



2024 High Performance Formulary (List of Covered Drugs)

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

This formulary was updated on 9/1/2024. For more recent information or other questions, please contact The Health Plan Pharmacy Services at 1.800.624.6961 extension 7914, or visit www.healthplan.org.

Pharmacy Benefit Programs

Prescription drugs are an integral component of a comprehensive health maintenance plan. Pharmacy benefit programs at The Health Plan are developed through recommendations of participating physicians and pharmacists. This group of professional health care providers, known as the Pharmacy and Therapeutics Committee, evaluates therapeutic classes of drugs and recommends coverage guidelines for our pharmacy benefit programs. The committee uses current medical and pharmaceutical literature along with recommendations of experts in various clinical specialties in its evaluation of our pharmacy benefit programs. The result is a list of drugs (formulary) to allow for the availability of appropriate medications for our members' needs. Also, the formulary and coverage guidelines allow prescription costs and your premium to be maintained at affordable levels.

Definitions

Prescription – Drugs which can only be dispensed upon order (prescription) by a qualified provider of care. Additionally, only drugs which are labeled “Caution: Federal law prohibits dispensing without prescription” will be considered eligible.

Generic Drug – A drug available as a chemically and therapeutically equivalent copy of a brand-name drug. It is usually available from several manufacturers.

Brand Drug – A prescription item only available from a single-source supplier.

Multi-Source Brand Drugs – Brand-name drugs which are manufactured by more than one producer. These agents are usually available as generic equivalents.

How to Use Your Prescription Benefit

Please present The Health Plan ID card to the pharmacist with your prescription. You will be required to pay a copayment (“copay”) at the time of service based on the prescription plan in which you are enrolled. Your copayment levels are found under the pharmacy benefit section Pharmacy Benefit of your Summary of Benefits. Your ID card also contains important information to allow the pharmacy to correctly submit your claim. Please take it with you to the pharmacy.

Specialty Pharmacy Program

Specialty drugs are high-cost medications including drugs manufactured by biotechnology. Specialty drugs may be administered by injection, oral, transdermal, or inhaled. Specialty drugs are used to treat very specific diseases and require extensive management for safety and effectiveness. Dosages need to be monitored for effect and adjustments might be needed for adequate response to effectively treat the disease.

Specialty drug require prior authorization to assure appropriate candidate for the drug. Additionally, oversight is an integral part of the prior authorization process. Dispensing might be limited to pharmacies with specific skills and distribution programs to assure proper delivery of these medications. Diseases targeted to receive therapy are, but not limited to, rheumatoid arthritis, severe chronic psoriasis, multiple sclerosis, hepatitis C, hemophilia, certain cancers, growth deficiency, cystic fibrosis and Crohn's disease.

Coverage for these agents are provided under your Specialty Pharmacy Benefit.

Drugs Requiring Prior Authorization

Certain medications are eligible for coverage only after a patient-specific approval has been authorized. Patient-specific criteria may include age, gender, and clinical conditions determined by the physician for authorization to be granted for a specific drug. A coverage determination request can be made by the member, member's representative or physician. To request a coverage determination please contact pharmacy services at 1.800.624.6961, ext. 7914. Standard requests for coverage determinations will be processed within 5 days. Requests for non-urgent coverage determinations received after 5pm will be processed the next business day. Urgent requests for coverage determinations will be processed within 48 hours.

Quantity per Dispensing Event (QPC rules)

Generally, The Health Plan allows dispensing of approved medications up to a 34-day supply per co-pay at the retail pharmacy network. Quantity per dispensing event rules (QPC) set thresholds that reduce exposure to unnecessary cost, without creating obstacles to access for most members. Drugs that are subject to QPC rules usually have specific limitations for use approved by the FDA. Examples include drugs to treat migraine headaches. These drugs, known as "triptans," are to be used in specific doses up to a defined number of headaches per month. The QPC rules allow this specific number of triptan medications to be dispensed per 34-day benefit period. To inquire about QPC limits to request an exemption, have your provider contact pharmacy services at 1.800.624.6961, ext. 7914.

Non-Formulary Coverage Review

Certain non-formulary medications are eligible for coverage only after a patient-specific approval has been authorized. Patient-specific criteria may include age, gender, and clinical conditions determined by the physician for authorization to be granted for a specific drug. A non-formulary exception request can be made by the member, member's representative or physician. To request an exception please contact pharmacy services at 1.800.624.6961, ext. 7914. Standard requests for exceptions will be processed within 5 calendar days of receipt of the request. Requests for non-urgent coverage determinations received after 5pm will be processed the next business day. Urgent requests for coverage determinations will be processed within 48 hours or receipt.

Generic Difference Policy

(copayment policy for multi-source drugs)

If a prescription order specifies that a brand-name drug must be dispensed when the generic equivalent is available, or the prescription order allows for generic substitution and the member elects to have the prescription filled with a brand-name drug instead, the member must pay the brand copayment plus the difference between The Health Plan cost of a brand-name and its generic equivalent (i.e., The Health Plan only pays for the generic cost). Please note: Non-formulary brand versions of generic drugs require coverage review as outlined above.

Out-of-Area Emergencies

In situations of emergency need for a prescription outside The Health Plan service area, please contact The Health Plan for the location of a participating pharmacy in that area. Present The Health Plan ID card with the emergency prescription and pay your copayment. If no pharmacy in the area participates with The Health Plan, purchase the emergency prescription and send your receipt to The Health Plan. You will be reimbursed in full, less your applicable copayment, for the prescription provided the prescription meets the guidelines specified in this document.

Exclusions and Limitations

The following will not be covered or paid for by The Health Plan:

- The charge for any prescription refill other than the number set by the prescriber. Additionally, no refills dispensed more than one year from the date or the original prescription.
- The charge for any prescription, oral or topical, that is prescribed for cosmetic purposes.
- The charge for any medications not FDA-approved for use in the general population.
- Off label use of a drug which is not medically accepted. The Health Plan uses the same guidelines as CMS for determining whether a proposed use is medically accepted.
- The charge for a drug not prescribed by a HealthPlan qualified provider except in an emergency situation.
- The charge for any medication covered by any Worker's Compensation or occupational disease laws, any other group policy, or government program which is not The Health Plan's program.
- Dental-related prescriptions such as, but not limited to, oral fluorides, dental mouth washes, devices used in dental therapy. Certain oral fluoride products may be covered as a preventative medication.
- The charge for prescription drugs or devices used to promote weight loss.
- Prescriptions used to treat sexual dysfunction, either oral or topical, or devices used for impotence.
- Appliances and therapeutic devices which may require a prescription are not covered. These include, but are not limited to, garments, splints, bandages, or braces regardless of intended use.
- Charges for lost or stolen prescription drugs unless noted within your Summary of Benefits. Please contact The Health Plan for details.
- Certain legend drugs when any version or strength become available over the counter.
- The charges for prescriptions related to non-covered services.

- The charge for any prescription prescribed to enhance athletic performance.
- Drugs prescribed to shorten the duration of the common cold.

Pain Management Program and Opiate/Opioid Management

Pain Management Program will apply to plans within the value program.

The acute use of opioid medications for moderate to severe pain from acute injury, medical treatment or surgical procedure will be limited. The first fill of an opioid medication will be limited to a 5 day supply. This limit is for the first fill of an opioid medication for a member who has no history of opioid usage in the past 130 days.

For those members needing further management of their pain, a prior authorization will be required if:

- The opioid exceeds 80 morphine milligram equivalents
- Is taken for greater than 90 consecutive days
- Is a long acting opioid
- Is being taken with a medication that could cause respiratory depression.

A pharmacist will review the case to evaluate that the opioid is being utilized safely and appropriately. Additionally, the member can be limited to one prescriber and one pharmacy, if needed.

Formulary medications will be preferred over non-formulary medications. Step therapy rules will be applied when reviewing a request for non-formulary medications. Also, dosing and quantities may be limited.

List of Abbreviations

1: Preferred Generic

2: Preferred Brand

3: Non-preferred Drug

4: Specialty Drugs

5: Medical Service Drugs

6: ACA Preventive Medications

ACA: Affordable Care Act

LA: Limited Availability. The prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

DME: Durable Medical Equipment. Will pull the DME benefit.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

SP: Specialty Drug.

ST: Step Therapy. In some cases, the Plan 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, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

* Note: To comply with various laws and regulations impacting plans, cost share and day supply limits may vary for some drugs. Please contact Pharmacy Services if you have a question about your specific drug coverage or consult your Summary of Benefits.

This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.

Table of Contents

ANTI - INFECTIVES	3
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS	7
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH	11
CARDIOVASCULAR, HYPERTENSION & LIPIDS	20
DERMATOLOGICALS/TOPICAL THERAPY	25
DIAGNOSTICS & MISCELLANEOUS AGENTS	30
EAR, NOSE & THROAT MEDICATIONS	31
ENDOCRINE/DIABETES	32
GASTROENTEROLOGY	37
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY	41
IMMUNOLOGY	43
MUSCULOSKELETAL & RHEUMATOLOGY	43
OBSTETRICS & GYNECOLOGY	45
OPHTHALMOLOGY	50
RESPIRATORY, ALLERGY, COUGH & COLD	52
UROLOGICALS	55
VITAMINS, HEMATINICS & ELECTROLYTES	56
Index	58

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
<i>clotrimazole</i>	1	
CRESEMBA	2	PA
<i>fluconazole oral suspension for reconstitution</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL (99 per 99 days)
<i>flucytosine</i>	1	PA
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>itraconazole</i>	1	QL (99 per 99 days)
<i>ketoconazole</i>	1	
NOXAFIL	2	PA
<i>nystatin</i>	1	
<i>posaconazole</i>	1	PA
<i>terbinafine hcl</i>	1	
<i>voriconazole</i>	1	PA
ANTIVIRALS		
<i>abacavir</i>	1	
<i>abacavir-lamivudine</i>	1	
<i>acyclovir</i>	1	
<i>adefovir</i>	1	
<i>amantadine hcl</i>	1	
APRETUDE	4	PA
APTIVUS	2	

Drug Name	Drug Tier	Requirements / Limits
<i>atazanavir</i>	1	
BARACLUDE	2	
BEYFORTUS	6	ACA
BIKTARVY	2	
CABENUVA	4	PA; QL (99 per 99 days)
CIMDUO	2	
<i>darunavir</i>	1	
DESCOVY	2	
<i>didanosine</i>	1	
DOVATO	2	
EDURANT	2	
<i>efavirenz</i>	1	
<i>efavirenz-emtricitabin-tenofovir</i>	1	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	
<i>emtricitabine</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	6	ACA
EMTRIVA	2	
<i>entecavir</i>	1	
EPCLUSA	4	PA; QL (99 per 99 days)
<i>etravirine</i>	1	
EVOTAZ	3	
<i>famciclovir</i>	1	QL (99 per 99 days)
<i>fosamprenavir</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>foscarnet</i>	1	
FUZEON	2	PA; QL (99 per 99 days)
GENVOYA	2	
HARVONI	4	PA; QL (99 per 99 days)
INTELENCE	2	
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	
LAGEVRIO (EUA)	2	QL (99 per 99 days)
<i>lamivudine</i>	1	
<i>lamivudine-zidovudine</i>	1	
<i>lopinavir-ritonavir</i>	1	
<i>maraviroc</i>	1	
<i>nevirapine</i>	1	
NORVIR	2	
ODEFSEY	2	
<i>oseltamivir</i>	1	QL (99 per 99 days)
PAXLOVID	2	QL (99 per 99 days)
PREVYMIS	2	QL (99 per 99 days)
PREZCOBIX	2	
PREZISTA	2	
RELENZA DISKHALER	3	QL (99 per 99 days)
REYATAZ	2	
<i>ribavirin</i>	1	PA
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	

Drug Name	Drug Tier	Requirements / Limits
SELZENTRY	2	
<i>stavudine</i>	1	
SYNAGIS	4	PA; LA
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	2	
TROGARZO	4	PA
<i>valacyclovir</i>	1	QL (99 per 99 days)
<i>valganciclovir</i>	1	
VEMLIDY	2	
VIRACEPT	2	
VIREAD	2	
ZEPATIER	4	PA; QL (99 per 99 days)
<i>zidovudine</i>	1	
CEPHALOSPORINS		
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefdinir</i>	1	
<i>cefixime</i>	1	
<i>cefpodoxime</i>	1	
<i>cefprozil</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cephalexin</i>	1	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin</i>	1	
<i>clarithromycin</i>	1	
<i>e.e.s. 400</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ery-tab</i>	1	
<i>erythrocin (as stearate)</i>	1	
<i>erythromycin</i>	1	
<i>erythromycin ethylsuccinate</i>	1	
MISCELLANEOUS ANTIINFECTIVES		
<i>albendazole</i>	1	QL (99 per 99 days)
ALINIA	2	QL (99 per 99 days)
ARIKAYCE	4	PA; LA
<i>atovaquone</i>	1	
<i>atovaquone-proguanil</i>	1	QL (99 per 99 days)
BENZNIDAZOLE	2	QL (99 per 99 days)
CAYSTON	4	PA; LA; QL (99 per 99 days)
<i>chloroquine phosphate</i>	1	
<i>clindamycin hcl</i>	1	
<i>clindamycin pediatric</i>	1	
COARTEM	2	QL (99 per 99 days)
CYCLOSERINE	3	
<i>dapsone</i>	1	
EMVERM	2	QL (99 per 99 days)
<i>ethambutol</i>	1	
<i>hydroxychloroquine</i>	1	
IMPAVIDO	2	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>isoniazid</i>	1	
<i>ivermectin</i>	1	PA; QL (99 per 99 days)
KITABIS PAK	4	PA; QL (99 per 99 days)
<i>linezolid</i>	1	PA
<i>mefloquine</i>	1	QL (99 per 99 days)
<i>metronidazole</i>	1	
<i>neomycin</i>	1	
<i>nitazoxanide</i>	1	QL (99 per 99 days)
<i>paromomycin</i>	1	
<i>pentamidine</i>	1	QL (99 per 99 days)
<i>praziquantel</i>	1	
PRIFTIN	2	
<i>primaquine</i>	1	QL (99 per 99 days)
<i>pyrazinamide</i>	1	
<i>pyrimethamine</i>	1	PA
<i>quinine sulfate</i>	1	QL (99 per 99 days)
<i>rifabutin</i>	1	
<i>rifampin</i>	1	
SIRTURO	2	PA; LA
SIVEXTRO	3	PA
<i>tinidazole</i>	1	QL (99 per 99 days)
<i>tobramycin</i>	4	PA; QL (99 per 99 days)
<i>tobramycin in 0.225 % nacl</i>	4	PA; QL (99 per 99 days)
TRECTOR	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
XIFAXAN	2	PA; QL (99 per 99 days)
PENICILLINS		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate</i>	1	
<i>ampicillin</i>	1	
AUGMENTIN	2	
<i>dicloxacillin</i>	1	
<i>penicillin v potassium</i>	1	
QUINOLONES		
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin hcl</i>	1	
FACTIVE	3	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
<i>ofloxacin</i>	1	
SULFA'S & RELATED AGENTS		
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim</i>	1	
TETRACYCLINES		
<i>avidoxy</i>	1	
<i>demeclocycline</i>	1	
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline hyclate oral tablet, delayed release (dr/ec)</i>	1	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg</i>	1	ST
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphasic</i>	1	
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
<i>minocycline oral capsule</i>	1	
<i>minocycline oral tablet</i>	1	
<i>minocycline oral tablet extended release 24 hr</i>	1	ST
<i>mondoxylene nl</i>	1	
<i>morgidox</i>	1	
<i>tetracycline oral capsule</i>	1	
<i>tetracycline oral tablet</i>	1	ST
URINARY TRACT AGENTS		
<i>fosfomycin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd/m-cryst</i>	1	
<i>trimethoprim</i>	1	

VANCOMYCIN		
<i>vancomycin oral capsule</i>	1	PA; QL (99 per 99 days)
<i>vancomycin oral recon soln</i>	1	QL (99 per 99 days)

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS

ADJUNCTIVE AGENTS		
KEPIVANCE	4	PA
<i>leucovorin calcium</i>	1	
MESNEX	2	
VISTOGARD	4	PA; QL (99 per 99 days)
XGEVA	4	PA; QL (99 per 99 days)

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone</i>	4	PA; QL (99 per 99 days)
ADAKVEO	4	PA
ADCETRIS	4	PA
ALECENSA	4	PA; QL (99 per 99 days)
ALIQOPA	4	PA; LA
ALUNBRIG	4	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
AMTAGVI	4	PA
<i>anastrozole</i>	1	
<i>azacitidine</i>	4	PA
<i>azathioprine</i>	1	
BALVERSA	4	PA; LA
BAVENCIO	4	PA; LA
<i>bendamustine</i>	4	PA
BENDEKA	4	PA
BESPONSA	4	PA
<i>bexarotene</i>	4	PA
<i>bicalutamide</i>	1	
BLINCYTO	4	PA
BORTEZOMIB INJECTION RECON SOLN 1 MG, 2.5 MG	4	PA
<i>bortezomib injection recon soln 3.5 mg</i>	4	PA
BORTEZOMIB INTRAVENOUS	4	PA
BOSULIF	4	PA; QL (99 per 99 days)
BRUKINSA	4	PA; LA
CABOMETYX	4	PA; LA; QL (99 per 99 days)
CALQUENCE (ACALABRUTINIB MAL)	4	PA; LA; QL (99 per 99 days)
<i>capecitabine</i>	4	PA; QL (99 per 99 days)
CAPRELSA	4	PA; LA; QL (99 per 99 days)
CARVYKTI	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
COMETRIQ	4	PA; QL (99 per 99 days)
COTELLIC	4	PA; LA; QL (99 per 99 days)
<i>cyclophosphamide</i>	1	
<i>cyclosporine</i>	1	
<i>cyclosporine modified</i>	1	
CYRAMZA	4	PA
DARZALEX	4	PA; LA
<i>decitabine</i>	4	PA
DROXIA	2	
ELIGARD	4	PA
ELIGARD (3 MONTH)	4	PA
ELIGARD (4 MONTH)	4	PA
ELIGARD (6 MONTH)	4	PA
ELZONRIS	4	PA
ENSPRYNG	4	PA
ERBITUX	4	PA
<i>eribulin</i>	4	PA
ERIVEDGE	4	PA; QL (99 per 99 days)
ERLEADA	4	PA; QL (99 per 99 days)
<i>erlotinib</i>	4	PA; QL (99 per 99 days)
<i>etoposide</i>	1	
<i>everolimus (antineoplastic)</i>	4	PA; QL (99 per 99 days)
<i>everolimus (immunosuppressive)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>exemestane</i>	1	
FENSOLVI	4	PA
<i>fludarabine</i>	1	
FOLOTYN	4	PA
GAMIFANT	4	PA
GAVRETO	4	PA; LA; QL (99 per 99 days)
GAZYVA	4	PA
<i>gefitinib</i>	4	PA; QL (99 per 99 days)
<i>gengraf</i>	1	
GILOTRIF	4	PA; QL (99 per 99 days)
GLEOSTINE	2	
HALAVEN	4	PA
HYCAMTIN	4	PA
<i>hydroxyurea</i>	1	
ICLUSIG	4	PA; QL (99 per 99 days)
IDHIFA	4	PA; LA; QL (99 per 99 days)
<i>imatinib</i>	4	PA; QL (99 per 99 days)
IMBRUVICA	4	ST; QL (99 per 99 days)
IMFINZI	4	PA; LA
INLYTA	4	PA; QL (99 per 99 days)
ISTODAX	4	PA
IWILFIN	4	PA; LA
IXEMPRA	4	PA
JAKAFI	4	ST; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
KADCYLA	4	PA
KANJINTI	4	PA
KEYTRUDA	4	PA
KIMMTRAK	4	PA
KISQALI	4	PA; QL (99 per 99 days)
KYMRIAH	4	PA
KYPROLIS	4	PA
<i>lanreotide</i>	4	PA; QL (99 per 99 days)
<i>lapatinib</i>	4	PA; QL (99 per 99 days)
<i>lenalidomide</i>	4	PA; QL (99 per 99 days)
LENVIMA	4	PA; QL (99 per 99 days)
<i>letrozole</i>	1	
LEUKERAN	2	
<i>leuprolide</i>	4	PA
LIBTAYO	4	PA
LONSURF	4	PA
LOQTORZI	4	PA
LORBRENA	4	PA; QL (99 per 99 days)
LUNSUMIO	4	PA
LUPKYNIS	4	PA; QL (99 per 99 days)
LUPRON DEPOT	4	PA
LUPRON DEPOT (3 MONTH)	4	PA
LUPRON DEPOT (4 MONTH)	4	PA
LUPRON DEPOT (6 MONTH)	4	PA

