>sulfadiazine tab 500 mg</i>	6	SYNJARDY XR TAB 25-1000.....	64
<i>sulfamethoxazole-trimethoprim susp</i>		SYNJARDY XR TAB 5-1000MG	64
<i>200-40 mg/5ml</i>	6	SYNRIBO INJ 3.5MG	20
<i>sulfamethoxazole-trimethoprim tab</i>		SYNTHROID TAB 100MCG	78
<i>400-80 mg</i>	6	SYNTHROID TAB 112MCG	78
<i>sulfamethoxazole-trimethoprim tab</i>		SYNTHROID TAB 125MCG	78
<i>800-160 mg</i>	6	SYNTHROID TAB 137MCG	78
SULFAMYLON CRE 85MG/GM	101	SYNTHROID TAB 150MCG	78

SYNTHROID TAB 175MCG.....	78	<i>taztia xt cap 180mg/24</i>	36
SYNTHROID TAB 200MCG.....	78	<i>taztia xt cap 240mg/24</i>	36
SYNTHROID TAB 25MCG	78	<i>taztia xt cap 300mg er</i>	37
SYNTHROID TAB 300MCG.....	78	<i>taztia xt cap 360mg/24</i>	37
SYNTHROID TAB 50MCG	78	TAZVERIK TAB 200MG	25
SYNTHROID TAB 75MCG	78	TDVAX INJ 2-2 LF.....	91
SYNTHROID TAB 88MCG	78	TECENTRIQ INJ 1200/20	25
T		TEFLARO INJ 400MG.....	13
TABLOID TAB 40MG.....	18	TEFLARO INJ 600MG.....	13
TABRECTA TAB 150MG.....	25	TEGSEDI INJ 284/1.5	59
TABRECTA TAB 200MG.....	25	<i>telmisartan tab 20 mg</i>	30
<i>tacrolimus cap 0.5 mg</i>	90	<i>telmisartan tab 40 mg</i>	31
<i>tacrolimus cap 1 mg</i>	90	<i>telmisartan tab 80 mg</i>	31
<i>tacrolimus cap 5 mg</i>	91	<i>telmisartan-amlodipine tab 40-10 mg</i>	30
<i>tacrolimus oint 0.03%</i>	105	<i>telmisartan-amlodipine tab 40-5 mg</i> .	30
<i>tacrolimus oint 0.1%</i>	105	<i>telmisartan-amlodipine tab 80-10 mg</i>	30
<i>tadalafil tab 2.5 mg</i>	83	<i>telmisartan-amlodipine tab 80-5 mg</i> .	30
<i>tadalafil tab 20 mg (pah)</i>	40	<i>telmisartan-hydrochlorothiazide tab 40- 12.5 mg</i>	30
<i>tadalafil tab 5 mg</i>	83	<i>telmisartan-hydrochlorothiazide tab 80- 12.5 mg</i>	30
TAFINLAR CAP 50MG	25	<i>telmisartan-hydrochlorothiazide tab 80- 25 mg</i>	30
TAFINLAR CAP 75MG	25	<i>temazepam cap 15 mg</i>	58
TAGRISSE TAB 40MG	25	<i>temazepam cap 22.5 mg</i>	58
TAGRISSE TAB 80MG	25	<i>temazepam cap 30 mg</i>	58
TAKHZYRO INJ 300/2ML.....	87	<i>temazepam cap 7.5 mg</i>	58
TALICIA CAP.....	82	TEMIXYS TAB 300-300.....	10
TALTZ INJ 80MG/ML	88	<i>tencon tab 50-325mg</i>	1
TALZENNA CAP 0.25MG	25	TENIVAC INJ 5-2LF.....	91
TALZENNA CAP 0.5MG	25	<i>tenofovir disoproxil fumarate tab 300 mg</i>	9
TALZENNA CAP 0.75MG	25	TEPMETKO TAB 225MG	25
TALZENNA CAP 1MG	25	<i>terazosin hcl cap 1 mg (base equivalent)</i>	28
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	18	<i>terazosin hcl cap 10 mg (base equivalent)</i>	29
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	19	<i>terazosin hcl cap 2 mg (base equivalent)</i>	29
<i>tamsulosin hcl cap 0.4 mg</i>	83	<i>terazosin hcl cap 5 mg (base equivalent)</i>	29