Drug Name	Drug Tier	Requirements / Limits
LYNPARZA	4	PA; QL (99 per 99 days)
LYSODREN	4	
LYTGOBI	4	PA; LA
MATULANE	4	PA
<i>megestrol</i>	1	
MEKINIST	4	PA; QL (99 per 99 days)
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf)</i>	1	
<i>mitoxantrone</i>	4	PA
<i>mycophenolate mofetil</i>	1	
<i>mycophenolate sodium</i>	1	
MYLERAN	2	
MYLOTARG	4	PA; LA
<i>nelarabine</i>	4	PA
NERLYNX	4	PA; LA
<i>nilutamide</i>	1	PA
NINLARO	4	PA; QL (99 per 99 days)
NUBEQA	4	PA; LA; QL (99 per 99 days)
<i>octreotide acetate</i>	4	PA
ODOMZO	4	PA; LA; QL (99 per 99 days)
OJEMDA	4	PA
ONIVYDE	4	PA
OPDIVO	4	PA
OPDUALAG	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ORSERDU	4	PA; QL (99 per 99 days)
PACLITAXEL PROTEIN-BOUND	4	PA
<i>pazopanib</i>	4	PA; QL (99 per 99 days)
PEMAZYRE	4	PA; LA; QL (99 per 99 days)
PERJETA	4	PA
PHESGO	4	PA
PIQRAY	4	PA
POMALYST	4	PA; LA
POTELIGEO	4	PA
PRALATREXATE	4	PA
PROGRAF	2	
PURIXAN	4	PA
REVLIMID	4	PA; LA; QL (99 per 99 days)
<i>romidepsin</i>	4	PA
ROZLYTREK	4	PA; LA; QL (99 per 99 days)
RUBRACA	4	PA; LA; QL (99 per 99 days)
RUXIENCE	4	PA
RYDAPT	4	PA; QL (99 per 99 days)
SCEMBLIX ORAL TABLET 100 MG	4	PA
SCEMBLIX ORAL TABLET 20 MG, 40 MG	4	PA; QL (99 per 99 days)
SIGNIFOR	4	PA
<i>sirolimus</i>	1	

Drug Name	Drug Tier	Requirements / Limits
SOLTAMOX	3	
SOMATULINE DEPOT	4	PA; QL (99 per 99 days)
<i>sorafenib</i>	4	PA; QL (99 per 99 days)
SPRYCEL	4	PA; QL (99 per 99 days)
STIVARGA	4	PA; QL (99 per 99 days)
<i>sunitinib malate</i>	4	PA; QL (99 per 99 days)
SYLVANT	4	PA
TABRECTA	4	PA
<i>tacrolimus</i>	1	
TAFINLAR	4	PA; QL (99 per 99 days)
TAGRISSEO	4	PA; LA; QL (99 per 99 days)
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	4	PA
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	4	PA; QL (99 per 99 days)
<i>tamoxifen</i>	1	
TASIGNA	4	PA; QL (99 per 99 days)
TECENTRIQ	4	PA; LA
TEMODAR	4	PA
<i>temozolomide</i>	4	PA
<i>temsirolimus</i>	4	PA
THALOMID	4	PA; QL (99 per 99 days)
TIBSOVO	4	PA
<i>topotecan</i>	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>toremifene</i>	1	
TRAZIMERA	4	PA
<i>tretinoin (antineoplastic)</i>	1	
TRIPTODUR	4	PA
UNITUXIN	4	PA
VECTIBIX	4	PA
VENCLEXTA	4	PA; LA; QL (99 per 99 days)
VENCLEXTA STARTING PACK	4	PA; QL (99 per 99 days)
VERZENIO	4	PA; LA; QL (99 per 99 days)
VIJOICE	4	PA; QL (99 per 99 days)
VITRAKVI	4	PA; LA; QL (99 per 99 days)
VIZIMPRO	4	PA; QL (99 per 99 days)
VONJO	4	PA; QL (99 per 99 days)
VYXEOS	4	PA
XALKORI	4	PA; QL (99 per 99 days)
XERMELO	4	PA; LA; QL (99 per 99 days)
XOSPATA	4	PA; LA; QL (99 per 99 days)
YERVOY	4	PA
YESCARTA	4	PA
YONDELIS	4	PA

Drug Name	Drug Tier	Requirements / Limits
ZEJULA ORAL TABLET 100 MG	4	PA; LA; QL (99 per 99 days)
ZEJULA ORAL TABLET 200 MG, 300 MG	4	PA; LA
ZELBORAF	4	PA; QL (99 per 99 days)
ZIRABEV	4	PA
ZOLADEX	4	PA
ZOLINZA	4	PA; QL (99 per 99 days)
ZYDELIG	4	PA; QL (99 per 99 days)
ZYKADIA	4	PA; QL (99 per 99 days)
ZYNYZ	4	PA

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

APTIOM	3	
<i>carbamazepine</i>	1	
<i>clobazam</i>	1	PA
<i>clonazepam</i>	1	
DIACOMIT	4	PA
<i>diazepam</i>	1	
DILANTIN	2	
<i>divalproex</i>	1	
EPIDIOLEX	4	PA; LA
<i>epitol</i>	1	
<i>ethosuximide</i>	1	
<i>felbamate</i>	1	
<i>gabapentin oral capsule</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>gabapentin oral solution</i>	1	
<i>gabapentin oral tablet</i>	1	
<i>gabapentin oral tablet extended release 24 hr</i>	1	ST
<i>lacosamide</i>	1	
<i>lamotrigine</i>	1	
<i>levetiracetam</i>	1	
<i>methsuximide</i>	1	
NAYZILAM	2	PA; QL (99 per 99 days)
<i>oxcarbazepine</i>	1	
<i>phenobarbital</i>	1	
<i>phenytoin</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin oral capsule</i>	1	
<i>pregabalin oral solution</i>	1	
<i>pregabalin oral tablet extended release 24 hr</i>	1	PA
<i>primidone</i>	1	
<i>roweepra</i>	1	
<i>rufinamide</i>	1	PA
<i>subvenite</i>	1	
<i>subvenite starter (blue) kit</i>	1	
<i>subvenite starter (green) kit</i>	1	
<i>subvenite starter (orange) kit</i>	1	
<i>tiagabine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>topiramate oral capsule, sprinkle</i>	1	
<i>topiramate oral capsule, extended release 24hr</i>	1	ST
<i>topiramate oral capsule, sprinkle, er 24hr</i>	1	ST
<i>topiramate oral tablet</i>	1	
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt)</i>	1	
<i>vigabatrin</i>	4	PA; LA; QL (99 per 99 days)
<i>vigadrone</i>	4	PA; QL (99 per 99 days)
<i>vigpoder</i>	4	PA; QL (99 per 99 days)
<i>zonisamide</i>	1	
ZTALMY	4	PA; LA
ANTIPARKINSONISM AGENTS		
<i>apomorphine</i>	4	PA; QL (99 per 99 days)
<i>benztropine</i>	1	
<i>bromocriptine</i>	1	
<i>carbidopa</i>	1	PA
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>entacapone</i>	1	
INBRIJA	4	PA; QL (99 per 99 days)
NEUPRO	3	
<i>pramipexole</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>rasagiline</i>	1	
<i>ropinirole</i>	1	
<i>selegiline hcl</i>	1	
<i>tolcapone</i>	1	PA
<i>trihexyphenidyl</i>	1	

MIGRAINE & CLUSTER HEADACHE THERAPY

AJOVY AUTOINJECTOR	2	PA; QL (99 per 99 days)
AJOVY SYRINGE	2	PA; QL (99 per 99 days)
<i>almotriptan malate</i>	1	QL (99 per 99 days)
<i>dihydroergotamine injection</i>	1	PA
<i>dihydroergotamine nasal</i>	1	ST; QL (99 per 99 days)
<i>eletriptan</i>	1	QL (99 per 99 days)
EMGALITY PEN	2	PA; QL (99 per 99 days)
EMGALITY SYRINGE	2	PA; QL (99 per 99 days)
<i>ergotamine-caffeine</i>	1	
<i>frovatriptan</i>	1	QL (99 per 99 days)
<i>migergot</i>	1	
<i>naratriptan</i>	1	QL (99 per 99 days)
<i>rizatriptan</i>	1	QL (99 per 99 days)
<i>sumatriptan</i>	1	QL (99 per 99 days)
<i>sumatriptan succinate</i>	1	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>sumatriptan-naproxen</i>	1	ST; QL (99 per 99 days)
<i>zolmitriptan nasal</i>	1	ST; QL (99 per 99 days)
<i>zolmitriptan oral</i>	1	QL (99 per 99 days)

MISCELLANEOUS NEUROLOGICAL THERAPY

AUSTEDO	4	PA; LA; QL (99 per 99 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	4	PA; QL (99 per 99 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 18 MG	4	PA
AUSTEDO XR TITRATION KT(WK1-4)	4	PA
<i>dalfampridine</i>	4	PA; QL (99 per 99 days)
<i>dichlorphenamide</i>	4	PA
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	
<i>donepezil oral tablet 23 mg</i>	1	ST
<i>donepezil oral tablet, disintegrating</i>	1	
<i>edaravone</i>	4	PA
FIRDAPSE	4	PA; LA
<i>galantamine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>memantine</i>	1	
NUEDEXTA	2	PA
<i>ormalvi</i>	4	PA
RADICAVA	4	PA
RADICAVA ORS STARTER KIT SUSP	4	PA
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	
SKYSONA	4	PA
SPINRAZA (PF)	4	PA; QL (99 per 99 days)
TEGSEDI	4	PA; LA; QL (99 per 99 days)
<i>tetrabenazine</i>	4	PA; QL (99 per 99 days)
TYSABRI	4	PA; LA; QL (99 per 99 days)
ZEPOSIA	4	PA; QL (99 per 99 days)
ZEPOSIA STARTER KIT (28-DAY)	4	PA; QL (99 per 99 days)
ZEPOSIA STARTER PACK (7-DAY)	4	PA; QL (99 per 99 days)
ZOLGENSMA	4	PA
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>baclofen</i>	1	
<i>carisoprodol</i>	1	
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	1	PA

Drug Name	Drug Tier	Requirements / Limits
<i>cyclobenzaprine oral tablet</i>	1	
<i>dantrolene</i>	1	
<i>meprobamate</i>	1	
<i>metaxalone</i>	1	
<i>methocarbamol</i>	1	
<i>orphenadrine citrate</i>	1	
<i>orphenadrine-asa-caffeine</i>	1	
<i>orphengesic forte</i>	1	
<i>pyridostigmine bromide</i>	1	
<i>tizanidine</i>	1	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod</i>	1	
<i>acetaminophen-codeine</i>	1	
<i>ascomp with codeine</i>	1	
BRIXADI	4	
<i>buprenorphine</i>	1	ST
<i>buprenorphine hcl</i>	1	
<i>butalbital-acetaminop-caf-cod</i>	1	
<i>butalbital-acetaminophen</i>	1	
<i>butalbital-acetaminophen-caff</i>	1	
<i>butalbital-aspirin-caffeine</i>	1	
<i>codeine sulfate</i>	1	
<i>codeine-butalbital-asa-caff</i>	1	
<i>diskets</i>	1	
<i>endocet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>fentanyl</i>	1	ST; QL (99 per 99 days)
<i>fentanyl citrate</i>	1	ST; QL (99 per 99 days)
<i>hydrocodone bitartrate</i>	1	ST; QL (99 per 99 days)
<i>hydrocodone-acetaminophen</i>	1	
<i>hydrocodone-ibuprofen</i>	1	
<i>hydromorphone oral liquid</i>	1	
<i>hydromorphone oral tablet</i>	1	
<i>hydromorphone oral tablet extended release 24 hr</i>	1	ST; QL (99 per 99 days)
<i>hydromorphone rectal</i>	1	
<i>levorphanol tartrate</i>	1	
<i>methadone</i>	1	
<i>methadose</i>	1	
<i>morphine concentrate</i>	1	
<i>morphine oral capsule, er multiphase 24 hr</i>	1	ST; QL (99 per 99 days)
<i>morphine oral capsule, extend. release pellets</i>	1	ST; QL (99 per 99 days)
<i>morphine oral solution</i>	1	
<i>morphine oral tablet</i>	1	
<i>morphine oral tablet extended release</i>	1	ST; QL (99 per 99 days)
<i>morphine rectal</i>	1	
<i>oxycodone</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>oxycodone-acetaminophen</i>	1	
OXYCONTIN	3	ST; QL (99 per 99 days)
<i>oxymorphone oral tablet</i>	1	
<i>oxymorphone oral tablet extended release 12 hr</i>	1	ST; QL (99 per 99 days)
<i>prolate</i>	1	
SUBLOCADE	4	
<i>tencon</i>	1	
NON-NARCOTIC ANALGESICS		
<i>aspirin</i>	6	ACA; OTC
<i>aspirin childrens</i>	6	ACA; OTC
<i>bayer low dose aspirin</i>	6	ACA; OTC
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol injection</i>	1	PA
<i>butorphanol nasal</i>	1	PA; QL (99 per 99 days)
<i>celecoxib</i>	1	
<i>diclofenac potassium oral capsule</i>	1	
<i>diclofenac potassium oral powder in packet</i>	1	ST; QL (99 per 99 days)
<i>diclofenac potassium oral tablet 25 mg</i>	1	ST
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium oral</i>	1	
<i>diclofenac sodium topical drops</i>	1	QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
<i>diclofenac sodium topical solution in metered-dose pump</i>	1	ST; QL (99 per 99 days)
<i>diclofenac-misoprostol</i>	1	
<i>diflunisal</i>	1	
<i>ecotrin low strength</i>	6	ACA; OTC
<i>etodolac</i>	1	
<i>fenoprofen</i>	1	ST
<i>flurbiprofen</i>	1	
<i>ibu</i>	1	
<i>ibuprofen</i>	1	
<i>ibuprofen-famotidine</i>	1	ST
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	
<i>indomethacin oral suspension</i>	1	ST
<i>indomethacin rectal</i>	1	
<i>ketoprofen oral capsule 25 mg</i>	1	ST
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr</i>	1	ST
<i>ketorolac</i>	1	QL (99 per 99 days)
<i>kiprofen</i>	1	ST
KLOXXADO	2	QL (99 per 99 days)
<i>lofena</i>	1	ST
<i>meclofenamate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mefenamic acid</i>	1	
<i>meloxicam</i>	1	QL (99 per 99 days)
<i>meloxicam submicronized</i>	1	ST; QL (99 per 99 days)
<i>nabumetone</i>	1	
<i>naloxone injection</i>	1	PA
<i>naloxone nasal</i>	1	QL (99 per 99 days)
<i>naltrexone</i>	1	
<i>naproxen oral suspension</i>	1	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	1	
<i>naproxen sodium oral tablet</i>	1	
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	1	ST
<i>naproxen-esomeprazole</i>	1	ST
NUCYNTA	3	QL (99 per 99 days)
NUCYNTA ER	3	ST; QL (99 per 99 days)
<i>oxaprozin</i>	1	
<i>pentazocine-naloxone</i>	1	
<i>piroxicam</i>	1	
REXTOVY	2	QL (99 per 99 days)
<i>salsalate</i>	1	
<i>st joseph aspirin</i>	6	ACA; OTC
<i>sulindac</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>tolmetin</i>	1	ST
<i>tramadol oral tablet</i>	1	QL (99 per 99 days)
<i>tramadol oral tablet extended release 24 hr</i>	1	ST; QL (99 per 99 days)
<i>tramadol oral tablet, er multiphase 24 hr</i>	1	ST; QL (99 per 99 days)
<i>tramadol-acetaminophen</i>	1	QL (99 per 99 days)
VISCO-3	4	PA
VIVITROL	4	
ZUBSOLV	2	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFI	2	
ABILIFY MAINTENA	2	
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	1	
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	1	
<i>amphetamine sulfate</i>	1	PA
<i>aripiprazole oral solution</i>	1	
<i>aripiprazole oral tablet</i>	1	QL (99 per 99 days)
<i>aripiprazole oral tablet, disintegrating</i>	1	QL (99 per 99 days)
ARISTADA	2	
ARISTADA INITIO	2	
<i>armodafinil</i>	1	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>asenapine maleate</i>	1	QL (99 per 99 days)
<i>atomoxetine</i>	1	PA
BELSOMRA	3	ST; QL (99 per 99 days)
<i>bupropion hcl oral tablet</i>	1	
<i>bupropion hcl oral tablet extended release 24 hr</i>	1	QL (99 per 99 days)
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	QL (99 per 99 days)
<i>buspirone</i>	1	
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine</i>	1	
<i>citalopram oral solution</i>	1	
<i>citalopram oral tablet</i>	1	QL (99 per 99 days)
<i>clomipramine</i>	1	
<i>clonidine hcl</i>	1	PA
<i>clorazepate dipotassium</i>	1	
<i>clozapine</i>	1	
<i>desipramine</i>	1	
<i>desvenlafaxine succinate</i>	1	ST; QL (99 per 99 days)
<i>dexmethylphenidate</i>	1	PA
<i>dextroamphetamine sulfate</i>	1	PA
<i>dextroamphetamine-amphetamine</i>	1	PA
<i>diazepam</i>	1	
<i>diazepam intensol</i>	1	
<i>doxepin oral capsule</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	1	ST; QL (99 per 99 days)
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	QL (99 per 99 days)
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	1	ST; QL (99 per 99 days)
<i>ergoloid</i>	1	
<i>escitalopram oxalate oral solution</i>	1	ST
<i>escitalopram oxalate oral tablet</i>	1	QL (99 per 99 days)
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL (99 per 99 days)
FETZIMA	3	ST; QL (99 per 99 days)
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	QL (99 per 99 days)
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	ST; QL (99 per 99 days)
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	ST; QL (99 per 99 days)
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	ST
<i>fluphenazine hcl</i>	1	
<i>flurazepam</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>fluvoxamine oral capsule, extended release 24hr</i>	1	ST; QL (99 per 99 days)
<i>fluvoxamine oral tablet</i>	1	QL (99 per 99 days)
<i>guanfacine</i>	1	PA
<i>haloperidol</i>	1	
<i>haloperidol lactate</i>	1	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
LATUDA	3	QL (99 per 99 days)
<i>lisdexamfetamine oral capsule</i>	1	PA
<i>lisdexamfetamine oral tablet, chewable</i>	1	ST
<i>lithium carbonate</i>	1	
<i>lithium citrate</i>	1	
<i>lorazepam</i>	1	
<i>lorazepam intensol</i>	1	
<i>loxapine succinate</i>	1	
LUMRYZ	4	ST; QL (99 per 99 days)
<i>lurasidone</i>	1	QL (99 per 99 days)
MARPLAN	3	
<i>methamphetamine</i>	1	PA
<i>methylphenidate</i>	1	ST
<i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60</i>	1	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	1	PA
<i>methylphenidate hcl oral solution</i>	1	PA
<i>methylphenidate hcl oral tablet</i>	1	PA
<i>methylphenidate hcl oral tablet extended release</i>	1	PA
<i>methylphenidate hcl oral tablet extended release 24hr</i>	1	PA
<i>methylphenidate hcl oral tablet,chewable</i>	1	PA
<i>midazolam</i>	1	
<i>mirtazapine</i>	1	
<i>modafinil</i>	1	PA; QL (99 per 99 days)
<i>molindone</i>	1	
<i>nortriptyline</i>	1	
<i>olanzapine</i>	1	QL (99 per 99 days)
<i>olanzapine-fluoxetine</i>	1	
<i>oxazepam</i>	1	
<i>paliperidone</i>	1	QL (99 per 99 days)
<i>paroxetine hcl oral suspension</i>	1	ST
<i>paroxetine hcl oral tablet</i>	1	QL (99 per 99 days)
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	ST; QL (99 per 99 days)
<i>paroxetine mesylate(menop.sym)</i>	1	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
<i>phenelzine</i>	1	
<i>pimozide</i>	1	
<i>procentra</i>	1	PA
<i>protriptyline</i>	1	
QUAZEPAM	3	
<i>quetiapine</i>	1	QL (99 per 99 days)
<i>ramelteon</i>	1	QL (99 per 99 days)
REXULTI	3	QL (99 per 99 days)
<i>risperidone microspheres</i>	1	
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	QL (99 per 99 days)
<i>risperidone oral tablet,disintegrating</i>	1	QL (99 per 99 days)
RYKINDO	2	
<i>sertraline oral concentrate</i>	1	
<i>sertraline oral tablet</i>	1	QL (99 per 99 days)
SODIUM OXYBATE	4	ST; LA; QL (99 per 99 days)
SUNOSI	2	PA; QL (99 per 99 days)
<i>temazepam</i>	1	
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
<i>tranlycypromine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>trazodone</i>	1	
<i>triazolam</i>	1	
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	1	
TRINTELLIX	3	ST; QL (99 per 99 days)
<i>venlafaxine oral capsule, extended release 24hr</i>	1	QL (99 per 99 days)
<i>venlafaxine oral tablet</i>	1	QL (99 per 99 days)
<i>venlafaxine oral tablet extended release 24hr</i>	1	ST; QL (99 per 99 days)
<i>vilazodone</i>	1	ST; QL (99 per 99 days)
XYWAV	4	ST; LA; QL (99 per 99 days)
<i>zaleplon</i>	1	QL (99 per 99 days)
<i>zenedi</i>	1	PA
<i>ziprasidone hcl</i>	1	QL (99 per 99 days)
<i>zolpidem</i>	1	QL (99 per 99 days)
ZULRESSO	4	
ZURZUVAE	4	QL (99 per 99 days)