TARGRETIN GEL 1%	105	<i>terbinafine hcl tab 250 mg</i>	7
<i>tarina 24 fe tab</i>	70	<i>terbutaline sulfate inj 1 mg/ml</i>	98
<i>tarina fe tab 1/20 eq</i>	70	<i>terbutaline sulfate tab 2.5 mg</i>	98
TASIGNA CAP 150MG.....	25	<i>terbutaline sulfate tab 5 mg</i>	98
TASIGNA CAP 200MG.....	25		
TASIGNA CAP 50MG	25		
TAVNEOS CAP 10MG.....	20		
<i>tazarotene cream 0.1%</i>	102		
<i>tazicef inj 1gm</i>	13		
<i>tazicef inj 2gm</i>	13		
<i>tazicef inj 6gm</i>	13		
<i>taztia xt cap 120mg/24</i>	36		

<i>terconazole vaginal cream 0.4%</i>	84	<i>tiadylt cap 120mg/24</i>	37
<i>terconazole vaginal cream 0.8%</i>	84	<i>tiadylt cap 180mg/24</i>	37
<i>terconazole vaginal suppos 80 mg</i> ...	84	<i>tiadylt cap 240mg/24</i>	37
TERIPARATIDE INJ	67	<i>tiadylt cap 300mg/24</i>	37
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	62	<i>tiadylt cap 360mg/24</i>	37
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	62	<i>tiadylt cap 420mg/24</i>	37
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	62	<i>tiagabine hcl tab 12 mg</i>	45
<i>testosterone td gel 10mg/act (2%)</i> ...62		<i>tiagabine hcl tab 16 mg</i>	45
<i>testosterone td gel 12.5 mg/act (1%)</i>	62	<i>tiagabine hcl tab 2 mg</i>	45
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	62	<i>tiagabine hcl tab 4 mg</i>	45
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	62	TIBSOVO TAB 250MG	25
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	62	TICOVAC INJ	91
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	62	TIGECYCLINE INJ 50MG	16
<i>testosterone td gel 50 mg/5gm (1%)</i> 62		<i>tilia fe tab</i>	70
<i>testosterone td soln 30 mg/act</i>	62	<i>timolol maleate ophth gel forming soln 0.25%</i>	96
<i>tetrabenazine tab 12.5 mg</i>	59	<i>timolol maleate ophth gel forming soln 0.5%</i>	96
<i>tetrabenazine tab 25 mg</i>	59	<i>timolol maleate ophth soln 0.25%</i> ...	96
<i>tetracycline hcl cap 250 mg</i>	16	<i>timolol maleate ophth soln 0.5%</i>	96
<i>tetracycline hcl cap 500 mg</i>	16	<i>timolol maleate preservative free ophth soln 0.5%</i>	96
THALOMID CAP 100MG	19	<i>timolol maleate tab 10 mg</i>	35
THALOMID CAP 150MG	19	<i>timolol maleate tab 20 mg</i>	35
THALOMID CAP 200MG	19	<i>timolol maleate tab 5 mg</i>	35
THALOMID CAP 50MG	19	<i>tinidazole tab 250 mg</i>	6
THEO-24 CAP 100MG CR.....	99	<i>tinidazole tab 500 mg</i>	6
THEO-24 CAP 200MG CR.....	99	<i>tiopronin tab 100 mg</i>	83
<i>theophylline tab er 12hr 300 mg</i>	99	TIROSINT CAP 100MCG	78
<i>theophylline tab er 12hr 450 mg</i>	99	TIROSINT CAP 112MCG	78
<i>theophylline tab er 24hr 400 mg</i>	99	TIROSINT CAP 125MCG	78
<i>theophylline tab er 24hr 600 mg</i>	99	TIROSINT CAP 137MCG	78
<i>thioridazine hcl tab 10 mg</i>	56	TIROSINT CAP 13MCG	78
<i>thioridazine hcl tab 100 mg</i>	56	TIROSINT CAP 150MCG	78
<i>thioridazine hcl tab 25 mg</i>	56	TIROSINT CAP 175MCG	78
<i>thioridazine hcl tab 50 mg</i>	56	TIROSINT CAP 200	78
<i>thiotepa for inj 15 mg</i>	17	TIROSINT CAP 25MCG	78
<i>thiothixene cap 1 mg</i>	56	TIROSINT CAP 50MCG	78
<i>thiothixene cap 10 mg</i>	56	TIROSINT CAP 75MCG	78
<i>thiothixene cap 2 mg</i>	56	TIROSINT CAP 88MCG	78
<i>thiothixene cap 5 mg</i>	56	TIROSINT-SOL SOL 100MCG	78
THYMOGLOBULN INJ 25MG.....	91	TIROSINT-SOL SOL 112MCG	79
		TIROSINT-SOL SOL 125MCG	79
		TIROSINT-SOL SOL 137MCG	79
		TIROSINT-SOL SOL 13MCG/ML	78
		TIROSINT-SOL SOL 150MCG	79
		TIROSINT-SOL SOL 175MCG	79

TIROSINT-SOL SOL 200MCG.....	79	<i>torsemidate tab 10 mg</i>	38
TIROSINT-SOL SOL 25MCG/ML	78	<i>torsemidate tab 100 mg</i>	38
TIROSINT-SOL SOL 37.5/ML.....	78	<i>torsemidate tab 20 mg</i>	38
TIROSINT-SOL SOL 44MCG/ML	78	<i>torsemidate tab 5 mg</i>	38
TIROSINT-SOL SOL 50MCG/ML	78	TOUJEO MAX INJ 300IU/ML	66
TIROSINT-SOL SOL 62.5/ML.....	78	TOUJEO SOLO INJ 300IU/ML	66
TIROSINT-SOL SOL 75MCG/ML	78	<i>tovet aer 0.05%</i>	104
TIROSINT-SOL SOL 88MCG/ML	78	TOVIAZ TAB 4MG	84
TIVICAY PD TAB 5MG.....	9	TOVIAZ TAB 8MG	84
TIVICAY TAB 10MG.....	9	TRADJENTA TAB 5MG	64
TIVICAY TAB 25MG.....	9	<i>tramadol hcl tab 100 mg</i>	4
TIVICAY TAB 50MG.....	9	<i>tramadol hcl tab 50 mg</i>	4
<i>tizanidine hcl tab 2 mg (base</i>		<i>tramadol-acetaminophen tab 37.5-325</i>	
<i>equivalent)</i>	61	<i>mg</i>	4
<i>tizanidine hcl tab 4 mg (base</i>		<i>trandolapril tab 1 mg</i>	28
<i>equivalent)</i>	61	<i>trandolapril tab 2 mg</i>	28
TOBI PODHALR CAP 28MG.....	6	<i>trandolapril tab 4 mg</i>	28
TOBRADEX OIN 0.3-0.1%	94	<i>trandolapril-verapamil hcl tab er 1-240</i>	
<i>tobramycin nebu soln 300 mg/4ml</i>	6	<i>mg</i>	27
<i>tobramycin nebu soln 300 mg/5ml</i>	6	<i>trandolapril-verapamil hcl tab er 2-180</i>	
<i>tobramycin ophth soln 0.3%</i>	94	<i>mg</i>	27
<i>tobramycin sulfate inj 10 mg/ml (base</i>		<i>trandolapril-verapamil hcl tab er 2-240</i>	
<i>equivalent)</i>	6	<i>mg</i>	27
<i>tobramycin sulfate inj 80 mg/2ml (40</i>		<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>mg/ml) (base equiv)</i>	6	<i>mg</i>	27
<i>tobramycin-dexamethasone ophth susp</i>		<i>tranexamic acid iv soln 1000 mg/10ml</i>	
<i>0.3-0.1%</i>	94	<i>(100 mg/ml)</i>	87
TOBEX OIN 0.3% OP	94	<i>tranexamic acid tab 650 mg</i>	87