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone</i>	1	
<i>disopyramide phosphate</i>	1	
<i>dofetilide</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>flecainide</i>	1	
<i>mexiletine</i>	1	
MULTAQ	3	
<i>pacerone</i>	1	
<i>propafenone</i>	1	
<i>quinidine gluconate</i>	1	
<i>quinidine sulfate</i>	1	
<i>sotalol</i>	1	
<i>sotalol af</i>	1	
SOTYLIZE	2	

ANTIHYPERTENSIVE THERAPY

<i>acebutolol</i>	1	
<i>aliskiren</i>	1	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	1	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hcthiazid</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
<i>betaxolol</i>	1	
<i>bisoprolol fumarate</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide</i>	1	
<i>candesartan</i>	1	
<i>candesartan-hydrochlorothiazid</i>	1	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
<i>cartia xt</i>	1	
<i>carvedilol</i>	1	
<i>carvedilol phosphate</i>	1	
<i>chlorthalidone</i>	1	
<i>clonidine</i>	1	QL (99 per 99 days)
<i>clonidine hcl</i>	1	
<i>diltiazem</i>	1	
<i>dilt-xr</i>	1	
<i>doxazosin</i>	1	QL (99 per 99 days)
<i>enalapril maleate</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>eplerenone</i>	1	
<i>epoprostenol</i>	4	PA
<i>eprosartan</i>	1	
<i>ethacrynic acid</i>	1	
<i>felodipine</i>	1	
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide</i>	1	
<i>guanfacine</i>	1	
<i>hydralazine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide-hydralazine</i>	1	
<i>isradipine</i>	1	
KERENDIA	2	PA; QL (99 per 99 days)
<i>labetalol</i>	1	
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
<i>matzim la</i>	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol ta-hydrochlorothiaz</i>	1	
<i>metoprolol tartrate</i>	1	
<i>metyrosine</i>	1	PA
<i>minoxidil</i>	1	
<i>moexipril</i>	1	
<i>nadolol</i>	1	
<i>nebivolol</i>	1	
<i>nicardipine</i>	1	
<i>nifedipine</i>	1	
<i>nimodipine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>nisoldipine</i>	1	
<i>olmesartan</i>	1	
<i>olmesartan-amlodipin-hcthiiazid</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	1	
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	1	PA
<i>pindolol</i>	1	
<i>prazosin</i>	1	
<i>propranolol</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
<i>spironolactone</i>	1	
<i>spironolacton-hydrochlorothiaz</i>	1	
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	1	
<i>telmisartan-hydrochlorothiazid</i>	1	
<i>terazosin</i>	1	QL (99 per 99 days)
<i>tiadylt er</i>	1	
<i>timolol maleate</i>	1	
<i>toremide</i>	1	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	1	
<i>treprostinil sodium</i>	4	PA

Drug Name	Drug Tier	Requirements / Limits
<i>triamterene</i>	1	
<i>triamterene-hydrochlorothiazid</i>	1	
UPTRAVI	4	PA; LA; QL (99 per 99 days)
<i>valsartan</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
<i>veletri</i>	4	PA
<i>verapamil</i>	1	
CARDIAC GLYCOSIDES		
<i>digoxin</i>	1	
COAGULATION THERAPY		
ADVATE	4	PA
ADYNOVATE	4	PA
AFSTYLA	4	PA
ALPHANATE	4	PA
ALTUVIIIIO	4	PA
<i>aminocaproic acid</i>	1	
<i>aspirin-dipyridamole</i>	1	
BENEFIX	4	PA
BRILINTA	2	
CABLIVI	4	PA; LA
CEPROTIN (BLUE BAR)	4	PA
CEPROTIN (GREEN BAR)	4	PA
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
COAGADDEX	4	PA
CORIFACT	4	PA
<i>dabigatran etexilate</i>	1	
<i>dipyridamole</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
DOPTELET (15 TAB PACK)	4	PA; LA; QL (99 per 99 days)
ELIQUIS	2	
ELIQUIS DVT-PE TREAT 30D START	2	
ELOCTATE	4	PA
<i>enoxaparin</i>	4	PA
ESPEROCT	4	PA
FEIBA NF	4	PA
<i>fondaparinux</i>	4	PA
HEMGENIX	4	PA
HEMLIBRA	4	PA
HEMOFIL M HIGH	4	PA
HEMOFIL M LOW	4	PA
HEMOFIL M MID	4	PA
HEMOFIL M SUPER HIGH	4	PA
<i>hep flush-10 (pf)</i>	1	PA
<i>heparin (porcine)</i>	1	PA
<i>heparin (porcine) in 5 % dex</i>	1	
<i>heparin (porcine) in nacl (pf)</i>	1	PA
<i>heparin lock flush (porcine)</i>	1	PA
<i>heparin lockflush(porcine)(pf)</i>	1	PA
<i>heparin(porcine) in 0.45% nacl</i>	1	PA
<i>heparin, porcine (pf)</i>	1	PA
HUMATE-P	4	PA
IDELVION	4	PA

Drug Name	Drug Tier	Requirements / Limits
<i>jantoven</i>	1	
JIVI	4	PA
KOGENATE FS	4	PA
KOVALTRY	4	PA
NOVOEIGHT	4	PA
NPLATE	4	PA
OBIZUR	4	PA
<i>pentoxifylline</i>	1	
<i>phytonadione (vitamin k1) injection</i>	1	PA
<i>phytonadione (vitamin k1) oral</i>	1	PA; QL (99 per 99 days)
<i>prasugrel</i>	1	
PROFILNINE	4	PA
PROMACTA	4	PA; LA
RIASTAP	4	PA
ROCTAVIAN	4	PA
SEVENFACT	4	PA
TAVALISSE	4	PA; LA; QL (99 per 99 days)
TRETTEN	4	PA
<i>vitamin k</i>	1	PA
<i>vitamin k1</i>	1	PA
VONVENDI	4	PA
<i>warfarin</i>	1	
XARELTO	2	
XARELTO DVT-PE TREAT 30D START	2	
XYNTHA	4	PA
XYNTHA SOLOFUSE	4	PA

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Drug Name	Drug Tier	Requirements / Limits
ZONTIVITY	3	PA
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>amlodipine-atorvastatin</i>	1	QL (99 per 99 days)
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	6	ACA; QL (99 per 99 days)
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL (99 per 99 days)
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam</i>	1	
<i>colestipol</i>	1	
<i>ezetimibe</i>	1	
<i>ezetimibe-simvastatin</i>	1	QL (99 per 99 days)
<i>fenofibrate micronized</i>	1	
<i>fenofibrate nanocrystallized</i>	1	
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	1	ST
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	
<i>fenofibric acid</i>	1	
<i>fenofibric acid (choline)</i>	1	
<i>fluvastatin</i>	6	ACA; QL (99 per 99 days)
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	1	PA
JUXTAPID	4	PA; LA
<i>lovastatin</i>	6	ACA; QL (99 per 99 days)
<i>niacin</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>omega-3 acid ethyl esters</i>	1	PA
<i>pitavastatin calcium</i>	6	ACA; QL (99 per 99 days)
<i>pravastatin</i>	6	ACA; QL (99 per 99 days)
<i>prevalite</i>	1	
REPATHA PUSHTRONEX	2	PA
REPATHA SURECLICK	2	PA
REPATHA SYRINGE	2	PA
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	6	ACA; QL (99 per 99 days)
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL (99 per 99 days)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	6	ACA; QL (99 per 99 days)
<i>simvastatin oral tablet 80 mg</i>	1	QL (99 per 99 days)
MISCELLANEOUS CARDIOVASCULAR AGENTS		
CAMZYOS	4	PA; QL (99 per 99 days)
ENTRESTO	2	QL (99 per 99 days)
<i>ranolazine</i>	1	
VERQUVO	2	QL (99 per 99 days)
VYNDAMAX	4	PA
VYNDAQEL	4	PA
NITRATES		
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>nitro-bid</i>	1	
<i>nitroglycerin</i>	1	
<i>nitro-time</i>	1	

DERMATOLOGICALS/TOPICAL THERAPY

ANTIPSORIATIC / ANTISEBORRHEIC

<i>acitretin</i>	1	
<i>calcipotriene</i>	1	QL (99 per 99 days)
<i>calcipotriene-betamethasone topical ointment</i>	1	ST; QL (99 per 99 days)
<i>calcipotriene-betamethasone topical suspension</i>	1	QL (99 per 99 days)
<i>calcitriol</i>	1	
<i>hydrocortisone-pramoxine</i>	1	ST
<i>selenium sulfide</i>	1	
SKYRIZI	4	PA; QL (99 per 99 days)
SOTYKTU	4	PA; QL (99 per 99 days)
SPEVIGO	4	PA
STELARA	4	PA; QL (99 per 99 days)
<i>sulfacetamide sodium</i>	1	
TALTZ AUTOINJECTOR	4	PA; QL (99 per 99 days)
TALTZ AUTOINJECTOR (2 PACK)	4	PA; QL (99 per 99 days)
TALTZ AUTOINJECTOR (3 PACK)	4	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
TALTZ SYRINGE	4	PA; QL (99 per 99 days)
TREMFYA	4	PA; QL (99 per 99 days)

BURN THERAPY

<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	

MISCELLANEOUS DERMATOLOGICALS

ADBRY SUBCUTANEOUS AUTO-INJECTOR	4	PA
ADBRY SUBCUTANEOUS SYRINGE	4	PA; QL (99 per 99 days)
<i>ammonium lactate</i>	1	
CIBINQO	4	PA; QL (99 per 99 days)
<i>diclofenac sodium</i>	1	PA; QL (99 per 99 days)
<i>doxepin</i>	1	ST; QL (99 per 99 days)
DUPIXENT PEN	4	PA; QL (99 per 99 days)
DUPIXENT SYRINGE	4	PA; QL (99 per 99 days)
<i>fluorouracil</i>	1	
<i>methoxsalen</i>	1	
<i>methyl salicylate</i>	1	
<i>pimecrolimus</i>	1	ST; QL (99 per 99 days)
<i>podofilox topical gel</i>	1	ST; QL (99 per 99 days)
<i>podofilox topical solution</i>	1	
<i>prudoxin</i>	1	ST; QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
REGRANEX	2	QL (99 per 99 days)
<i>tacrolimus</i>	1	ST; QL (99 per 99 days)
VALCHLOR	4	PA
VEREGEN	3	PA; QL (99 per 99 days)
<i>wintergreen oil</i>	1	
THERAPY FOR ACNE		
<i>accutane</i>	1	
<i>adapalene topical cream</i>	1	
<i>adapalene topical gel</i>	1	
<i>adapalene topical gel with pump</i>	1	
<i>adapalene topical solution</i>	1	
<i>adapalene topical swab</i>	1	ST
<i>adapalene-benzoyl peroxide</i>	1	
<i>amnesteem</i>	1	
<i>avar</i>	1	
<i>azelaic acid</i>	1	
<i>benzepro</i>	1	
<i>benzoyl peroxide</i>	1	
<i>bp 10-1</i>	1	ST
<i>brimonidine</i>	1	PA
<i>claravis</i>	1	
<i>clindacin</i>	1	QL (99 per 99 days)
<i>clindacin etz</i>	1	
<i>clindacin p</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate topical foam</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical gel</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical gel, once daily</i>	1	ST; QL (99 per 99 days)
<i>clindamycin phosphate topical lotion</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical solution</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide</i>	1	
<i>clindamycin-tretinoin</i>	1	
<i>dapsone</i>	1	
<i>ery pads</i>	1	
<i>erygel</i>	1	
<i>erythromycin with ethanol</i>	1	
<i>erythromycin-benzoyl peroxide</i>	1	
<i>isotretinoin</i>	1	
<i>ivermectin</i>	1	QL (99 per 99 days)
<i>metronidazole</i>	1	
<i>neuac</i>	1	
<i>rosadan</i>	1	
<i>rosula cleansing cloths</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sss 10-5</i>	1	
<i>sulfacetamide sodium-sulfur</i>	1	
<i>sulfacleanse 8-4</i>	1	ST
<i>tazarotene</i>	1	PA
<i>tretinoin</i>	1	
<i>tretinoin microspheres</i>	1	
<i>zenatane</i>	1	
TOPICAL ANESTHETICS		
<i>dermacinrx lidocan</i>	1	ST
<i>lidocaine hcl</i>	1	
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine topical adhesive patch,medicated</i>	1	ST
<i>lidocaine topical ointment</i>	1	QL (99 per 99 days)
<i>lidocaine viscous</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	QL (99 per 99 days)
<i>lidocaine-prilocaine topical kit</i>	1	
<i>lidocan iii</i>	1	ST
<i>lidocan iv</i>	1	ST
<i>lidocan v</i>	1	ST
<i>lidocort</i>	1	
<i>tridacaine ii</i>	1	ST
ZTLIDO	2	ST
TOPICAL ANTIBACTERIALS		
<i>gentamicin</i>	1	QL (99 per 99 days)
<i>lugols</i>	1	
<i>mafenide acetate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mupirocin</i>	1	QL (99 per 99 days)
<i>mupirocin calcium</i>	1	ST; QL (99 per 99 days)
<i>strong iodine</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLON	2	
TOPICAL ANTIFUNGALS		
<i>ciclodan topical cream</i>	1	QL (99 per 99 days)
<i>ciclodan topical solution</i>	1	
<i>ciclopirox topical cream</i>	1	QL (99 per 99 days)
<i>ciclopirox topical gel</i>	1	QL (99 per 99 days)
<i>ciclopirox topical shampoo</i>	1	QL (99 per 99 days)
<i>ciclopirox topical solution</i>	1	
<i>ciclopirox topical suspension</i>	1	QL (99 per 99 days)
<i>ciclopirox-ure-camph-menth-euc</i>	1	
<i>clotrimazole</i>	1	QL (99 per 99 days)
<i>clotrimazole-betamethasone</i>	1	QL (99 per 99 days)
<i>econazole</i>	1	QL (99 per 99 days)
ERTACZO	3	QL (99 per 99 days)
EXELDERM	3	QL (99 per 99 days)
JUBLIA	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ketoconazole topical cream</i>	1	QL (99 per 99 days)
<i>ketoconazole topical foam</i>	1	ST; QL (99 per 99 days)
<i>ketoconazole topical shampoo</i>	1	QL (99 per 99 days)
<i>ketodan</i>	1	ST; QL (99 per 99 days)
<i>ketodan kit</i>	1	ST
<i>klayesta</i>	1	QL (99 per 99 days)
LULICONAZOLE	3	QL (99 per 99 days)
<i>naftifine</i>	1	QL (99 per 99 days)
<i>nyamyc</i>	1	QL (99 per 99 days)
<i>nystatin</i>	1	QL (99 per 99 days)
<i>nystatin-triamcinolone</i>	1	QL (99 per 99 days)
<i>nystop</i>	1	QL (99 per 99 days)
<i>oxiconazole</i>	1	QL (99 per 99 days)
<i>tavaborole</i>	1	ST
TOPICAL ANTIVIRALS		
<i>acyclovir</i>	1	PA; QL (99 per 99 days)
<i>penciclovir</i>	1	
XERESE	3	
TOPICAL CORTICOSTEROIDS		
<i>ala-cort</i>	1	
<i>alclometasone</i>	1	
<i>amcinonide</i>	1	ST
<i>apexicon e</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>beseer</i>	1	ST
<i>betamethasone dipropionate</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	1	ST
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented</i>	1	
<i>clobetasol scalp</i>	1	QL (99 per 99 days)
<i>clobetasol topical cream</i>	1	QL (99 per 99 days)
<i>clobetasol topical foam</i>	1	ST; QL (99 per 99 days)
<i>clobetasol topical gel</i>	1	QL (99 per 99 days)
<i>clobetasol topical lotion</i>	1	ST; QL (99 per 99 days)
<i>clobetasol topical ointment</i>	1	QL (99 per 99 days)
<i>clobetasol topical shampoo</i>	1	ST; QL (99 per 99 days)
<i>clobetasol topical spray, non-aerosol</i>	1	ST; QL (99 per 99 days)
<i>clobetasol-emollient topical cream</i>	1	QL (99 per 99 days)
<i>clobetasol-emollient topical foam</i>	1	ST; QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
<i>clocortolone pivalate</i>	1	
<i>clodan</i>	1	ST; QL (99 per 99 days)
<i>desonide topical cream</i>	1	
<i>desonide topical gel</i>	1	ST
<i>desonide topical lotion</i>	1	ST
<i>desonide topical ointment</i>	1	
<i>desoximetasone</i>	1	ST
<i>diflorasone</i>	1	ST; QL (99 per 99 days)
<i>fluocinolone</i>	1	
<i>fluocinolone and shower cap</i>	1	
<i>fluocinonide topical cream 0.05 %</i>	1	QL (99 per 99 days)
<i>fluocinonide topical cream 0.1 %</i>	1	ST; QL (99 per 99 days)
<i>fluocinonide topical gel</i>	1	QL (99 per 99 days)
<i>fluocinonide topical ointment</i>	1	QL (99 per 99 days)
<i>fluocinonide topical solution</i>	1	QL (99 per 99 days)
<i>fluocinonide-e</i>	1	QL (99 per 99 days)
<i>flurandrenolide</i>	1	ST; QL (99 per 99 days)
<i>fluticasone propionate topical cream</i>	1	
<i>fluticasone propionate topical lotion</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propionate topical ointment</i>	1	
<i>halcinonide</i>	1	ST
<i>halobetasol propionate topical cream</i>	1	
<i>halobetasol propionate topical foam</i>	1	ST
<i>halobetasol propionate topical ointment</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone butyrate topical cream</i>	1	QL (99 per 99 days)
<i>hydrocortisone butyrate topical lotion</i>	1	ST; QL (99 per 99 days)
<i>hydrocortisone butyrate topical ointment</i>	1	ST; QL (99 per 99 days)
<i>hydrocortisone butyrate topical solution</i>	1	ST; QL (99 per 99 days)
<i>hydrocortisone valerate</i>	1	
<i>mometasone</i>	1	
<i>prednicarbate</i>	1	
<i>scalacort</i>	1	
<i>tovet emollient</i>	1	ST; QL (99 per 99 days)
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL (99 per 99 days)
<i>triamcinolone acetonide topical cream</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
TOPICAL ENZYMES		
SANTYL	2	QL (99 per 99 days)
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan</i>	1	
<i>malathion</i>	1	
<i>permethrin</i>	1	
<i>spinosad</i>	1	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		
<i>lactated ringers</i>	1	
<i>neomycin-polymyxin b gu</i>	1	
<i>ringer's</i>	1	
<i>tis-u-sol pentalyte</i>	1	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	1	
<i>acetic acid</i>	1	
<i>anagrelide</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ARALAST NP	4	PA; LA
<i>caffeine citrate</i>	1	
CARBAGLU	4	PA; LA
<i>carglumic acid</i>	4	PA
<i>cevimeline</i>	1	
CHEMET	2	PA
<i>deferasirox</i>	4	PA
<i>deferiprone</i>	4	PA
<i>disulfiram</i>	1	
EMPAVELI	4	PA
ENJAYMO	4	PA
FABHALTA	4	PA
FERRIPROX	4	PA
FERRIPROX (2 TIMES A DAY)	4	PA
GLASSIA	4	PA; LA
<i>glutamine (sickle cell)</i>	1	
INCRELEX	4	PA; LA
LAMZEDE	4	PA
<i>levocarnitine</i>	1	
<i>levocarnitine (with sugar)</i>	1	
<i>midodrine</i>	1	
<i>nitisinone</i>	4	PA; LA
NITYR	4	PA; LA
PHEBURANE	4	PA
<i>pilocarpine hcl</i>	1	
PROLASTIN-C	4	PA; LA
REVCOVI	4	PA; LA
REZDIFFRA	4	PA; QL (99 per 99 days)
<i>riluzole</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>risedronate</i>	1	QL (99 per 99 days)
<i>sodium chloride 0.9 %</i>	1	PA
<i>sodium chloride injection</i>	1	PA
<i>sodium chloride irrigation</i>	1	
<i>sodium phenylbutyrate</i>	1	PA
SOLIRIS	4	PA
<i>tiopronin</i>	4	PA
<i>trientine</i>	1	PA
<i>water for irrigation, sterile</i>	1	
XENPOZYME	4	PA
XURIDEN	4	PA
ZEMAIRA	4	PA; LA
<i>zoledronic acid-mannitol-water</i>	4	PA
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deter)</i>	6	ACA
<i>nicorette buccal gum</i>	6	ACA; OTC
NICORETTE BUCCAL LOZENGE	2	OTC
NICORETTE BUCCAL MINI LOZENGE	2	OTC
<i>nicotine</i>	6	ACA; OTC
<i>nicotine (polacrilex)</i>	6	ACA; OTC
NICOTROL NS	6	ACA
<i>quit 2</i>	6	ACA; OTC
<i>quit 4</i>	6	ACA; OTC
<i>stop smoking aid</i>	6	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>varenicline</i>	6	ACA
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
<i>azelastine nasal spray, non-aerosol 137 mcg (0.1 %)</i>	1	QL (99 per 99 days)
<i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i>	1	
<i>chlorhexidine gluconate</i>	1	
<i>ipratropium bromide</i>	1	QL (99 per 99 days)
<i>kourzeq</i>	1	
<i>olopatadine</i>	1	QL (99 per 99 days)
<i>oralone</i>	1	
<i>paroex oral rinse</i>	1	
<i>periogard</i>	1	
<i>pilocarpine hcl</i>	1	
<i>triamcinolone acetonide</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid</i>	1	
<i>ciprofloxacin hcl</i>	1	
<i>flac otic oil</i>	1	
<i>fluocinolone acetonide oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin</i>	1	
OTIC STEROID / ANTIBIOTIC		
CIPRO HC	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ciprofloxacin-dexamethasone</i>	1	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	1	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
<i>cortisone</i>	1	
<i>deflazacort</i>	4	PA
<i>dexabliss</i>	1	PA
<i>dexamethasone intensol</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets, dose pack</i>	1	PA
<i>fludrocortisone</i>	1	
<i>hydrocortisone</i>	1	
<i>methylprednisolone</i>	1	
<i>millipred</i>	1	
<i>millipred dp</i>	1	
<i>prednisolone</i>	1	
<i>prednisolone sodium phosphate</i>	1	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>potassium iodide</i>	1	
<i>propylthiouracil</i>	1	