<i>tolcapone tab 100 mg</i>	52	<i>tranylcypramine sulfate tab 10 mg</i> ...	49
<i>tolterodine tartrate cap er 24hr 2 mg</i>	84	TRAVASOL INJ 10%.....	93
<i>tolterodine tartrate cap er 24hr 4 mg</i>	84	<i>travoprost ophth soln 0.004%</i>	
<i>tolterodine tartrate tab 1 mg</i>	84	<i>(benzalkonium free) (bak free)</i>	96
<i>tolterodine tartrate tab 2 mg</i>	84	<i>trazodone hcl tab 100 mg</i>	49
<i>tolvaptan tab 15 mg</i>	75	<i>trazodone hcl tab 150 mg</i>	49
<i>tolvaptan tab 30 mg</i>	75	<i>trazodone hcl tab 300 mg</i>	49
<i>topiramate sprinkle cap 15 mg</i>	45	<i>trazodone hcl tab 50 mg</i>	49
<i>topiramate sprinkle cap 25 mg</i>	45	TREANDA INJ 100MG.....	17
<i>topiramate tab 100 mg</i>	45	TREANDA INJ 25MG.....	17
<i>topiramate tab 200 mg</i>	45	TRECATOR TAB 250MG	10
<i>topiramate tab 25 mg</i>	45	TRELEGY AER 100MCG.....	97
<i>topiramate tab 50 mg</i>	45	TRELEGY AER 200MCG.....	97
<i>toposar inj 100/5ml</i>	20	TRELSTAR MIX INJ 11.25MG.....	19
<i>topotecan hcl for inj 4 mg (base equiv)</i>		TRELSTAR MIX INJ 22.5MG	19
.....	20	TRELSTAR MIX INJ 3.75MG	19
<i>toremifene citrate tab 60 mg (base</i>		TRESIBA FLEX INJ 100UNIT.....	66
<i>equivalent)</i>	19	TRESIBA FLEX INJ 200UNIT.....	66
TORISEL INJ 25MG/ML.....	25	TRESIBA INJ 100UNIT	66

<i>tretinoin cap 10 mg</i>	20	TRIKAFTA TAB	99
<i>tretinoin cream 0.025%</i>	101	<i>tri-legest tab fe</i>	70
<i>tretinoin cream 0.05%</i>	101	TRIMETHOPRIM TAB 100MG	6
<i>tretinoin cream 0.1%</i>	101	<i>trimipramine maleate cap 100 mg</i>	49
<i>tretinoin gel 0.01%</i>	101	<i>trimipramine maleate cap 25 mg</i>	49
<i>tretinoin gel 0.025%</i>	101	<i>trimipramine maleate cap 50 mg</i>	49
<i>tretinoin gel 0.05%</i>	101	TRINTELLIX TAB 10MG	49
<i>triamcinolone acetonide cream 0.025%</i>	104	TRINTELLIX TAB 20MG	49
<i>triamcinolone acetonide cream 0.1%</i>	104	TRINTELLIX TAB 5MG	49
<i>triamcinolone acetonide cream 0.5%</i>	104	<i>tri-nymyo tab</i>	70
<i>triamcinolone acetonide dental paste</i> <i>0.1%</i>	106	<i>tri-sprintec tab</i>	70
<i>triamcinolone acetonide lotion 0.025%</i>	104	TRIUMEQ PD TAB	10
<i>triamcinolone acetonide lotion 0.1%</i>	104	TRIUMEQ TAB	10
<i>triamcinolone acetonide oint 0.025%</i>	104	<i>trivora-28 tab</i>	70
<i>triamcinolone acetonide oint 0.1%</i> .	104	TRIZIVIR TAB	10
<i>triamcinolone acetonide oint 0.5%</i> .	104	TROPHAMINE INJ 10%.....	93
<i>triamterene & hydrochlorothiazide cap</i> <i>37.5-25 mg</i>	38	<i>trospium chloride cap er 24hr 60 mg</i> 84	
<i>triamterene & hydrochlorothiazide tab</i> <i>37.5-25 mg</i>	38	<i>trospium chloride tab 20 mg</i>	84