Drug Name	Drug Tier	Requirements / Limits
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
FREESTYLE INSULINX	2	OTC
FREESTYLE INSULINX TEST STRIPS	2	OTC
FREESTYLE LITE STRIPS	2	OTC
FREESTYLE PRECISION NEO STRIPS	2	OTC
FREESTYLE TEST	2	OTC
PRECISION XTRA TEST	2	OTC
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
ACE AEROSOL CLOUD ENHANCER	2	
AEROCHAMBER MINI	2	
AEROCHAMBER PLUS FLOW-VU	2	
AEROCHAMBER PLUS Z STAT	2	
AEROTRACH PLUS	2	
AEROVENT PLUS	2	
BREATHERITE MDI SPACER	2	
COMPACT SPACE CHAMBER	2	
EASIVENT HOLDING CHAMBER	2	
FLEXICHAMBER	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
LITEAIRE MDI CHAMBER	2	
MICROCHAMBER	2	
MICROSPACER	2	
OPTICHAMBER DIAMOND VHC	2	
POCKET CHAMBER	2	
PRIMEAIRE	2	
PROCHAMBER	2	
RITEFLO AEROCHAMBER	2	
SPACE CHAMBER	2	
VORTEX HOLDING CHAMBER	2	
GLUCOSE ELEVATING AGENTS		
BAQSIMI	2	QL (99 per 99 days)
<i>diazoxide</i>	1	
<i>glucagon emergency kit (human)</i>	1	QL (99 per 99 days)
GVOKE	2	QL (99 per 99 days)
GVOKE HYPOPEN 2-PACK	2	QL (99 per 99 days)
GVOKE PFS 2-PACK SYRINGE	2	QL (99 per 99 days)
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
BD INTEGRA NEEDLE	2	
BD MICROTAINER LANCET	2	OTC

Drug Name	Drug Tier	Requirements / Limits
BD SPECIALTY USE NEEDLES	2	
BD ULTRA-FINE NANO PEN NEEDLE	2	OTC
CEQR SIMPLICITY	2	
FREESTYLE CONTROL	2	OTC
FREESTYLE FLASH SYSTEM	2	OTC
FREESTYLE FREEDOM	2	OTC
FREESTYLE FREEDOM LITE	2	OTC
FREESTYLE INSULINX	2	OTC
FREESTYLE LIBRE 14 DAY READER	DME	ST
FREESTYLE LIBRE 14 DAY SENSOR	DME	ST; QL (99 per 99 days)
FREESTYLE LIBRE 2 READER	DME	ST
FREESTYLE LIBRE 2 SENSOR	DME	ST; QL (99 per 99 days)
FREESTYLE LIBRE 3 READER	DME	ST; QL (99 per 99 days)
FREESTYLE LIBRE 3 SENSOR	DME	ST; QL (99 per 99 days)
FREESTYLE LITE METER	2	OTC
FREESTYLE SIDEKICK II	2	OTC
FREESTYLE SYSTEM KIT	2	OTC
LANCETS	2	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
LANCING DEVICE	2	OTC
MEDISENSE	2	OTC
MEDISENSE GLUCOSE KETONE	2	OTC
OMNIPOD 5 G6 INTRO KIT (GEN 5)	2	QL (99 per 99 days)
OMNIPOD 5 G6 PODS (GEN 5)	2	QL (99 per 99 days)
OMNIPOD CLASSIC PODS (GEN 3)	2	QL (99 per 99 days)
OMNIPOD DASH INTRO KIT (GEN 4)	2	QL (99 per 99 days)
OMNIPOD DASH PODS (GEN 4)	2	QL (99 per 99 days)
OMNIPOD GO PODS 10 UNITS/DAY	2	QL (99 per 99 days)
PRECISION XTRA KETONE- GLUCOSE	2	OTC
PRECISION XTRA MONITOR	2	OTC
V-GO 20	2	
V-GO 30	2	
V-GO 40	2	
INSULIN THERAPY		
APIDRA SOLOSTAR U-100 INSULIN	3	
APIDRA U-100 INSULIN	3	
HUMALOG JUNIOR KWIKPEN U-100	2	

Drug Name	Drug Tier	Requirements / Limits
HUMALOG KWIKPEN INSULIN	2	
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 75-25 KWIKPEN	2	
HUMALOG MIX 75-25(U- 100)INSULN	2	
HUMALOG TEMPO PEN(U- 100)INSULN	2	
HUMALOG U-100 INSULIN	2	
HUMULIN 70/30 U-100 INSULIN	2	
HUMULIN 70/30 U-100 KWIKPEN	2	
HUMULIN N NPH INSULIN KWIKPEN	2	
HUMULIN N NPH U-100 INSULIN	2	
HUMULIN R REGULAR U-100 INSULN	2	
HUMULIN R U-500 (CONC) INSULIN	2	
HUMULIN R U-500 (CONC) KWIKPEN	2	
INSULIN LISPRO	2	
INSULIN LISPRO PROTAMIN- LISPRO	2	
LEVEMIR FLEXPEN	3	
LEVEMIR U-100 INSULIN	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
LYUMJEV KWIKPEN U-100 INSULIN	2	
LYUMJEV KWIKPEN U-200 INSULIN	2	
LYUMJEV TEMPO PEN(U-100)INSULN	2	
LYUMJEV U-100 INSULIN	2	
NOVOLOG FLEXPEN U-100 INSULIN	3	
NOVOLOG MIX 70-30 U-100 INSULN	3	
NOVOLOG MIX 70-30FLEXPEN U-100	3	
NOVOLOG PENFILL U-100 INSULIN	3	
NOVOLOG U-100 INSULIN ASPART	3	
RELION NOVOLIN 70/30	3	
RELION NOVOLIN N	3	
RELION NOVOLIN R	3	
SEMGLEE(INSULIN GLARGINE-YFGN)	2	
SEMGLEE(INSULIN GLARG-YFGN)PEN	2	
TOUJEO MAX U-300 SOLOSTAR	2	

Drug Name	Drug Tier	Requirements / Limits
TOUJEO SOLOSTAR U-300 INSULIN	2	
MISCELLANEOUS HORMONES		
ALDURAZYME	4	PA
BRINEURA	4	PA
<i>cabergoline</i>	1	QL (99 per 99 days)
<i>calcitonin (salmon) injection</i>	1	PA
<i>calcitonin (salmon) nasal</i>	1	
CERDELGA	4	PA; QL (99 per 99 days)
CEREZYME	4	PA
<i>cinacalcet</i>	1	ST
<i>clomiphene citrate</i>	1	
CRYSVITA	4	PA; QL (99 per 99 days)
<i>danazol</i>	1	
<i>desmopressin injection</i>	4	PA
<i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i>	1	PA
DESMOPRESSIN NASAL SPRAY,NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	PA
<i>desmopressin oral</i>	1	
<i>doxercalciferol</i>	1	ST
ELAPRASE	4	PA
ELFABRIO	4	PA
FABRAZYME	4	PA

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Drug Name	Drug Tier	Requirements / Limits
<i>javygtor</i>	4	PA
KANUMA	4	PA
LUMIZYME	4	PA
MEPSEVII	4	PA
METHITEST	2	PA
<i>methyltestosterone</i>	1	PA
<i>mifepristone</i>	4	PA
<i>miglustat</i>	4	PA; LA; QL (99 per 99 days)
MYALEPT	4	PA; LA
NAGLAZYME	4	PA; LA
ORLISSA	2	ST; QL (99 per 99 days)
PALYNZIQ	4	PA; LA; QL (99 per 99 days)
<i>paricalcitol intravenous</i>	1	PA
<i>paricalcitol oral</i>	1	ST
<i>sapropterin</i>	4	PA
SOMAVERT	4	PA
STRENSIQ	4	PA; LA
<i>testosterone</i>	1	PA; QL (99 per 99 days)
<i>testosterone cypionate</i>	1	PA
<i>testosterone enanthate</i>	1	PA
<i>tolvaptan</i>	4	PA; LA; QL (99 per 99 days)
VIMIZIM	4	PA
<i>zoledronic acid</i>	4	PA
<i>zoledronic acid-mannitol-water</i>	4	PA

Drug Name	Drug Tier	Requirements / Limits
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose</i>	1	
BRENZAVVY	2	ST; QL (99 per 99 days)
BYDUREON BCISE	2	ST; QL (99 per 99 days)
BYETTA	2	ST; QL (99 per 99 days)
FARXIGA	2	ST; QL (99 per 99 days)
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide-metformin</i>	1	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYXAMBI	2	ST; QL (99 per 99 days)
JANUMET	2	ST; QL (99 per 99 days)
JANUMET XR	2	ST; QL (99 per 99 days)
JANUVIA	2	ST; QL (99 per 99 days)
JARDIANCE	2	ST; QL (99 per 99 days)
<i>metformin oral solution</i>	1	ST
<i>metformin oral tablet</i>	1	
<i>metformin oral tablet extended release 24 hr</i>	1	QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral tablet extended release 24hr</i>	1	ST; QL (99 per 99 days)
<i>metformin oral tablet,er gast.retention 24 hr</i>	1	ST; QL (99 per 99 days)
<i>miglitol</i>	1	
MOUNJARO	2	ST; QL (99 per 99 days)
<i>nateglinide</i>	1	
<i>pioglitazone</i>	1	QL (99 per 99 days)
<i>pioglitazone-glimepiride</i>	1	QL (99 per 99 days)
<i>pioglitazone-metformin</i>	1	QL (99 per 99 days)
<i>repaglinide</i>	1	
<i>saxagliptin</i>	1	ST; QL (99 per 99 days)
<i>saxagliptin-metformin</i>	1	ST; QL (99 per 99 days)
SEGLUROMET	2	ST; QL (99 per 99 days)
STEGLATRO	2	ST; QL (99 per 99 days)
SYMLINPEN 120	2	ST; QL (99 per 99 days)
SYMLINPEN 60	2	ST; QL (99 per 99 days)
SYNJARDY	2	ST; QL (99 per 99 days)
SYNJARDY XR	2	ST; QL (99 per 99 days)
TRIJARDY XR	2	ST
TRULICITY	2	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
XIGDUO XR	2	ST; QL (99 per 99 days)

THYROID HORMONES

<i>adthyza</i>	1	
ARMOUR THYROID	2	
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<i>levothyroxine</i>	1	
<i>levoxyl</i>	1	
<i>liothyronine</i>	1	
<i>niva thyroid</i>	1	
<i>np thyroid</i>	1	
<i>thyroid (pork)</i>	1	
<i>unithroid</i>	1	

GASTROENTEROLOGY

ANTIDIARRHEALS & ANTISPASMODICS

<i>anaspaz</i>	1	
<i>belladonna alkaloids-opium</i>	1	
<i>chlordiazepoxide-clidinium</i>	1	
<i>dicyclomine</i>	1	
<i>diphenoxylate-atropine</i>	1	
<i>ed-spaz</i>	1	
<i>glycopyrrolate</i>	1	
<i>hyoscyamine sulfate</i>	1	
<i>hyosyne</i>	1	
<i>loperamide</i>	1	
<i>methscopolamine</i>	1	
<i>opium tincture</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
<i>phenobarb-hyoscy-atropine-scop</i>	1	
<i>phenohydro</i>	1	
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	
MISCELLANEOUS AGENTS		
<i>lanthanum</i>	1	QL (99 per 99 days)
LOKELMA	2	QL (99 per 99 days)
<i>sevelamer carbonate</i>	1	QL (99 per 99 days)
<i>sevelamer hcl</i>	1	QL (99 per 99 days)
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (with sorbitol)</i>	1	
VELPHORO	3	QL (99 per 99 days)
MISCELLANEOUS GASTROINTESTINAL AGENTS		
<i>alosetron</i>	1	
<i>alvimopan</i>	1	
<i>anucort-hc</i>	1	
<i>aprepitant</i>	1	QL (99 per 99 days)
<i>balsalazide</i>	1	
<i>betaine</i>	4	PA
<i>budesonide</i>	1	
CHENODAL	4	PA; LA
CHOLBAM ORAL CAPSULE 250 MG	4	PA

Drug Name	Drug Tier	Requirements / Limits
CHOLBAM ORAL CAPSULE 50 MG	4	PA; QL (99 per 99 days)
<i>citrate of magnesia</i>	6	ACA; OTC
<i>citroma</i>	6	ACA; OTC
<i>clearlax</i>	6	ACA; OTC
<i>compro</i>	1	
<i>constulose</i>	1	
CREON	2	
<i>cromolyn</i>	1	
DIPENTUM	3	
<i>doxylamine-pyridoxine (vit b6)</i>	1	QL (99 per 99 days)
<i>dronabinol</i>	1	PA
<i>dulcolax (magnesium hydroxide)</i>	6	ACA; OTC
ENTYVIO	4	PA
<i>enulose</i>	1	
<i>gavilax</i>	6	ACA; OTC
<i>gavilyte-c</i>	6	ACA
<i>gavilyte-g</i>	6	ACA
<i>gavilyte-n</i>	6	ACA
<i>generlac</i>	1	
<i>gentle laxative (bisacodyl)</i>	6	ACA; OTC
<i>gentlelax</i>	6	ACA; OTC
<i>granisetron hcl</i>	1	QL (99 per 99 days)
<i>hemmorex-hc</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone acetate</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1	ST
INFLECTRA	4	PA
<i>lactulose</i>	1	
<i>laxative (bisacodyl)</i>	6	ACA; OTC
<i>laxative peg 3350</i>	6	ACA; OTC
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine-hydrocortisone-aloe</i>	1	
LINZESS	2	QL (99 per 99 days)
<i>lubiprostone</i>	1	QL (99 per 99 days)
<i>magnesium citrate</i>	6	ACA; OTC
<i>meclizine</i>	1	
<i>mesalamine</i>	1	
<i>mesalamine with cleansing wipe</i>	1	
<i>metoclopramide hcl</i>	1	
<i>milk of magnesia</i>	6	ACA; OTC
<i>milk of magnesia concentrated</i>	6	ACA; OTC
MOVANTIK	2	QL (99 per 99 days)
<i>natura-lax</i>	6	ACA; OTC
<i>nitroglycerin</i>	1	
OCALIVA	4	PA; LA; QL (99 per 99 days)
OMVOH	4	PA
OMVOH PEN	4	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>ondansetron</i>	1	QL (99 per 99 days)
<i>ondansetron hcl</i>	1	QL (99 per 99 days)
<i>onelax magnesium citrate</i>	6	ACA; OTC
<i>oral saline laxative</i>	6	ACA; OTC
PANCREAZE	2	
<i>peg 3350-electrolytes</i>	6	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	6	ACA
<i>peg-electrolyte soln</i>	6	ACA
PENTASA	2	
<i>phosphate laxative</i>	6	ACA; OTC
<i>polyethylene glycol 3350</i>	6	ACA; OTC
<i>powderlax</i>	6	ACA; OTC
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<i>purelax</i>	6	ACA; OTC
RELISTOR	2	ST
<i>scopolamine base</i>	1	
SKYRIZI INTRAVENOUS	4	PA
SKYRIZI SUBCUTANEOUS	4	PA; QL (99 per 99 days)
<i>smoothlax</i>	6	ACA; OTC
<i>sodium,potassium,mag sulfates</i>	6	ACA
SUCRAID	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sulfasalazine</i>	1	
<i>trimethobenzamide</i>	1	
TRULANCE	2	
<i>ursodiol</i>	1	
VARUBI	2	QL (99 per 99 days)
VIBERZI	2	
VIOKACE	2	
<i>women's gentle laxative(bisac)</i>	6	ACA; OTC
ZENPEP	2	
ZYMFENTRA	4	PA; QL (99 per 99 days)

ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz</i>	1	QL (99 per 99 days)
<i>bismuth subcit k-metronidz-tcn</i>	1	
<i>cimetidine</i>	1	
<i>cimetidine hcl</i>	1	
DEXILANT ORAL CAPSULE,BIPHAS E DELAYED RELEAS 30 MG	3	ST; QL (99 per 99 days)
DEXILANT ORAL CAPSULE,BIPHAS E DELAYED RELEAS 60 MG	3	ST
<i>dexlansoprazole oral capsule,biphase delayed releas 30 mg</i>	1	ST; QL (99 per 99 days)
<i>dexlansoprazole oral capsule,biphase delayed releas 60 mg</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec)</i>	1	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	1	ST; QL (99 per 99 days)
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	1	ST
<i>famotidine</i>	1	
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	1	QL (99 per 99 days)
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	1	
<i>lansoprazole oral tablet,disintegrat, delay rel 15 mg</i>	1	ST; QL (99 per 99 days)
<i>lansoprazole oral tablet,disintegrat, delay rel 30 mg</i>	1	ST
<i>misoprostol</i>	1	
<i>nizatidine</i>	1	
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL (99 per 99 days)
<i>omeprazole oral capsule,delayed release(dr/ec) 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	1	PA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	1	PA
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	1	PA; QL (99 per 99 days)
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	1	PA
<i>pantoprazole oral granules dr for susp in packet</i>	1	ST
<i>pantoprazole oral tablet,delayed release (dr/ec) 20 mg</i>	1	QL (99 per 99 days)
<i>pantoprazole oral tablet,delayed release (dr/ec) 40 mg</i>	1	
<i>rabeprazole</i>	1	
<i>sucralfate</i>	1	
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY		
ANTIVIRALS		
<i>ribavirin</i>	4	ST
BIOTECHNOLOGY DRUGS		
FULPHILA	4	PA; QL (99 per 99 days)
ILARIS (PF)	4	PA; LA
LEUKINE	4	PA
NIVESTYM	4	PA
<i>plerixafor</i>	4	PA
PROCRIT	4	PA
PROLEUKIN	4	PA
RETACRIT	4	PA

Drug Name	Drug Tier	Requirements / Limits
ZIEXTENZO	4	PA; QL (99 per 99 days)
ZYNTEGLO	4	PA
GROWTH HORMONES		
EGRIFTA SV	4	PA
OMNITROPE	4	PA
INTERFERONS		
ACTIMMUNE	4	PA
ALFERON N	2	PA
PEGASYS	4	PA; QL (99 per 99 days)
MULTIPLE SCLEROSIS AGENTS		
AVONEX	4	PA; QL (99 per 99 days)
BAFIERTAM	4	PA; QL (99 per 99 days)
BETASERON	4	PA; QL (99 per 99 days)
<i>dimethyl fumarate</i>	4	PA; QL (99 per 99 days)
<i>fingolimod</i>	4	PA; QL (99 per 99 days)
<i>glatiramer</i>	4	PA; QL (99 per 99 days)
<i>glatopa</i>	4	PA; QL (99 per 99 days)
KESIMPTA PEN	4	PA; QL (99 per 99 days)
MAYZENT	4	PA; QL (99 per 99 days)
MAYZENT STARTER(FOR 1MG MAINT)	4	PA; QL (99 per 99 days)
MAYZENT STARTER(FOR 2MG MAINT)	4	PA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
OCREVUS	4	PA; QL (99 per 99 days)
PLEGRIDY	4	PA; QL (99 per 99 days)
PONVORY	4	PA; QL (99 per 99 days)
PONVORY 14-DAY STARTER PACK	4	PA; QL (99 per 99 days)
REBIF (WITH ALBUMIN)	4	PA; QL (99 per 99 days)
REBIF REBIDOSE	4	PA; QL (99 per 99 days)
REBIF TITRATION PACK	4	PA; QL (99 per 99 days)
<i>teriflunomide</i>	4	PA; QL (99 per 99 days)
VUMERITY	4	PA; QL (99 per 99 days)

VACCINES & MISCELLANEOUS IMMUNOLOGICALS

ABRYSVO (PF)	6	ACA
ACTHIB (PF)	6	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	6	ACA
AFLURIA TRIV 2024-2025	6	ACA
AFLURIA TRIV 2024-2025 (PF)	6	ACA
AREXVY (PF)	6	ACA
BCG VACCINE, LIVE (PF)	2	
BEXSERO	6	ACA
BIOTHRAX	2	
BOOSTRIX TDAP	6	ACA
CAPVAXIVE	6	ACA

Drug Name	Drug Tier	Requirements / Limits
DAPTACEL (DTAP PEDIATRIC) (PF)	6	ACA
DENGVAXIA (PF)	6	ACA
DYSPORT	4	PA
ENGERIX-B (PF)	6	ACA
ENGERIX-B PEDIATRIC (PF)	6	ACA
FLUAD TRIV 2024-25(65Y UP)(PF)	6	ACA
FLUARIX TRIV 2024-2025 (PF)	6	ACA
FLUBLOK TRIV 2024-2025 (PF)	6	ACA
FLUCELVAX TRIV 2024-2025	6	ACA
FLUCELVAX TRIV 2024-2025 (PF)	6	ACA
FLULAVAL TRIV 2024-2025 (PF)	6	ACA
FLUZONE HIGH-DOSE TRIV 24-25	6	ACA
FLUZONE TRIV 2024-2025	6	ACA
FLUZONE TRIV 2024-2025 (PF)	6	ACA
GAMASTAN	4	PA
GAMMAGARD LIQUID	4	PA
GAMMAGARD S-D (IGA < 1 MCG/ML)	4	PA
GAMUNEX-C	4	PA
GARDASIL 9 (PF)	6	ACA
GRASTEK	2	PA
HAVRIX (PF)	6	ACA
HEPLISAV-B (PF)	6	ACA

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Drug Name	Drug Tier	Requirements / Limits
HIBERIX (PF)	6	ACA
IMOVAX RABIES VACCINE (PF)	2	
INFANRIX (DTAP) (PF)	6	ACA
IPOL	6	ACA
IXCHIQ (PF)	2	
IXIARO (PF)	2	
KINRIX (PF)	6	ACA
MENQUADFI (PF)	6	ACA
MENVEO A-C-Y-W-135-DIP (PF)	6	ACA
M-M-R II (PF)	6	ACA
MODERNA COVID 23-24(6M-11Y)PF	2	
MRESVIA (PF)	6	ACA
MYOBLOC	4	PA
NOVAVAX COVID 2023-24(PF)(EUA)	2	
ODACTRA	2	PA
PEDIARIX (PF)	6	ACA
PEDVAX HIB (PF)	6	ACA
PENBRAYA (PF)	6	ACA
PENTACEL (PF)	6	ACA
PNEUMOVAX-23	6	ACA
PREHEVBRIO (PF)	6	ACA
PREVNAR 20 (PF)	6	ACA
PRIORIX (PF)	6	ACA
PROQUAD (PF)	6	ACA
QUADRACEL (PF)	6	ACA
RABAVERT (PF)	2	
RAGWITEK	2	PA
RECOMBIVAX HB (PF)	6	ACA

Drug Name	Drug Tier	Requirements / Limits
ROTARIX	6	ACA
ROTATEQ VACCINE	6	ACA
SHINGRIX (PF)	6	ACA
SPIKEVAX 2023-2024(12Y UP)(PF)	2	
STAMARIL (PF)	2	
TDVAX	6	ACA
TENIVAC (PF)	6	ACA
TICOVAC	2	
TRUMENBA	6	ACA
TWINRIX (PF)	6	ACA
TYPHIM VI	2	
VAQTA (PF)	6	ACA
VARIVAX (PF)	6	ACA
VAXCHORA VACCINE	2	
VAXELIS (PF)	6	ACA
VAXNEUVANCE (PF)	6	ACA
VIVOTIF	2	
XEMBIFY	4	PA
YF-VAX (PF)	2	

IMMUNOLOGY

INTERLEUKINS

<i>imiquimod</i>	1	
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MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

<i>allopurinol</i>	1	
<i>colchicine oral capsule</i>	1	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>colchicine oral tablet</i>	1	
<i>febuxostat</i>	1	ST
KRYSTEXXA	4	PA
<i>probenecid</i>	1	
<i>probenecid-colchicine</i>	1	

OSTEOPOROSIS THERAPY

<i>alendronate</i>	1	QL (99 per 99 days)
FOSAMAX PLUS D	3	ST; QL (99 per 99 days)
<i>ibandronate intravenous</i>	4	PA
<i>ibandronate oral</i>	1	QL (99 per 99 days)
<i>raloxifene</i>	1	
<i>risedronate</i>	1	QL (99 per 99 days)
<i>teriparatide</i>	4	PA; QL (99 per 99 days)
TYMLOS	4	PA; QL (99 per 99 days)

OTHER RHEUMATOLOGICALS

ACTEMRA ACTPEN	4	PA; QL (99 per 99 days)
ACTEMRA INTRAVENOUS	4	PA
ACTEMRA SUBCUTANEOUS	4	PA; QL (99 per 99 days)
ADALIMUMAB- ADAZ	4	PA; QL (99 per 99 days)
ADALIMUMAB- ADBM	4	PA; QL (99 per 99 days)
ADALIMUMAB- ADBM(CF) PEN CROHNS	4	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
ADALIMUMAB- ADBM(CF) PEN PS-UV	4	PA; QL (99 per 99 days)
ADALIMUMAB- RYVK	4	PA; QL (99 per 99 days)
BENLYSTA INTRAVENOUS	4	PA
BENLYSTA SUBCUTANEOUS	4	PA; QL (99 per 99 days)
CYLTEZO(CF)	4	PA; QL (99 per 99 days)
CYLTEZO(CF) PEN	4	PA; QL (99 per 99 days)
CYLTEZO(CF) PEN CROHN'S-UC- HS	4	PA; QL (99 per 99 days)
CYLTEZO(CF) PEN PSORIASIS- UV	4	PA; QL (99 per 99 days)
ENBREL	4	PA; QL (99 per 99 days)
ENBREL MINI	4	PA; QL (99 per 99 days)
ENBREL SURECLICK	4	PA; QL (99 per 99 days)
HUMIRA (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)
HUMIRA PEN (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)
HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074)	4	PA; QL (99 per 99 days)
HYRIMOZ PEN CROHN'S-UC STARTER	4	PA; QL (99 per 99 days)
HYRIMOZ PEN PSORIASIS STARTER	4	PA; QL (99 per 99 days)
HYRIMOZ(CF)	4	PA; QL (99 per 99 days)
HYRIMOZ(CF) PEDI CROHN STARTER	4	PA; QL (99 per 99 days)
HYRIMOZ(CF) PEN	4	PA; QL (99 per 99 days)
<i>leflunomide</i>	1	QL (99 per 99 days)
OTEZLA	4	PA; QL (99 per 99 days)
OTEZLA STARTER	4	PA; QL (99 per 99 days)
<i>penicillamine</i>	1	PA
RIDAURA	2	
RINVOQ	4	PA; QL (99 per 99 days)
RINVOQ LQ	4	PA

Drug Name	Drug Tier	Requirements / Limits
SAVELLA	2	ST; QL (99 per 99 days)
SIMLANDI(CF) AUTOINJECTOR	4	PA; QL (99 per 99 days)
SIMPONI	4	PA; QL (99 per 99 days)
TYENNE	4	PA
TYENNE AUTOINJECTOR	4	PA
XELJANZ	4	PA; QL (99 per 99 days)
XELJANZ XR	4	PA; QL (99 per 99 days)

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED	6	ACA
FC2 FEMALE CONDOM	6	ACA; OTC
FEMCAP	6	ACA
KYLEENA	4	
MIRENA	4	ACA
PARAGARD T 380A	4	ACA
SKYLA	4	
TRUSTEX-RIA NON-LUB CONDOMS	6	ACA; OTC

ESTROGENS & PROGESTINS

<i>camila</i>	6	ACA
<i>covaryx</i>	1	
<i>covaryx h.s.</i>	1	
<i>deblitane</i>	6	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>dotti</i>	1	QL (99 per 99 days)
DUAVEE	3	
<i>eemt</i>	1	
<i>eemt hs</i>	1	
<i>emzahh</i>	6	ACA
<i>errin</i>	6	ACA
<i>estradiol oral</i>	1	
<i>estradiol transdermal</i>	1	QL (99 per 99 days)
<i>estradiol vaginal</i>	1	
<i>estradiol valerate</i>	1	
<i>estradiol-norethindrone acet</i>	1	
<i>estrogens-methyltestosterone</i>	1	
<i>fyavolv</i>	1	
<i>heather</i>	6	ACA
<i>incassia</i>	6	ACA
<i>jencycla</i>	6	ACA
<i>jinteli</i>	1	
<i>lyleq</i>	6	ACA
<i>lyllana</i>	1	QL (99 per 99 days)
<i>lyza</i>	6	ACA
<i>medroxyprogesterone intramuscular</i>	6	ACA; QL (99 per 99 days)
<i>medroxyprogesterone oral</i>	1	
<i>mimvey</i>	1	
<i>nora-be</i>	6	ACA
<i>norethindrone (contraceptive)</i>	6	ACA
<i>norethindrone acetate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone ac-eth estradiol</i>	1	
OPILL	6	ACA; OTC
<i>progesterone</i>	4	PA
<i>progesterone micronized</i>	1	
<i>sharobel</i>	6	ACA
<i>tulana</i>	6	ACA
<i>yuvafem</i>	1	
MISCELLANEOUS OB/GYN		
<i>clindamycin phosphate</i>	1	
<i>eluryng</i>	6	ACA
<i>enilloring</i>	6	ACA
<i>etonogestrel-ethinyl estradiol</i>	6	ACA
<i>fem ph</i>	1	
GYNAZOLE-1	3	
<i>haloette</i>	6	ACA
<i>metronidazole</i>	1	
<i>miconazole-3</i>	1	
<i>mifepristone</i>	1	
MYFEMBREE	2	PA
NEXPLANON	4	ACA
<i>norelgestromin-ethin.estradiol</i>	6	ACA
ORIAHNN	2	PA
OSPHENA	3	
<i>terconazole</i>	1	
<i>tranexamic acid</i>	1	
TRIMO-SAN JELLY	2	
<i>vandazole</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VCF CONTRACEPTIVE FILM	2	OTC
VCF CONTRACEPTIVE GEL	6	ACA; OTC
<i>xulane</i>	6	ACA
<i>zafemy</i>	6	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle</i>	6	ACA
<i>after pill</i>	6	ACA; OTC; QL (99 per 99 days)
<i>altavera (28)</i>	6	ACA
<i>alyacen 1/35 (28)</i>	6	ACA
<i>alyacen 7/7/7 (28)</i>	6	ACA
<i>amethia</i>	6	ACA
<i>amethyst (28)</i>	6	ACA
<i>apri</i>	6	ACA
<i>aranelle (28)</i>	6	ACA
<i>ashlyna</i>	6	ACA
<i>aubra</i>	6	ACA
<i>aubra eq</i>	6	ACA
<i>aurovela 1.5/30 (21)</i>	6	ACA
<i>aurovela 1/20 (21)</i>	6	ACA
<i>aurovela 24 fe</i>	6	ACA
<i>aurovela fe 1.5/30 (28)</i>	6	ACA
<i>aurovela fe 1-20 (28)</i>	6	ACA
<i>aviane</i>	6	ACA
<i>ayuna</i>	6	ACA
<i>azurette (28)</i>	6	ACA
<i>balziva (28)</i>	6	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>blisovi 24 fe</i>	6	ACA
<i>blisovi fe 1.5/30 (28)</i>	6	ACA
<i>blisovi fe 1/20 (28)</i>	6	ACA
<i>briellyn</i>	6	ACA
<i>camrese</i>	6	ACA
<i>camrese lo</i>	6	ACA
<i>caziant (28)</i>	6	ACA
<i>charlotte 24 fe</i>	6	ACA
<i>chateal (28)</i>	6	ACA
<i>chateal eq (28)</i>	6	ACA
<i>cryselle (28)</i>	6	ACA
<i>curae</i>	6	ACA; OTC; QL (99 per 99 days)
<i>cyred</i>	6	ACA
<i>cyred eq</i>	6	ACA
<i>dasetta 1/35 (28)</i>	6	ACA
<i>dasetta 7/7/7 (28)</i>	6	ACA
<i>daysee</i>	6	ACA
<i>desog- e.estradiol/e.estradio l</i>	6	ACA
<i>dolishale</i>	6	ACA
<i>drospirenone- e.estradiol-lm.fa</i>	6	ACA
<i>drospirenone-ethinyl estradiol</i>	6	ACA
<i>econtra ez</i>	6	ACA; OTC; QL (99 per 99 days)
<i>econtra one-step</i>	6	ACA; OTC; QL (99 per 99 days)
<i>elinest</i>	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ELLA	6	ACA; QL (99 per 99 days)
<i>enpresse</i>	6	ACA
<i>enskyce</i>	6	ACA
<i>estarylla</i>	6	ACA
<i>ethynodiol diac-eth estradiol</i>	6	ACA
<i>falmina (28)</i>	6	ACA
<i>finzala</i>	6	ACA
<i>gemmily</i>	6	ACA
<i>hailey</i>	6	ACA
<i>hailey 24 fe</i>	6	ACA
<i>hailey fe 1.5/30 (28)</i>	6	ACA
<i>hailey fe 1/20 (28)</i>	6	ACA
<i>her style</i>	6	ACA; OTC; QL (99 per 99 days)
<i>iclevia</i>	6	ACA
<i>isibloom</i>	6	ACA
<i>jaimiess</i>	6	ACA
<i>jasmiel (28)</i>	6	ACA
<i>jolessa</i>	6	ACA
<i>joyeaux</i>	6	ACA
<i>juleber</i>	6	ACA
<i>junel 1.5/30 (21)</i>	6	ACA
<i>junel 1/20 (21)</i>	6	ACA
<i>junel fe 1.5/30 (28)</i>	6	ACA
<i>junel fe 1/20 (28)</i>	6	ACA
<i>junel fe 24</i>	6	ACA
<i>kaitlib fe</i>	6	ACA
<i>kalliga</i>	6	ACA
<i>kariva (28)</i>	6	ACA
<i>kelnor 1/35 (28)</i>	6	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>kelnor 1-50 (28)</i>	6	ACA
<i>kurvelo (28)</i>	6	ACA
<i>l norgest/e.estradiol-e.estrad</i>	6	ACA
<i>larin 1.5/30 (21)</i>	6	ACA
<i>larin 1/20 (21)</i>	6	ACA
<i>larin 24 fe</i>	6	ACA
<i>larin fe 1.5/30 (28)</i>	6	ACA
<i>larin fe 1/20 (28)</i>	6	ACA
<i>layolis fe</i>	6	ACA
<i>leena 28</i>	6	ACA
<i>lessina</i>	6	ACA
<i>levonest (28)</i>	6	ACA
<i>levonorgest-eth.estradiol-iron</i>	6	ACA
<i>levonorgestrel</i>	6	ACA; OTC; QL (99 per 99 days)
<i>levonorgestrel-ethinyl estrad</i>	6	ACA
<i>levonorg-eth estrad triphasic</i>	6	ACA
<i>levora-28</i>	6	ACA
<i>lojaimiess</i>	6	ACA
<i>loryna (28)</i>	6	ACA
<i>low-ogestrel (28)</i>	6	ACA
<i>lo-zumandimine (28)</i>	6	ACA
<i>lutra (28)</i>	6	ACA
<i>marlissa (28)</i>	6	ACA
<i>merzee</i>	6	ACA
<i>mibelas 24 fe</i>	6	ACA
<i>microgestin 1.5/30 (21)</i>	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>microgestin 1/20 (21)</i>	6	ACA
<i>microgestin 24 fe</i>	6	ACA
<i>microgestin fe 1.5/30 (28)</i>	6	ACA
<i>microgestin fe 1/20 (28)</i>	6	ACA
<i>mili</i>	6	ACA
<i>mono-linyah</i>	6	ACA
<i>my choice</i>	6	ACA; OTC; QL (99 per 99 days)
<i>my way</i>	6	ACA; OTC; QL (99 per 99 days)
<i>necon 0.5/35 (28)</i>	6	ACA
<i>new day</i>	6	ACA; OTC; QL (99 per 99 days)
<i>nikki (28)</i>	6	ACA
<i>noreth-ethinyl estradiol-iron</i>	6	ACA
<i>norethindrone ac-eth estradiol</i>	6	ACA
<i>norethindrone-e.estradiol-iron</i>	6	ACA
<i>norgestimate-ethinyl estradiol</i>	6	ACA
<i>nortrel 0.5/35 (28)</i>	6	ACA
<i>nortrel 1/35 (21)</i>	6	ACA
<i>nortrel 1/35 (28)</i>	6	ACA
<i>nortrel 7/7/7 (28)</i>	6	ACA
<i>nylia 1/35 (28)</i>	6	ACA
<i>nylia 7/7/7 (28)</i>	6	ACA
<i>nymyo</i>	6	ACA
<i>ocella</i>	6	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>opcicon one-step</i>	6	ACA; OTC; QL (99 per 99 days)
<i>option-2</i>	6	ACA; OTC; QL (99 per 99 days)
<i>philith</i>	6	ACA
<i>pimtree (28)</i>	6	ACA
<i>portia 28</i>	6	ACA
<i>reclipsen (28)</i>	6	ACA
<i>rivelsa</i>	6	ACA
<i>setlakin</i>	6	ACA
<i>simliya (28)</i>	6	ACA
<i>simpesse</i>	6	ACA
<i>sprintec (28)</i>	6	ACA
<i>sronyx</i>	6	ACA
<i>syeda</i>	6	ACA
<i>tarina 24 fe</i>	6	ACA
<i>tarina fe 1/20 (28)</i>	6	ACA
<i>tilia fe</i>	6	ACA
<i>tri-estarylla</i>	6	ACA
<i>tri-legest fe</i>	6	ACA
<i>tri-linyah</i>	6	ACA
<i>tri-lo-estarylla</i>	6	ACA
<i>tri-lo-marzia</i>	6	ACA
<i>tri-lo-mili</i>	6	ACA
<i>tri-lo-sprintec</i>	6	ACA
<i>tri-mili</i>	6	ACA
<i>tri-nymyo</i>	6	ACA
<i>tri-sprintec (28)</i>	6	ACA
<i>trivora (28)</i>	6	ACA
<i>tri-vylibra</i>	6	ACA
<i>tri-vylibra lo</i>	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>turqoz (28)</i>	6	ACA
<i>tydemy</i>	6	ACA
<i>velivet triphasic regimen (28)</i>	6	ACA
<i>vestura (28)</i>	6	ACA
<i>vienva</i>	6	ACA
<i>viorele (28)</i>	6	ACA
<i>volnea (28)</i>	6	ACA
<i>vyfemla (28)</i>	6	ACA
<i>vylibra</i>	6	ACA
<i>wera (28)</i>	6	ACA
<i>wymzya fe</i>	6	ACA
<i>zarah</i>	6	ACA
<i>zovia 1-35 (28)</i>	6	ACA
<i>zumandimine (28)</i>	6	ACA
OXYTOCICS		
<i>methylergonovine</i>	1	PA; QL (99 per 99 days)
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE	3	
<i>bacitracin</i>	1	
<i>bacitracin-polymyxin b</i>	1	
BESIVANCE	3	
<i>ciprofloxacin hcl</i>	1	
<i>erythromycin</i>	1	
<i>gatifloxacin</i>	1	
<i>gentamicin</i>	1	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
NATACYN	2	