<i>triamterene & hydrochlorothiazide tab</i> <i>75-50 mg</i>	38	TRULICITY INJ 0.75/0.5	65
<i>triamterene cap 100 mg</i>	38	TRULICITY INJ 1.5/0.5.....	65
<i>triamterene cap 50 mg</i>	38	TRULICITY INJ 3/0.5.....	65
<i>triderm cre 0.5%</i>	104	TRULICITY INJ 4.5/0.5.....	65
<i>trientine hcl cap 250 mg</i>	67	TRUMENBA INJ	92
<i>trifluoperazine hcl tab 1 mg (base</i> <i>equivalent)</i>	56	TRUSELTIQ CAP 100MG	25
<i>trifluoperazine hcl tab 10 mg (base</i> <i>equivalent)</i>	56	TRUSELTIQ CAP 125MG	25
<i>trifluoperazine hcl tab 2 mg (base</i> <i>equivalent)</i>	56	TRUSELTIQ CAP 50MG	25
<i>trifluoperazine hcl tab 5 mg (base</i> <i>equivalent)</i>	56	TRUSELTIQ CAP 75MG	25
<i>trifluridine ophth soln 1%</i>	94	TUKYSA TAB 150MG	25
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	52	TUKYSA TAB 50MG.....	25
<i>trihexyphenidyl hcl tab 2 mg</i>	52	TURALIO CAP 200MG.....	25
<i>trihexyphenidyl hcl tab 5 mg</i>	52	TWINRIX INJ	92
TRIJARDY XR TAB.....	65	TYBOST TAB 150MG	9
		<i>tydemy tab</i>	70
		TYPHIM VI INJ	92
		TYSABRI INJ 300/15ML.....	60
		U	
		UBRELVY TAB 100MG	59
		UBRELVY TAB 50MG	59
		UDENYCA INJ 6MG/.6ML	86
		UKONIQ TAB 200MG.....	25
		<i>unithroid tab 100mcg</i>	79
		<i>unithroid tab 112mcg</i>	79
		<i>unithroid tab 125mcg</i>	79
		<i>unithroid tab 137mcg</i>	79
		<i>unithroid tab 150mcg</i>	79
		<i>unithroid tab 175mcg</i>	79
		<i>unithroid tab 200mcg</i>	79

<i>unithroid tab 25mcg</i>	79	<i>vancomycin hcl cap 250 mg (base equivalent)</i>	6
<i>unithroid tab 300mcg</i>	79	<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	6
<i>unithroid tab 50mcg</i>	79	<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	6
<i>unithroid tab 75mcg</i>	79	<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	6
<i>unithroid tab 88mcg</i>	79	<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	6
UPTRAVI TAB 1000MCG	40	<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	6
UPTRAVI TAB 1200MCG	40	VANCOMYCIN SOL 250/5ML	6
UPTRAVI TAB 1400MCG	40	VANDAZOLE GEL 0.75%	84
UPTRAVI TAB 1600MCG	40	VAQTA INJ 25/0.5ML	92
UPTRAVI TAB 200MCG	40	VAQTA INJ 50UNT/ML.....	92
UPTRAVI TAB 400MCG	40	<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	62
UPTRAVI TAB 600MCG	40	<i>varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack</i>	62
UPTRAVI TAB 800MCG	40	<i>varenicline tartrate tab 1 mg (base equiv)</i>	62
<i>ursodiol cap 300 mg</i>	82	VARIVAX INJ	92
<i>ursodiol tab 250 mg</i>	82	VARUBI TAB 90MG	80
<i>ursodiol tab 500 mg</i>	82	VASCEPA CAP 0.5GM	33
V		VASCEPA CAP 1GM.....	33
<i>valacyclovir hcl tab 1 gm</i>	11	VECTIBIX INJ 100MG.....	25