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	1	
<i>ofloxacin</i>	1	
<i>polycin</i>	1	
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>tobramycin</i>	1	
ANTIVIRALS		
<i>trifluridine</i>	1	
BETA-BLOCKERS		
<i>betaxolol</i>	1	
<i>carteolol</i>	1	
<i>levobunolol</i>	1	
<i>timolol maleate</i>	1	
<i>timolol maleate (pf)</i>	1	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE	4	
CYCLOPLEGIC MYDRIATICS		
<i>atropine</i>	1	
<i>cyclopentolate</i>	1	
<i>cyclopen-tropic-phenyleph-watr</i>	1	
<i>homatropaire</i>	1	
<i>tropicamide</i>	1	
DIRECT ACTING MIOTICS		
<i>pilocarpine hcl</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
MISCELLANEOUS OPHTHALMOLOGICS		
<i>alaway</i>	1	OTC
<i>allergy eye (ketotifen)</i>	1	OTC
ALOCRIAL	3	ST
ALOMIDE	3	ST
<i>altacaine</i>	1	
<i>azelastine</i>	1	
<i>bepotastine besilate</i>	1	
BYOOVIZ	4	PA
<i>children's alaway</i>	1	OTC
CIMERLI	4	PA
<i>cromolyn</i>	1	
<i>cyclosporine</i>	1	PA; QL (99 per 99 days)
CYSTARAN	4	PA
<i>epinastine</i>	1	
<i>eye allergy itch relief</i>	1	OTC
<i>eye allergy itch-redness rlf</i>	1	OTC
<i>eye itch relief</i>	1	OTC
<i>fluorescein-propraparacaine</i>	1	
<i>ketotifen fumarate</i>	1	OTC
LUXTURNA	4	PA
<i>olopatadine</i>	1	
OXERVATE	4	PA
<i>propraparacaine</i>	1	
RESTASIS MULTIDOSE	2	PA; QL (99 per 99 days)
<i>tetracaine hcl</i>	1	
<i>wal-zyr (ketotifen)</i>	1	OTC

Drug Name	Drug Tier	Requirements / Limits
XDEMVY	4	QL (99 per 99 days)
XIIDRA	2	PA; QL (99 per 99 days)
ZADITOR	2	OTC
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
<i>bromfenac</i>	1	
<i>diclofenac sodium</i>	1	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac</i>	1	
NEVANAC	3	ST
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	1	
<i>methazolamide</i>	1	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost</i>	1	ST
<i>brimonidine-timolol</i>	1	
<i>brinzolamide</i>	1	
<i>dorzolamide</i>	1	
<i>dorzolamide-timolol</i>	1	
<i>dorzolamide-timolol (pf)</i>	1	
<i>latanoprost</i>	1	ST
<i>miostat</i>	1	
<i>tafluprost (pf)</i>	1	ST
<i>travoprost</i>	1	ST
VYZULTA	3	ST
STEROID-ANTIBIOTIC COMBINATIONS		
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	1	
<i>tobramycin-dexamethasone</i>	1	
STEROIDS		
<i>dexamethasone sodium phosphate</i>	1	
<i>difluprednate</i>	1	
<i>fluorometholone</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,gel</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %</i>	1	ST
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i>	1	
OZURDEX	4	PA
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium</i>	1	
SYMPATHOMIMETICS		
<i>apraclonidine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>brimonidine</i>	1	
VASOCONSTRICTOR DECONGESTANTS		
<i>phenylephrine hcl</i>	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
<i>adrenalin</i>	1	
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>cetirizine</i>	1	
<i>clemastine</i>	1	
<i>cyproheptadine</i>	1	
<i>desloratadine</i>	1	QL (99 per 99 days)
<i>dexchlorpheniramine maleate</i>	1	
<i>epinephrine injection auto-injector</i>	1	QL (99 per 99 days)
<i>epinephrine injection syringe</i>	1	
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate</i>	1	
<i>levocetirizine oral solution</i>	1	
<i>levocetirizine oral tablet</i>	1	QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>promethazine</i>	1	
<i>promethegan</i>	1	
COUGH & COLD THERAPY		
<i>benzonatate</i>	1	
<i>brompheniramine-pseudoeph-dm</i>	1	
<i>hydrocodone-chlorpheniramine</i>	1	
<i>hydrocodone-homatropine</i>	1	
<i>hydromet</i>	1	
<i>promethazine vc</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
PULMONARY AGENTS		
<i>acetylcysteine</i>	DME	
ADEMPAS	4	PA; LA; QL (99 per 99 days)
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL (99 per 99 days)
<i>albuterol sulfate inhalation solution for nebulization</i>	DME	
<i>albuterol sulfate oral</i>	1	
ALVESCO	3	QL (99 per 99 days)
<i>alyq</i>	4	PA; QL (99 per 99 days)
<i>ambrisentan</i>	4	PA; LA; QL (99 per 99 days)
ANORO ELLIPTA	2	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>arformoterol</i>	DME	QL (99 per 99 days)
ARNUITY ELLIPTA	3	QL (99 per 99 days)
ASMANEX HFA	3	QL (99 per 99 days)
<i>azelastine-fluticasone</i>	1	ST; QL (99 per 99 days)
<i>bosentan</i>	4	PA; QL (99 per 99 days)
BREO ELLIPTA	2	ST; QL (99 per 99 days)
<i>breyna</i>	1	ST; QL (99 per 99 days)
BREZTRI AEROSPHERE	2	QL (99 per 99 days)
<i>budesonide</i>	DME	QL (99 per 99 days)
<i>budesonide-formoterol</i>	1	ST; QL (99 per 99 days)
CINRYZE	4	PA; QL (99 per 99 days)
COMBIVENT RESPIMAT	2	QL (99 per 99 days)
<i>cromolyn</i>	DME	
DULERA	2	ST; QL (99 per 99 days)
<i>epinephrine hcl</i>	1	
FASENRA PEN	4	PA; QL (99 per 99 days)
FASENRA SUBCUTANEOUS SYRINGE 10 MG/0.5 ML	4	PA
FASENRA SUBCUTANEOUS SYRINGE 30 MG/ML	4	PA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>flunisolide</i>	1	ST; QL (99 per 99 days)
<i>fluticasone propionate</i>	1	QL (99 per 99 days)
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED	2	ST; QL (99 per 99 days)
<i>fluticasone propion-salmeterol inhalation blister with device</i>	1	ST; QL (99 per 99 days)
<i>formoterol fumarate</i>	DME	QL (99 per 99 days)
<i>icatibant</i>	4	PA; QL (99 per 99 days)
INCRUSE ELLIPTA	2	QL (99 per 99 days)
<i>ipratropium bromide</i>	DME	
<i>ipratropium-albuterol</i>	DME	QL (99 per 99 days)
KALYDECO	4	PA; QL (99 per 99 days)
<i>levalbuterol hcl</i>	DME	
<i>mometasone</i>	1	ST; QL (99 per 99 days)
<i>montelukast</i>	1	
<i>nebusal</i>	DME	
NUCALA	4	PA; LA; QL (99 per 99 days)
OFEV	4	PA; QL (99 per 99 days)
OPSUMIT	4	PA; LA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
OPSYNVI	4	PA; QL (99 per 99 days)
ORKAMBI	4	PA; QL (99 per 99 days)
<i>pirfenidone</i>	4	PA; QL (99 per 99 days)
<i>pulmosal</i>	DME	
PULMOZYME	4	PA
QVAR REDIHALER	2	QL (99 per 99 days)
<i>roflumilast oral tablet 250 mcg</i>	1	PA; QL (99 per 99 days)
<i>roflumilast oral tablet 500 mcg</i>	1	PA
RUCONEST	4	PA; QL (99 per 99 days)
<i>sajazir</i>	4	PA; QL (99 per 99 days)
<i>sildenafil (pulm.hypertension) intravenous</i>	4	
<i>sildenafil (pulm.hypertension) oral</i>	4	PA; QL (99 per 99 days)
<i>sodium chloride</i>	DME	
SPIRIVA RESPIMAT	2	QL (99 per 99 days)
STIOLTO RESPIMAT	2	QL (99 per 99 days)
STRIVERDI RESPIMAT	2	QL (99 per 99 days)
SYMDEKO	4	PA; QL (99 per 99 days)
<i>tadalafil (pulm.hypertension)</i>	4	PA; QL (99 per 99 days)
TAKHZYRO	4	PA; LA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>terbutaline</i>	1	
TEZSPIRE	4	PA; QL (99 per 99 days)
<i>theophylline</i>	1	
<i>tiotropium bromide</i>	1	
TRACLEER	4	PA; LA; QL (99 per 99 days)
TRELEGY ELLIPTA	2	QL (99 per 99 days)
TRIKAFTA	4	PA; QL (99 per 99 days)
TYVASO	4	PA
TYVASO DPI	4	PA
TYVASO REFILL KIT	4	PA
TYVASO STARTER KIT	4	PA
<i>wixela inhub</i>	1	ST; QL (99 per 99 days)
XOLAIR	4	PA; LA; QL (99 per 99 days)
<i>zafirlukast</i>	1	
<i>zileuton</i>	1	PA
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin</i>	1	
<i>fesoterodine</i>	1	
<i>flavoxate</i>	1	
<i>mirabegron</i>	1	
<i>oxybutynin chloride</i>	1	
<i>solifenacin</i>	1	
<i>tolterodine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>trospium</i>	1	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin</i>	1	
<i>dutasteride</i>	1	ST
<i>dutasteride-tamsulosin</i>	1	ST
<i>finasteride</i>	1	
<i>silodosin</i>	1	
<i>tadalafil</i>	1	ST; QL (99 per 99 days)
<i>tamsulosin</i>	1	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	1	
MISCELLANEOUS UROLOGICALS		
CYSTAGON	4	LA
ELMIRON	2	
K-PHOS ORIGINAL	2	
<i>methen-sod phos-meth blue-hyos</i>	1	
<i>potassium citrate</i>	1	
RENACIDIN	2	
<i>sodium citrate-citric acid</i>	1	
<i>uretron d-s</i>	1	
<i>urimar-t</i>	1	
<i>uro-458</i>	1	
<i>urogesic-blue</i>	1	
<i>uro-mp</i>	1	
<i>uro-sp</i>	1	
<i>uryl</i>	1	
URINARY ANESTHETICS		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>phenazopyridine</i>	1	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
<i>calcium acetate(phosphat bind)</i>	1	QL (99 per 99 days)
<i>effer-k</i>	1	
<i>klor-con</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	
<i>lugols</i>	1	
<i>potassium chloride</i>	1	
<i>strong iodine</i>	1	
VITAMINS & HEMATINICS		
<i>b complex 1 (with folic acid)</i>	6	ACA; OTC
<i>b complex-vitamin c-folic acid</i>	6	ACA; OTC
<i>balanced b-100</i>	6	ACA; OTC
<i>bal-care dha</i>	1	
<i>b-complex with vitamin c</i>	6	ACA; OTC
<i>classic prenatal</i>	6	ACA; OTC
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
<i>dialyvite 800</i>	6	ACA; OTC
<i>ergocalciferol (vitamin d2)</i>	1	
<i>ferocon</i>	6	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>fluoride (sodium)</i>	6	ACA; OTC
<i>folic acid</i>	6	ACA; OTC
<i>folitab</i>	6	ACA; OTC
<i>foltabs 800</i>	6	ACA; OTC
<i>full spectrum b-vitamin c</i>	6	ACA; OTC
<i>hydroxocobalamin</i>	1	
<i>kobee</i>	6	ACA; OTC
<i>ludent fluoride</i>	6	ACA; OTC
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride</i>	6	ACA; OTC
<i>mvc-fluoride</i>	6	ACA; OTC
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	
<i>mynatal-z</i>	1	
<i>newgen</i>	1	
<i>one daily prenatal</i>	6	ACA; OTC
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	1	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
<i>prenal chew</i>	1	
<i>prenal pearl</i>	1	
<i>prenal true</i>	1	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal</i>	6	ACA; OTC
<i>prenatal complete</i>	6	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	6	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>prenatal multivitamins</i>	6	ACA; OTC
<i>prenatal one daily</i>	6	ACA; OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
<i>prenatal vit no.179-iron-folic</i>	6	ACA; OTC
<i>prenatal vitamin</i>	6	ACA; OTC
<i>prenatal vitamin with minerals</i>	6	ACA; OTC
<i>rena-vite</i>	6	ACA; OTC
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>stress formula with iron</i>	6	ACA; OTC
<i>stress formula with iron(sulf)</i>	6	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>super b maxi complex</i>	6	ACA; OTC
<i>super b-50 complex</i>	6	ACA; OTC
<i>super quintis</i>	6	ACA; OTC
<i>tricon</i>	6	ACA; OTC
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
<i>tri-vitamin with fluoride</i>	6	ACA; OTC
VENOFER	2	PA
<i>vitamin b complex-folic acid</i>	6	ACA; OTC
<i>vitamins a,c,d and fluoride</i>	6	ACA; OTC
<i>wesnatal dha complete</i>	1	
<i>wesnate dha</i>	1	
<i>westab plus</i>	1	
<i>westgel dha</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Index

A		
<i>abacavir</i>	3	
<i>abacavir-lamivudine</i>	3	
ABILIFY ASIMTUFII.....	17	
ABILIFY MAINTENA.....	17	
<i>abiraterone</i>	7	
ABRYSVO (PF).....	42	
<i>acamprosate</i>	30	
<i>acarbose</i>	36	
<i>accutane</i>	26	
ACE AEROSOL CLOUD		
ENHANCER.....	32	
<i>acebutolol</i>	20	
<i>acetaminophen-caff-</i>		
<i>dihydrocod</i>	14	
<i>acetaminophen-codeine</i>	14	
<i>acetazolamide</i>	51	
<i>acetic acid</i>	30, 31	
<i>acetylcysteine</i>	53	
<i>acitretin</i>	25	
ACTEMRA.....	44	
ACTEMRA ACTPEN.....	44	
ACTHIB (PF).....	42	
ACTIMMUNE.....	41	
<i>acyclovir</i>	3, 28	
ADACEL(TDAP		
ADOLESN/ADULT)(PF)	42	
ADAKVEO.....	7	
ADALIMUMAB-ADAZ.....	44	
ADALIMUMAB-ADBM.....	44	
ADALIMUMAB-ADBM(CF)		
PEN CROHNS.....	44	
ADALIMUMAB-ADBM(CF)		
PEN PS-UV.....	44	
ADALIMUMAB-RYVK.....	44	
<i>adapalene</i>	26	
<i>adapalene-benzoyl peroxide</i>	26	
ADBRY.....	25	
ADCETRIS.....	7	
<i>adefovir</i>	3	
ADEMPAS.....	53	
<i>adrenalin</i>	52	
<i>adthyza</i>	37	
ADVATE.....	22	
ADYNOVATE.....	22	
AEROCHAMBER MINI.....	32	
AEROCHAMBER PLUS		
FLOW-VU.....	32	
AEROCHAMBER PLUS Z		
STAT.....	32	
AEROTRACH PLUS.....	32	
AEROVENT PLUS.....	32	
<i>afirmelle</i>	47	
AFLURIA TRIV 2024-2025	42	
AFLURIA TRIV 2024-2025		
(PF).....	42	
AFSTYLA.....	22	
<i>after pill</i>	47	
AJOVY AUTOINJECTOR..	13	
AJOVY SYRINGE.....	13	
<i>ala-cort</i>	28	
<i>alaway</i>	51	
<i>albendazole</i>	5	
<i>albuterol sulfate</i>	53	
<i>alclometasone</i>	28	
ALDURAZYME.....	35	
ALECENSA.....	7	
<i>alendronate</i>	44	
ALFERON N.....	41	
<i>alfuzosin</i>	55	
ALINIA.....	5	
ALIQOPA.....	7	
<i>aliskiren</i>	20	
<i>allergy eye (ketotifen)</i>	51	
<i>allopurinol</i>	43	
<i>almotriptan malate</i>	13	
ALOCRIL.....	51	
ALOMIDE.....	51	
<i>alosetron</i>	38	
ALPHANATE.....	22	
<i>alprazolam</i>	17	
<i>alprazolam intensol</i>	17	
<i>altacaine</i>	51	
<i>altavera (28)</i>	47	
ALTUVIIIO.....	22	
ALUNBRIG.....	7	
ALVESCO.....	53	
<i>alvimopan</i>	38	
<i>alyacen 1/35 (28)</i>	47	
<i>alyacen 7/7/7 (28)</i>	47	
<i>alyq</i>	53	
<i>amantadine hcl</i>	3	
<i>ambrisentan</i>	53	
<i>amcinonide</i>	28	
<i>amethia</i>	47	
<i>amethyst (28)</i>	47	
<i>amiloride</i>	20	
<i>amiloride-hydrochlorothiazide</i>		
.....	20	
<i>aminocaproic acid</i>	22	
<i>amiodarone</i>	20	
<i>amitriptyline</i>	17	
<i>amitriptyline-chlordiazepoxide</i>		
.....	17	
<i>amlodipine</i>	20	
<i>amlodipine-atorvastatin</i>	24	
<i>amlodipine-benazepril</i>	20	
<i>amlodipine-olmesartan</i>	20	
<i>amlodipine-valsartan</i>	20	
<i>amlodipine-valsartan-hcthiiazid</i>		
.....	20	
<i>ammonium lactate</i>	25	
<i>amnestem</i>	26	
<i>amoxapine</i>	17	
<i>amoxicil-clarithromy-</i>		
<i>lansopraz</i>	40	
<i>amoxicillin</i>	6	
<i>amoxicillin-pot clavulanate</i>	6	
<i>amphetamine sulfate</i>	17	
<i>ampicillin</i>	6	
AMTAGVI.....	7	
<i>anagrelide</i>	30	
<i>anaspaz</i>	37	
<i>anastrozole</i>	7	
ANORO ELLIPTA.....	53	
<i>anucort-hc</i>	38	
<i>apexicon e</i>	28	
APIDRA SOLOSTAR U-100		
INSULIN.....	34	
APIDRA U-100 INSULIN.....	34	
<i>apomorphine</i>	12	
<i>apraclonidine</i>	52	
<i>aprepitant</i>	38	
APRETUDE.....	3	
<i>apri</i>	47	
APTIOM.....	11	
APTIVUS.....	3	
ARALAST NP.....	30	
<i>aranelle (28)</i>	47	
AREXVY (PF).....	42	

arformoterol 53
 ARIKAYCE 5
aripiprazole 17
 ARISTADA..... 17
 ARISTADA INITIO 17
armodafinil 17
 ARMOUR THYROID 37
 ARNUITY ELLIPTA..... 53
ascomp with codeine 14
asenapine maleate 17
ashlyna 47
 ASMANEX HFA 53
aspirin..... 15
aspirin childrens..... 15
aspirin-dipyridamole..... 22
atazanavir..... 3
atenolol..... 20
atenolol-chlorthalidone..... 20
atomoxetine 17
atorvastatin..... 24
atovaquone 5
atovaquone-proguanil 5
atropine 50
aubra 47
aubra eq..... 47
 AUGMENTIN..... 6
aurovela 1.5/30 (21) 47
aurovela 1/20 (21) 47
aurovela 24 fe..... 47
aurovela fe 1.5/30 (28) 47
aurovela fe 1-20 (28)..... 47
 AUSTEDO 13
 AUSTEDO XR..... 13
 AUSTEDO XR TITRATION
 KT(WK1-4)..... 13
avar..... 26
aviane 47
avidoxy 6
 AVONEX..... 41
ayuna 47
azacitidine 7
 AZASITE 50
azathioprine..... 7
azelaic acid..... 26
azelastine..... 31, 51
azelastine-fluticasone 53
azithromycin 4
azurette (28) 47

B
b complex 1 (with folic acid) 56
b complex-vitamin c-folic acid
 56
bacitracin..... 50
bacitracin-polymyxin b 50
baclofen 14
 BAFIERTAM..... 41
balanced b-100 56
bal-care dha 56
balsalazide..... 38
 BALVERSA..... 7
balziva (28)..... 47
 BAQSIMI 33
 BARACLUDGE..... 3
 BAVENCIO 7
bayer low dose aspirin 15
 BCG VACCINE, LIVE (PF) 42
b-complex with vitamin c..... 56
 BD INTEGRA NEEDLE 33
 BD MICROTAINER
 LANCET 33
 BD SPECIALTY USE
 NEEDLES 33
 BD ULTRA-FINE NANO
 PEN NEEDLE..... 33
belladonna alkaloids-opium .37
 BELSOMRA 17
benazepril 20
benazepril-hydrochlorothiazide
 20
bendamustine..... 7
 BENDEKA..... 7
 BENEFIX 22
 BENLYSTA 44
benzepril 26
 BENZNIDAZOLE 5
benzonatate..... 53
benzoyl peroxide..... 26
benztropine 12
bepotastine besilate 51
beser 28
 BESIVANCE..... 50
 BESPONSA..... 7
betaine 38
betamethasone dipropionate 28
betamethasone valerate 28
betamethasone, augmented ..28
 BETASERON 41

betaxolol 20, 50
bethanechol chloride 55
bexarotene 7
 BEXSERO..... 42
 BEYFORTUS..... 3
bicalutamide 7
 BIKTARVY 3
bimatoprost..... 51
 BIOTHRAX 42
bismuth subcit k-metronidz-tcn
 40
bisoprolol fumarate 20
bisoprolol-hydrochlorothiazide
 21
 BLINCYTO 7
blisovi 24 fe..... 47
blisovi fe 1.5/30 (28) 47
blisovi fe 1/20 (28) 47
 BOOSTRIX TDAP..... 42
bortezomib 7
 BORTEZOMIB 7
bosentan..... 53
 BOSULIF 7
bp 10-1..... 26
 BREATHERITE MDI
 SPACER..... 32
 BRENZAVVY 36
 BREO ELLIPTA 53
breyana 53
 BREZTRI AEROSPHERE... 53
briellyn..... 47
 BRILINTA 22
brimonidine..... 26, 52
brimonidine-timolol..... 51
 BRINEURA..... 35
brinzolamide 51
 BRIXADI 14
bromfenac 51
bromocriptine 12
brompheniramine-pseudoeph-
 dm 53
 BRUKINSA..... 7
budesonide 38, 53
budesonide-formoterol 53
bumetanide 21
buprenorphine 14
buprenorphine hcl 14
buprenorphine-naloxone 15
bupropion hcl..... 17

<i>bupropion hcl (smoking deter)</i>	<i>carisoprodol</i>	<i>cimetidine</i>
.....31	.....14	.....40
<i>bupirone</i>	<i>carteolol</i>	<i>cimetidine hcl</i>
.....17	.....50	.....40
<i>butalbital-acetaminop-caf-cod</i>	<i>cartia xt</i>	<i>cinacalcet</i>
.....14	.....21	.....35
<i>butalbital-acetaminophen</i>	<i>carvedilol</i>	CINRYZE.....
.....14	.....21	.....53
<i>butalbital-acetaminophen-caff</i>	<i>carvedilol phosphate</i>	CIPRO HC.....
.....14	.....21	.....31
<i>butalbital-aspirin-caffeine</i>	CARVYKTI	<i>ciprofloxacin</i>
.....14	.....7	.....6
<i>butorphanol</i>	CAYA CONTOURED	<i>ciprofloxacin hcl</i>
.....15	.....45	.....6, 31, 50
BYDUREON BCISE	CAYSTON	<i>ciprofloxacin-dexamethasone</i>
.....36	.....5	.....32
BYETTA.....	<i>caziant (28)</i>	<i>citalopram</i>
.....36	.....47	.....17
BYOOVIZ.....	<i>cefaclor</i>	<i>citrate of magnesia</i>
.....51	.....4	.....38
C	<i>cefadroxil</i>	<i>citroma</i>
CABENUVA.....	.....4	.....38
.....3	<i>cefdinir</i>	<i>claravis</i>
<i>cabergoline</i>.....	.....4	.....26
.....35	<i>cefixime</i>	<i>clarithromycin</i>
CABLIVI.....	.....4	.....4
.....22	<i>cefpodoxime</i>	<i>classic prenatal</i>
CABOMETYX.....	.....4	.....56
.....7	<i>cefprozil</i>	<i>clearlax</i>
<i>caffeine citrate</i>.....	.....4	.....38
.....30	<i>cefuroxime axetil</i>	<i>clemastine</i>
<i>calcipotriene</i>.....	.....4	.....52
.....25	<i>celecoxib</i>.....	.....26
<i>calcipotriene-betamethasone</i>	<i>cephalexin</i>	<i>clindacin</i>
.....25	.....4	.....26
<i>calcitonin (salmon)</i>	CEPROTIN (BLUE BAR) ...	<i>clindacin etz</i>
.....35	.....22	.....26
<i>calcitriol</i>	CEPROTIN (GREEN BAR) 22	<i>clindacin p</i>
.....25	.....22	.....26
<i>calcium acetate(phosphat bind)</i>	CEQUR SIMPLICITY	<i>clindamycin hcl</i>
.....56	.....33	.....5
CALQUENCE	CERDELGA.....	<i>clindamycin pediatric</i>
(ACALABRUTINIB MAL)	.....35	.....5
.....7	CEREZYME	<i>clindamycin phosphate</i> ...
<i>camila</i> .....	.....35	.....26, 46
.....45	<i>cetirizine</i>	<i>clindamycin-benzoyl peroxide</i>
<i>camrese</i>.....	.....52	.....26
.....47	<i>cevimeline</i>	<i>clindamycin-tretinoin</i>
<i>camrese lo</i> .....	.....30	.....26
.....47	<i>charlotte 24 fe</i>	<i>clobazam</i>
CAMZYOS .....	.....47	.....11
.....24	<i>chateal (28)</i>.....	.....28
<i>candesartan</i> .....	.....47	<i>clobetasol</i>
.....21	<i>chateal eq (28)</i>.....	.....28
<i>candesartan-</i>	CHEMET.....	<i>clobetasol-emollient</i>
<i>hydrochlorothiazid</i> .....	.....30	.....28
.....21	CHEMICAL	<i>clocortolone pivalate</i>
<i>capecitabine</i> .....	.....38	.....29
.....7	<i>children's alaway</i>	<i>clodan</i>
CAPRELSA .....	.....51	.....29
.....7	<i>chlordiazepoxide hcl</i>	<i>clomiphene citrate</i>
<i>captopril</i> .....	.....17	.....35
.....21	<i>chlordiazepoxide-clidinium</i> ..	<i>clomipramine</i>
<i>captopril-hydrochlorothiazide</i>	.....37	.....17
.....21	<i>chlorhexidine gluconate</i>	<i>clonazepam</i>
CAPVAXIVE.....	.....31	.....11
.....42	<i>chloroquine phosphate</i>	<i>clonidine</i>
CARBAGLU.....	.....5	.....21
.....30	<i>chlorpromazine</i>	<i>clonidine hcl</i>
<i>carbamazepine</i> .....	.....17	.....17, 21
.....11	<i>chlorthalidone</i>	<i>clopidogrel</i>
<i>carbidopa</i> .....	.....21	.....22
.....12	<i>chlorzoxazone</i>	<i>clorazepate dipotassium</i>
<i>carbidopa-levodopa</i> .....	.....14	.....17
.....12	CHOLBAM.....	<i>clotrimazole</i>
<i>carbidopa-levodopa-</i>	.....38	.....3, 27
<i>entacapone</i>	<i>cholestyramine (with sugar)</i> .24	<i>clotrimazole-betamethasone</i> .27
.....12	<i>cholestyramine light</i> .....	.....27
<i>carbinoxamine maleate</i> .....	.....24	<i>clozapine</i>
.....52	CIBINQO .....	.....17
<i>carglumic acid</i>.....	.....25	<i>c-nate dha</i>
.....30	<i>ciclodan</i> .....	.....56
	.....27	COAGADDEX.....
	<i>ciclopirox</i>.....	.....22
	.....27	COARTEM.....
	<i>ciclopirox-ure-camph-menth-</i>	.....5
	<i>auc</i>	<i>codeine sulfate</i>
	.....27	.....14
	<i>cilostazol</i>	<i>codeine-butalbital-asa-caff</i> ...14
	.....22	<i>colchicine</i>
	CIMDUO.....	.....43, 44
	.....3	<i>colesevelam</i>
	CIMERLI.....	.....24
	.....51	<i>colestipol</i>
		.....24

COMBIVENT RESPIMAT .53	<i>darunavir</i>.....3	<i>diflunisal</i>.....16
COMETRIQ.....8	DARZALEX.....8	<i>difluprednate</i>.....52
COMPACT SPACE	<i>dasetta 1/35 (28)</i>.....47	<i>digoxin</i>.....22
CHAMBER.....32	<i>dasetta 7/7/7 (28)</i>.....47	<i>dihydroergotamine</i>.....13
<i>complete natal dha</i>.....56	<i>daysee</i>.....47	DILANTIN.....11
<i>compro</i>.....38	<i>deblitane</i>.....45	<i>diltiazem</i>.....21
<i>constulose</i>.....38	<i>decitabine</i>.....8	<i>dilt-xr</i>.....21
CORIFACT.....22	<i>deferasirox</i>.....30	<i>dimethyl fumarate</i>.....41
<i>cortisone</i>.....32	<i>deferiprone</i>.....30	DIPENTUM.....38
CORTISPORIN-TC.....32	<i>deflazacort</i>.....32	<i>diphenoxylate-atropine</i>.....37
COTELLIC.....8	<i>demeclocycline</i>.....6	<i>dipyridamole</i>.....22
<i>covaryx</i>.....45	DENGVAXIA (PF).....42	<i>diskets</i>.....14
<i>covaryx h.s</i>.....45	<i>dermacinrx lidocan</i>.....27	<i>disopyramide phosphate</i>.....20
CREON.....38	DESCOVY.....3	<i>disulfiram</i>.....30
CRESEMBA.....3	<i>desipramine</i>.....17	<i>divalproex</i>.....11
<i>cromolyn</i>.....38, 51, 53	<i>desloratadine</i>.....52	<i>dofetilide</i>.....20
<i>crotan</i>.....30	<i>desmopressin</i>.....35	<i>dolishale</i>.....47
<i>cryselle (28)</i>.....47	DESMOPRESSIN.....35	<i>donepezil</i>.....13
CRYSVITA.....35	<i>desog-e.estradiol/e.estradiol</i> 47	DOPTELET (15 TAB PACK)
<i>curae</i>.....47	<i>desonide</i>.....29	.....23
<i>cyclobenzaprine</i>.....14	<i>desoximetasone</i>.....29	<i>dorzolamide</i>.....51
<i>cyclopentolate</i>.....50	<i>desvenlafaxine succinate</i>.....17	<i>dorzolamide-timolol</i>.....51
<i>cyclopen-tropic-phenyleph-</i>	<i>dexabliss</i>.....32	<i>dorzolamide-timolol (pf)</i>.....51
<i>watr</i>.....50	<i>dexamethasone</i>.....32	<i>dotti</i>.....46
<i>cyclophosphamide</i>.....8	<i>dexamethasone intensol</i>.....32	DOVATO.....3
CYCLOSERINE.....5	<i>dexamethasone sodium</i>	<i>doxazosin</i>.....21
<i>cyclosporine</i>.....8, 51	<i>phosphate</i>.....52	<i>doxepin</i>.....17, 18, 25
<i>cyclosporine modified</i>.....8	<i>dexchlorpheniramine maleate</i>	<i>doxercalciferol</i>.....35
CYLTEZO(CF).....44	.....52	<i>doxycycline hyclate</i>.....6
CYLTEZO(CF) PEN.....44	DEXILANT.....40	<i>doxycycline monohydrate</i>.....6
CYLTEZO(CF) PEN	<i>dexlansoprazole</i>.....40	<i>doxylamine-pyridoxine (vit b6)</i>
CROHN'S-UC-HS.....44	<i>dexmethylphenidate</i>.....17	.....38
CYLTEZO(CF) PEN	<i>dextroamphetamine sulfate</i> ..17	<i>dronabinol</i>.....38
PSORIASIS-UV.....44	<i>dextroamphetamine-</i>	<i>drospirenone-e.estradiol-lm.fa</i>
<i>cyproheptadine</i>.....52	<i>amphetamine</i>.....17	.....47
CYRAMZA.....8	DIACOMIT.....11	<i>drospirenone-ethinyl estradiol</i>
<i>cyred</i>.....47	<i>dialyvite 800</i>.....56	.....47
<i>cyred eq</i>.....47	<i>diazepam</i>.....11, 17	DROXIA.....8
CYSTAGON.....55	<i>diazepam intensol</i>.....17	DUAVEE.....46
CYSTARAN.....51	<i>diazoxide</i>.....33	<i>dulcolax (magnesium</i>
D	<i>dichlorphenamide</i>.....13	<i>hydroxide)</i>.....38
<i>dabigatran etexilate</i>.....22	<i>diclofenac potassium</i>.....15	DULERA.....53
<i>dalfampridine</i>.....13	<i>diclofenac sodium</i>....15, 16, 25,	<i>duloxetine</i>.....18
<i>danazol</i>.....35	51	DUPIXENT PEN.....25
<i>dantrolene</i>.....14	<i>diclofenac-misoprostol</i>.....16	DUPIXENT SYRINGE.....25
<i>dapsone</i>.....5, 26	<i>dicloxacillin</i>.....6	<i>dutasteride</i>.....55
DAPTACEL (DTAP	<i>dicyclomine</i>.....37	<i>dutasteride-tamsulosin</i>.....55
PEDIATRIC) (PF).....42	<i>didanosine</i>.....3	DYSPORT.....42
<i>darifenacin</i>.....55	<i>diflorasone</i>.....29	

E		
<i>e.e.s. 400</i>	4	
EASIVENT HOLDING		
CHAMBER	32	
<i>econazole</i>	27	
<i>econtra ez</i>	47	
<i>econtra one-step</i>	47	
<i>ecotrin low strength</i>	16	
<i>edaravone</i>	13	
<i>ed-spaz</i>	37	
EDURANT	3	
<i>eemt</i>	46	
<i>eemt hs</i>	46	
<i>efavirenz</i>	3	
<i>efavirenz-emtricitabin-tenofov</i>	3	
<i>efavirenz-lamivu-tenofov disop</i>	3	
<i>effer-k</i>	56	
EGRIFTA SV	41	
ELAPRASE	35	
<i>eletriptan</i>	13	
ELFABRIO	35	
ELIGARD	8	
ELIGARD (3 MONTH)	8	
ELIGARD (4 MONTH)	8	
ELIGARD (6 MONTH)	8	
<i>elinest</i>	47	
ELIQUIS	23	
ELIQUIS DVT-PE TREAT		
30D START	23	
ELLA	48	
ELMIRON	55	
ELOCTATE	23	
<i>eluryng</i>	46	
ELZONRIS	8	
EMGALITY PEN	13	
EMGALITY SYRINGE	13	
EMPAVELI	30	
<i>emtricitabine</i>	3	
<i>emtricitabine-tenofovir (tdf)</i>	3	
EMTRIVA	3	
EMVERM	5	
<i>emzahn</i>	46	
<i>enalapril maleate</i>	21	
<i>enalapril-hydrochlorothiazide</i>	21	
ENBREL	44	
ENBREL MINI	44	
ENBREL SURECLICK	44	
<i>endocet</i>	14	
ENGERIX-B (PF)	42	
ENGERIX-B PEDIATRIC		
(PF)	42	
<i>enilloring</i>	46	
ENJAYMO	30	
<i>enoxaparin</i>	23	
<i>enpresse</i>	48	
<i>enskyce</i>	48	
ENSPRYNG	8	
<i>entacapone</i>	12	
<i>entecavir</i>	3	
ENTRESTO	24	
ENTYVIO	38	
<i>enulose</i>	38	
EPCLUSA	3	
EPIDIOLEX	11	
<i>epinastine</i>	51	
<i>epinephrine</i>	52	
<i>epinephrine hcl</i>	53	
<i>epitol</i>	11	
<i>eplerenone</i>	21	
<i>epoprostenol</i>	21	
<i>eprosartan</i>	21	
ERBITUX	8	
<i>ergocalciferol (vitamin d2)</i>	56	
<i>ergoloid</i>	18	
<i>ergotamine-caffeine</i>	13	
<i>eribulin</i>	8	
ERIVEDGE	8	
ERLEADA	8	
<i>erlotinib</i>	8	
<i>errin</i>	46	
ERTACZO	27	
<i>ery pads</i>	26	
<i>erygel</i>	26	
<i>ery-tab</i>	5	
<i>erythrocine (as stearate)</i>	5	
<i>erythromycin</i>	5, 50	
<i>erythromycin ethylsuccinate</i>	5	
<i>erythromycin with ethanol</i>	26	
<i>erythromycin-benzoyl peroxide</i>	26	
<i>escitalopram oxalate</i>	18	
<i>esomeprazole magnesium</i>	40	
ESPEROCT	23	
<i>estarylla</i>	48	
<i>estazolam</i>	18	
<i>estradiol</i>	46	
<i>estradiol valerate</i>	46	
<i>estradiol-norethindrone acet</i>	46	
<i>estrogens-methyltestosterone</i>	46	
<i>eszopiclone</i>	18	
<i>ethacrynic acid</i>	21	
<i>ethambutol</i>	5	
<i>ethosuximide</i>	11	
<i>ethynodiol diac-eth estradiol</i>	48	
<i>etodolac</i>	16	
<i>etonogestrel-ethinyl estradiol</i>	46	
<i>etoposide</i>	8	
<i>etravirine</i>	3	
<i>euthyrox</i>	37	
<i>everolimus (antineoplastic)</i>	8	
<i>everolimus</i> <i>(immunosuppressive)</i>	8	
EVOTAZ	3	
EXELDERM	27	
<i>exemestane</i>	8	
<i>eye allergy itch relief</i>	51	
<i>eye allergy itch-redness rlf</i>	51	
<i>eye itch relief</i>	51	
<i>ezetimibe</i>	24	
<i>ezetimibe-simvastatin</i>	24	
F		
FABHALTA	30	
FABRAZYME	35	
FACTIVE	6	
<i>falmina (28)</i>	48	
<i>famciclovir</i>	3	
<i>famotidine</i>	40	
FARXIGA	36	
FASENRA	53	
FASENRA PEN	53	
FC2 FEMALE CONDOM	45	
<i>febuxostat</i>	44	
FEIBA NF	23	
<i>felbamate</i>	11	
<i>felodipine</i>	21	
<i>fem ph</i>	46	
FEMCAP	45	
<i>fenofibrate</i>	24	
<i>fenofibrate micronized</i>	24	
<i>fenofibrate nanocrystallized</i>	24	
<i>fenofibric acid</i>	24	
<i>fenofibric acid (choline)</i>	24	
<i>fenopropfen</i>	16	
FENSOLVI	8	