<i>valacyclovir hcl tab 500 mg</i>	11	VECTIBIX INJ 400MG.....	25
VALCHLOR GEL 0.016%	105	<i>velivet pak</i>	70
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	11	VELTASSA POW 16.8GM.....	67
<i>valproate sodium inj 100 mg/ml</i>	45	VELTASSA POW 25.2GM.....	67
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	45	VELTASSA POW 8.4GM	67
<i>valproic acid cap 250 mg</i>	45	VENCLEXTA TAB 100MG.....	25
<i>valsartan tab 160 mg</i>	31	VENCLEXTA TAB 10MG.....	25
<i>valsartan tab 320 mg</i>	31	VENCLEXTA TAB 50MG.....	25
<i>valsartan tab 40 mg</i>	31	VENCLEXTA TAB START PK.....	25
<i>valsartan tab 80 mg</i>	31	<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	49
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	30	<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	49
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	30	<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	49
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	30	<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	50
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	30	<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	50
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	30		
VALTOCO SPR 10MG	45		
VALTOCO SPR 15MG	45		
VALTOCO SPR 20MG	45		
VALTOCO SPR 5MG.....	45		
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	6		

<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	50	VIIBRYD TAB 10MG	50
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	50	VIIBRYD TAB 20MG	50
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	50	VIIBRYD TAB 40MG	50
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	50	VIJOICE TAB 125MG	25
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	50	VIJOICE TAB 250MG	25
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	50	VIJOICE TAB 50MG	25
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	50	<i>vilazodone hcl tab 10 mg</i>	50
VENLAFAXINE TAB 112.5MG	50	<i>vilazodone hcl tab 20 mg</i>	50
VENTAVIS SOL 10MCG/ML	40	<i>vilazodone hcl tab 40 mg</i>	50
VENTAVIS SOL 20MCG/ML	40	VIMPAT INJ 200MG/20	45
VENTOLIN HFA AER	98	VIMPAT SOL 10MG/ML	45
<i>verapamil hcl cap er 24hr 100 mg</i>	37	VIMPAT TAB 100MG	45
<i>verapamil hcl cap er 24hr 120 mg</i>	37	VIMPAT TAB 150MG	45
<i>verapamil hcl cap er 24hr 180 mg</i>	37	VIMPAT TAB 200MG	45
<i>verapamil hcl cap er 24hr 200 mg</i>	37	VIMPAT TAB 50MG	45
<i>verapamil hcl cap er 24hr 240 mg</i>	37	<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	20
<i>verapamil hcl cap er 24hr 300 mg</i>	37	<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	20
<i>verapamil hcl cap er 24hr 360 mg</i>	37	VIRACEPT TAB 250MG	9
<i>verapamil hcl tab 120 mg</i>	37	VIRACEPT TAB 625MG	9
<i>verapamil hcl tab 40 mg</i>	37	VIREAD POW 40MG/GM	9
<i>verapamil hcl tab 80 mg</i>	37	VIREAD TAB 150MG	9
<i>verapamil hcl tab er 120 mg</i>	37	VIREAD TAB 200MG	9
<i>verapamil hcl tab er 180 mg</i>	37	VIREAD TAB 250MG	9
<i>verapamil hcl tab er 240 mg</i>	37	VITRAKVI CAP 100MG	25
VERDESO AER 0.05%	104	VITRAKVI CAP 25MG	25
VERSACLOZ SUS 50MG/ML	56	VITRAKVI SOL 20MG/ML	25
VERZENIO TAB 100MG	25	VIVITROL INJ 380MG	62
VERZENIO TAB 150MG	25	VIZIMPRO TAB 15MG	26
VERZENIO TAB 200MG	25	VIZIMPRO TAB 30MG	26
VERZENIO TAB 50MG	25	VIZIMPRO TAB 45MG	26
<i>vestura tab 3-0.02mg</i>	70	VONJO CAP 100MG	26
V-GO 20 KIT	66	<i>voriconazole for inj 200 mg</i>	7
V-GO 30 KIT	66	<i>voriconazole for susp 40 mg/ml</i>	7
V-GO 40 KIT	66	<i>voriconazole tab 200 mg</i>	7
VICTOZA INJ 18MG/3ML	65	<i>voriconazole tab 50 mg</i>	7
<i>vienva tab 0.1-20</i>	70	VOSEVI TAB	11
<i>vigabatrin powd pack 500 mg</i>	45	VOTRIENT TAB 200MG	26
<i>vigabatrin tab 500 mg</i>	45	VRAYLAR CAP 1.5MG	56
<i>vigadrone pow 500mg</i>	45	VRAYLAR CAP 3MG	56
VIIBRYD KIT STARTER	50	VRAYLAR CAP 4.5MG	56
		VRAYLAR CAP 6MG	56
		VUMERITY CAP 231MG	60
		<i>vyfemla tab 0.4-35</i>	70
		VYNDAMAX CAP 61MG	39
		VYNDAQEL CAP 20MG	39

VYZULTA SOL 0.024%	96
W	
WAKIX TAB 17.8MG.....	61
WAKIX TAB 4.45MG.....	61
<i>warfarin sodium tab 1 mg</i>	86
<i>warfarin sodium tab 10 mg</i>	86
<i>warfarin sodium tab 2 mg</i>	86
<i>warfarin sodium tab 2.5 mg</i>	86
<i>warfarin sodium tab 3 mg</i>	86
<i>warfarin sodium tab 4 mg</i>	86
<i>warfarin sodium tab 5 mg</i>	86
<i>warfarin sodium tab 6 mg</i>	86
<i>warfarin sodium tab 7.5 mg</i>	86
<i>water for irrigation, sterile irrigation soln</i>	105
WELIREG TAB 40MG	20
<i>wixela inhub aer 100/50</i>	101
<i>wixela inhub aer 250/50</i>	101
<i>wixela inhub aer 500/50</i>	101
<i>wymzya fe chw 0.4mg-35</i>	70
X	
XALKORI CAP 200MG.....	26
XALKORI CAP 250MG.....	26
XATMEP SOL 2.5MG/ML.....	88
XCOPRI PAK 100-150	45
XCOPRI PAK 12.5-25	45
XCOPRI PAK 150-200	45
XCOPRI PAK 50-100MG.....	45
XCOPRI TAB 100MG.....	45
XCOPRI TAB 150MG.....	45
XCOPRI TAB 200MG.....	45
XCOPRI TAB 50MG	45
XELJANZ SOL 1MG/ML	88
XELJANZ TAB 10MG.....	88
XELJANZ TAB 5MG.....	88
XELJANZ XR TAB 11MG	88
XELJANZ XR TAB 22MG	88
XENLETA TAB 600MG.....	6
XERMELO TAB 250MG	75
XGEVA INJ.....	67
XHANCE MIS 93MCG.....	100
XIFAXAN TAB 200MG	7
XIFAXAN TAB 550MG	82
XIGDUO XR TAB 10-1000	65
XIGDUO XR TAB 10-500MG	65
XIGDUO XR TAB 2.5-1000	65
XIGDUO XR TAB 5-1000MG	65

XIGDUO XR TAB 5-500MG.....	65
XIIDRA DRO 5%	96
XOFLUZA TAB 40MG	11
XOFLUZA TAB 80MG	12
XOLAIR INJ 150MG/ML	99
XOLAIR INJ 75/0.5	99
XOLAIR SOL 150MG	99
XOSPATA TAB 40MG.....	26
XPOVIO PAK 40MG	26
XPOVIO PAK 50MG	26
XPOVIO PAK 60MG	26
XPOVIO PAK 80MG	26
XTANDI CAP 40MG	19
XTANDI TAB 40MG	19
XTANDI TAB 80MG	19
<i>xulane dis 150-35</i>	70
XULTOPHY INJ 100/3.6	66
XYREM SOL 500MG/ML	61
Y	
YF-VAX INJ.....	92
YONDELIS INJ 1MG	17
YONSA TAB 125MG	19
YUPELRI SOL	97
<i>yuvafem tab 10mcg</i>	72
Z	
<i>zafemy dis 150/35</i>	70
<i>zafirlukast tab 10 mg</i>	98
<i>zafirlukast tab 20 mg</i>	98
<i>zaleplon cap 10 mg</i>	58
<i>zaleplon cap 5 mg</i>	58
ZANOSAR INJ 1GM	17
ZEJULA CAP 100MG.....	26
ZELBORAF TAB 240MG.....	26
ZEMAIRA INJ 1000MG.....	99
ZEMDRI INJ 500MG/10	7
ZENPEP CAP 10000UNT.....	83
ZENPEP CAP 15000UNT.....	83
ZENPEP CAP 20000UNT.....	83
ZENPEP CAP 25000UNT.....	83
ZENPEP CAP 3000UNIT	82
ZENPEP CAP 40000UNT.....	83
ZENPEP CAP 5000UNIT	83
ZEPATIER TAB 50-100MG.....	12
ZERVIATE DRO 0.24%	95
<i>zidovudine cap 100 mg</i>	9
<i>zidovudine syrup 10 mg/ml</i>	9
<i>zidovudine tab 300 mg</i>	9

ZIMHI SOL	62	<i>zolmitriptan tab 2.5 mg</i>	59
<i>ziprasidone hcl cap 20 mg</i>	56	<i>zolmitriptan tab 5 mg</i>	59
<i>ziprasidone hcl cap 40 mg</i>	56	<i>zolidem tartrate tab 10 mg</i>	58
<i>ziprasidone hcl cap 60 mg</i>	56	<i>zolidem tartrate tab 5 mg</i>	58
<i>ziprasidone hcl cap 80 mg</i>	56	<i>zolidem tartrate tab er 12.5 mg</i>	58
<i>ziprasidone mesylate for inj 20 mg</i> <i>(base equivalent)</i>	56	<i>zolidem tartrate tab er 6.25 mg</i>	58
ZIRGAN GEL 0.15%	94	ZONISADE SUS 100MG/5	45
<i>zoledronic acid inj conc for iv infusion 4</i> <i>mg/5ml</i>	67	<i>zonisamide cap 100 mg</i>	45
<i>zoledronic acid iv soln 5 mg/100ml</i> ...	67	<i>zonisamide cap 25 mg</i>	45
ZOLINZA CAP 100MG.....	26	<i>zonisamide cap 50 mg</i>	45
<i>zolmitriptan nasal spray 2.5 mg/spray</i> <i>unit</i>	59	ZORBTIVE INJ 8.8MG.....	75
<i>zolmitriptan nasal spray 5 mg/spray</i> <i>unit</i>	59	<i>zovia 1/35 tab</i>	70
<i>zolmitriptan orally disintegrating tab</i> <i>2.5 mg</i>	59	ZYCLARA PUMP CRE 2.5%	105
<i>zolmitriptan orally disintegrating tab 5</i> <i>mg</i>	59	ZYDELIG TAB 100MG	26
		ZYDELIG TAB 150MG	26
		ZYKADIA TAB 150MG.....	26
		ZYPREXA RELP INJ 210MG.....	56
		ZYPREXA RELP INJ 300MG.....	56
		ZYPREXA RELP INJ 405MG.....	56

This Formulary was updated on January 1, 2023. For more recent information or other questions, please contact the MVP Medicare Customer Care Center.

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