<i>fentanyl</i>	15	<i>fluticasone propion-salmeterol</i>	54	FREESTYLE PRECISION NEO STRIPS.....	32
<i>fentanyl citrate</i>	15	FLUTICASONE PROPION- SALMETEROL.....	54	FREESTYLE SIDEKICK II.....	33
<i>ferocon</i>	56	<i>fluvastatin</i>	24	FREESTYLE SYSTEM KIT.....	33
FERRIPROX.....	30	<i>fluvoxamine</i>	18	FREESTYLE TEST.....	32
FERRIPROX (2 TIMES A DAY).....	30	FLUZONE HIGH-DOSE TRIV 24-25.....	42	<i>frovatriptan</i>	13
<i>fesoterodine</i>	55	FLUZONE TRIV 2024-2025	42	<i>full spectrum b-vitamin c</i>	56
FETZIMA.....	18	FLUZONE TRIV 2024-2025 (PF).....	42	FULPHILA.....	41
<i>finasteride</i>	55	<i>folic acid</i>	56	<i>furosemide</i>	21
<i>fungolimod</i>	41	<i>folitab</i>	56	FUZEON.....	4
<i>finzala</i>	48	FOLOTYN.....	8	<i>fyavolv</i>	46
FIRDAPSE.....	13	<i>foltabs 800</i>	56	G	
<i>flac otic oil</i>	31	<i>fondaparinux</i>	23	<i>gabapentin</i>	11, 12
<i>flavoxate</i>	55	<i>formoterol fumarate</i>	54	<i>galantamine</i>	13
<i>flecainide</i>	20	FOSAMAX PLUS D.....	44	GAMASTAN.....	42
FLEXICHAMBER.....	32	<i>fosamprenavir</i>	3	GAMIFANT.....	8
FLUAD TRIV 2024-25(65Y UP)(PF).....	42	<i>foscarnet</i>	4	GAMMAGARD LIQUID.....	42
FLUARIX TRIV 2024-2025 (PF).....	42	<i>fosfomycin tromethamine</i>	6	GAMMAGARD S-D (IGA < 1 MCG/ML).....	42
FLUBLOK TRIV 2024-2025 (PF).....	42	<i>fosinopril</i>	21	GAMUNEX-C.....	42
FLUCELVAX TRIV 2024- 2025.....	42	<i>fosinopril-hydrochlorothiazide</i>	21	GARDASIL 9 (PF).....	42
FLUCELVAX TRIV 2024- 2025 (PF).....	42	FREESTYLE CONTROL.....	33	<i>gatifloxacin</i>	50
<i>fluconazole</i>	3	FREESTYLE FLASH SYSTEM.....	33	<i>gavilax</i>	38
<i>flucytosine</i>	3	FREESTYLE FREEDOM.....	33	<i>gavilyte-c</i>	38
<i>fludarabine</i>	8	FREESTYLE FREEDOM LITE.....	33	<i>gavilyte-g</i>	38
<i>fludrocortisone</i>	32	FREESTYLE INSULINX...32, 33		<i>gavilyte-n</i>	38
FLULAVAL TRIV 2024-2025 (PF).....	42	FREESTYLE INSULINX TEST STRIPS.....	32	GAVRETO.....	8
<i>flunisolide</i>	54	FREESTYLE LIBRE 14 DAY READER.....	33	GAZYVA.....	8
<i>fluocinolone</i>	29	FREESTYLE LIBRE 14 DAY SENSOR.....	33	<i>gefitinib</i>	8
<i>fluocinolone acetonide oil</i>	31	FREESTYLE LIBRE 2 READER.....	33	<i>gemfibrozil</i>	24
<i>fluocinolone and shower cap</i>	29	FREESTYLE LIBRE 2 SENSOR.....	33	<i>gemmily</i>	48
<i>fluocinonide</i>	29	FREESTYLE LIBRE 3 READER.....	33	<i>generlac</i>	38
<i>fluocinonide-e</i>	29	FREESTYLE LIBRE 3 SENSOR.....	33	<i>engraf</i>	8
<i>fluorescein-proparacaine</i>	51	FREESTYLE LITE METER.....	33	<i>gentamicin</i>	27, 50
<i>fluoride (sodium)</i>	56	FREESTYLE LITE STRIPS.....	32	<i>gentle laxative (bisacodyl)</i>	38
<i>fluorometholone</i>	52			<i>gentlelax</i>	38
<i>fluorouracil</i>	25			GENVOYA.....	4
<i>fluoxetine</i>	18			GILOTRIF.....	8
<i>fluphenazine hcl</i>	18			GLASSIA.....	30
<i>flurandrenolide</i>	29			<i>glatiramer</i>	41
<i>flurazepam</i>	18			<i>glatopa</i>	41
<i>flurbiprofen</i>	16			GLEOSTINE.....	8
<i>flurbiprofen sodium</i>	51			<i>glimepiride</i>	36
<i>fluticasone propionate</i>	29, 54			<i>glipizide</i>	36
				<i>glipizide-metformin</i>	36
				<i>glucagon emergency kit</i> (human).....	33
				<i>glutamine (sickle cell)</i>	30
				<i>glyburide</i>	36

<i>glyburide micronized</i>	36	HIBERIX (PF).....	43	HUMULIN R REGULAR U-	
<i>glyburide-metformin</i>	36	<i>homatropaire</i>	50	100 INSULN	34
<i>glycopyrrolate</i>	37	HUMALOG JUNIOR		HUMULIN R U-500 (CONC)	
GLYXAMBI	36	KWIKPEN U-100	34	INSULIN	34
<i>granisetron hcl</i>	38	HUMALOG KWIKPEN		HUMULIN R U-500 (CONC)	
GRASTEK	42	INSULIN	34	KWIKPEN.....	34
<i>griseofulvin microsize</i>	3	HUMALOG MIX 50-50		HYCAMTIN.....	8
<i>griseofulvin ultramicrosize</i>	3	KWIKPEN.....	34	<i>hydralazine</i>	21
<i>guanfacine</i>	18, 21	HUMALOG MIX 75-25		<i>hydrochlorothiazide</i>	21
GVOKE.....	33	KWIKPEN.....	34	<i>hydrocodone bitartrate</i>	15
GVOKE HYPOPEN 2-PACK		HUMALOG MIX 75-25(U-		<i>hydrocodone-acetaminophen</i>	15
.....	33	100)INSULN	34	<i>hydrocodone-</i>	
GVOKE PFS 2-PACK		HUMALOG TEMPO PEN(U-		<i>chlorpheniramine</i>	53
SYRINGE.....	33	100)INSULN	34	<i>hydrocodone-homatropine</i> ...	53
GYNAZOLE-1	46	HUMALOG U-100 INSULIN		<i>hydrocodone-ibuprofen</i>	15
H		.....	34	<i>hydrocortisone</i>	29, 32, 38
<i>hailey</i>	48	HUMATE-P	23	<i>hydrocortisone acetate</i>	38
<i>hailey 24 fe</i>	48	HUMIRA (ONLY NDCS		<i>hydrocortisone butyrate</i>	29
<i>hailey fe 1.5/30 (28)</i>	48	STARTING WITH 00074)		<i>hydrocortisone valerate</i>	29
<i>hailey fe 1/20 (28)</i>	48	.....	44	<i>hydrocortisone-acetic acid</i> ...	31
HALAVEN.....	8	HUMIRA PEN (ONLY NDCS		<i>hydrocortisone-pramoxine</i> ..	25,
<i>halcinonide</i>	29	STARTING WITH 00074)		38, 39	
<i>halobetasol propionate</i>	29	.....	44	<i>hydromet</i>	53
<i>haloette</i>	46	HUMIRA(CF) (ONLY NDCS		<i>hydromorphone</i>	15
<i>haloperidol</i>	18	STARTING WITH 00074)		<i>hydroxocobalamin</i>	56
<i>haloperidol lactate</i>	18	.....	44	<i>hydroxychloroquine</i>	5
HARVONI	4	HUMIRA(CF) PEN (ONLY		<i>hydroxyurea</i>	8
HAVRIX (PF)	42	NDCS STARTING WITH		<i>hydroxyzine hcl</i>	52
<i>heather</i>	46	00074).....	44	<i>hydroxyzine pamoate</i>	52
HEMGENIX.....	23	HUMIRA(CF) PEN		<i>hyoscyamine sulfate</i>	37
HEMLIBRA	23	CROHNS-UC-HS (ONLY		<i>hyosyne</i>	37
<i>hemmorex-hc</i>	38	NDCS STARTING WITH		HYRIMOZ PEN CROHN'S-	
HEMOFIL M HIGH.....	23	00074).....	45	UC STARTER.....	45
HEMOFIL M LOW	23	HUMIRA(CF) PEN		HYRIMOZ PEN PSORIASIS	
HEMOFIL M MID.....	23	PEDIATRIC UC (ONLY		STARTER	45
HEMOFIL M SUPER HIGH	23	NDCS STARTING WITH		HYRIMOZ(CF).....	45
<i>hep flush-10 (pf)</i>	23	00074).....	45	HYRIMOZ(CF) PEDI	
<i>heparin (porcine)</i>	23	HUMIRA(CF) PEN PSOR-		CROHN STARTER	45
<i>heparin (porcine) in 5 % dex</i>	23	UV-ADOL HS (ONLY		HYRIMOZ(CF) PEN	45
<i>heparin (porcine) in nacl (pf)</i>		NDCS STARTING WITH		I	
.....	23	00074).....	45	<i>ibandronate</i>	44
<i>heparin lock flush (porcine)</i> .	23	HUMULIN 70/30 U-100		<i>ibu</i>	16
<i>heparin lockflush(porcine)(pf)</i>		INSULIN	34	<i>ibuprofen</i>	16
.....	23	HUMULIN 70/30 U-100		<i>ibuprofen-famotidine</i>	16
<i>heparin(porcine) in 0.45% nacl</i>		KWIKPEN.....	34	<i>icatibant</i>	54
.....	23	HUMULIN N NPH INSULIN		<i>iclevia</i>	48
<i>heparin, porcine (pf)</i>	23	KWIKPEN.....	34	ICLUSIG	8
HEPLISAV-B (PF)	42	HUMULIN N NPH U-100		<i>icosapent ethyl</i>	24
<i>her style</i>	48	INSULIN	34	IDELVION	23

IDHIFA	8	<i>jantoven</i>	23	<i>klor-con 8</i>	56
ILARIS (PF).....	41	JANUMET	36	<i>klor-con m10</i>	56
<i>imatinib</i>	8	JANUMET XR.....	36	<i>klor-con m15</i>	56
IMBRUVICA	8	JANUVIA.....	36	<i>klor-con m20</i>	56
IMFINZI.....	8	JARDIANCE.....	36	<i>klor-con/ef</i>	56
<i>imipramine hcl</i>	18	<i>jasmiel (28)</i>	48	KLOXXADO	16
<i>imipramine pamoate</i>	18	<i>javygtor</i>	36	<i>kobee</i>	56
<i>imiquimod</i>	43	<i>jencycla</i>	46	KOGENATE FS	23
IMOVAX RABIES VACCINE (PF).....	43	<i>jinteli</i>	46	<i>kourzeq</i>	31
IMPAVIDO.....	5	JIVI.....	23	KOVALTRY	23
INBRIJA.....	12	<i>jolessa</i>	48	K-PHOS ORIGINAL	55
<i>incassia</i>	46	<i>joyeaux</i>	48	KRYSTEXXA.....	44
INCRELEX.....	30	JUBLIA	27	<i>kurvelo (28)</i>	48
INCRUSE ELLIPTA.....	54	<i>juleber</i>	48	KYLEENA	45
<i>indapamide</i>	21	JULUCA.....	4	KYMRIAH	9
<i>indomethacin</i>	16	<i>junel 1.5/30 (21)</i>	48	KYPROLIS.....	9
INFANRIX (DTAP) (PF).....	43	<i>junel 1/20 (21)</i>	48	L	
INFLECTRA.....	39	<i>junel fe 1.5/30 (28)</i>	48	<i>l norgest/e.estradiol-e.estrad</i>	48
INLYTA	8	<i>junel fe 1/20 (28)</i>	48	<i>labetalol</i>	21
INSULIN LISPRO	34	<i>junel fe 24</i>	48	<i>lacosamide</i>	12
INSULIN LISPRO PROTAMIN-LISPRO.....	34	JUXTAPID.....	24	<i>lactated ringers</i>	30
INTELENCE.....	4	K		<i>lactulose</i>	39
IPOL	43	KADCYLA	9	LAGEVRIO (EUA).....	4
<i>ipratropium bromide</i>	31, 54	<i>kaitlib fe</i>	48	<i>lamivudine</i>	4
<i>ipratropium-albuterol</i>	54	<i>kalliga</i>	48	<i>lamivudine-zidovudine</i>	4
<i>irbesartan</i>	21	KALYDECO	54	<i>lamotrigine</i>	12
<i>irbesartan-hydrochlorothiazide</i>	21	KANJINTI.....	9	LAMZEDE	30
ISENTRESS	4	KANUMA	36	LANCETS	33
ISENTRESS HD	4	<i>kariva (28)</i>	48	LANCING DEVICE	34
<i>isibloom</i>	48	<i>kelnor 1/35 (28)</i>	48	<i>lanreotide</i>	9
<i>isoniazid</i>	5	<i>kelnor 1-50 (28)</i>	48	<i>lansoprazole</i>	40
<i>isosorbide dinitrate</i>	24	KEPIVANCE	7	<i>lanthanum</i>	38
<i>isosorbide mononitrate</i>	24	KERENDIA.....	21	<i>lapatinib</i>	9
<i>isosorbide-hydralazine</i>	21	KESIMPTA PEN	41	<i>larin 1.5/30 (21)</i>	48
<i>isotretinoin</i>	26	<i>ketoconazole</i>	3, 28	<i>larin 1/20 (21)</i>	48
<i>isradipine</i>	21	<i>ketodan</i>	28	<i>larin 24 fe</i>	48
ISTODAX	8	<i>ketodan kit</i>	28	<i>larin fe 1.5/30 (28)</i>	48
<i>itraconazole</i>	3	<i>ketoprofen</i>	16	<i>larin fe 1/20 (28)</i>	48
<i>ivermectin</i>	5, 26	<i>ketorolac</i>	16, 51	<i>latanoprost</i>	51
IWILFIN.....	8	<i>ketotifen fumarate</i>	51	LATUDA.....	18
IXCHIQ (PF).....	43	KEYTRUDA	9	<i>laxative (bisacodyl)</i>	39
IXEMPra.....	8	KIMMTRAK.....	9	<i>laxative peg 3350</i>	39
IXIARO (PF).....	43	KINRIX (PF).....	43	<i>layolis fe</i>	48
J		<i>kiprofen</i>	16	<i>leena 28</i>	48
<i>jaimiess</i>	48	KISQALI.....	9	<i>leflunomide</i>	45
JAKAFI.....	8	KITABIS PAK	5	<i>lenalidomide</i>	9
		<i>klayesta</i>	28	LENVIMA.....	9
		<i>klor-con</i>	56	<i>lessina</i>	48
		<i>klor-con 10</i>	56	<i>letrozole</i>	9

<i>leucovorin calcium</i>	7	<i>lojaimiess</i>	48	<i>lyza</i>	46
LEUKERAN	9	LOKELMA	38	M	
LEUKINE.....	41	LONSURF.....	9	<i>mafenide acetate</i>	27
<i>leuprolide</i>	9	<i>loperamide</i>	37	<i>magnesium citrate</i>	39
<i>levabuterol hcl</i>	54	<i>lopinavir-ritonavir</i>	4	<i>malathion</i>	30
LEVEMIR FLEXPEN.....	34	LOQTORZI.....	9	<i>maraviroc</i>	4
LEVEMIR U-100 INSULIN	34	<i>lorazepam</i>	18	<i>marlissa (28)</i>	48
<i>levetiracetam</i>	12	<i>lorazepam intensol</i>	18	MARPLAN.....	18
<i>levobunolol</i>	50	LOBRENA	9	MATULANE.....	9
<i>levocarnitine</i>	30	<i>loryna (28)</i>	48	<i>matzim la</i>	21
<i>levocarnitine (with sugar)</i>	30	<i>losartan</i>	21	MAYZENT.....	41
<i>levocetirizine</i>	52	<i>losartan-hydrochlorothiazide</i>		MAYZENT STARTER(FOR	
<i>levofloxacin</i>	6, 50	.....	21	1MG MAINT)	41
<i>levonest (28)</i>	48	<i>loteprednol etabonate</i>	52	MAYZENT STARTER(FOR	
<i>levonorgest-eth.estradiol-iron</i>		<i>lovastatin</i>	24	2MG MAINT)	41
.....	48	<i>low-ogestrel (28)</i>	48	<i>meclizine</i>	39
<i>levonorgestrel</i>	48	<i>loxapine succinate</i>	18	<i>meclofenamate</i>	16
<i>levonorgestrel-ethinyl estrad</i>	48	<i>lo-zumandimine (28)</i>	48	MEDISENSE.....	34
<i>levonorg-eth estrad triphasic</i>	48	<i>lubiprostone</i>	39	MEDISENSE GLUCOSE	
<i>levora-28</i>	48	<i>ludent fluoride</i>	56	KETONE	34
<i>levorphanol tartrate</i>	15	<i>lugols</i>	27, 56	<i>medroxyprogesterone</i>	46
<i>levo-t</i>	37	LULICONAZOLE	28	<i>mefenamic acid</i>	16
<i>levothyroxine</i>	37	LUMIZYME	36	<i>mefloquine</i>	5
<i>levoxyl</i>	37	LUMRYZ	18	<i>megestrol</i>	9
LIBTAYO	9	LUNSUMIO.....	9	MEKINIST	9
<i>lidocaine</i>	27	LUPKYNIS	9	<i>meloxicam</i>	16
<i>lidocaine hcl</i>	27	LUPRON DEPOT	9	<i>meloxicam submicronized</i>	16
<i>lidocaine hcl-hydrocortison ac</i>		LUPRON DEPOT (3		<i>memantine</i>	14
.....	27, 39	MONTH).....	9	MENQUADFI (PF).....	43
<i>lidocaine viscous</i>	27	LUPRON DEPOT (4		MENVEO A-C-Y-W-135-DIP	
<i>lidocaine-hydrocortisone-aloe</i>		MONTH).....	9	(PF).....	43
.....	39	LUPRON DEPOT (6		<i>meprobamate</i>	14
<i>lidocaine-prilocaine</i>	27	MONTH).....	9	MEPSEVII.....	36
<i>lidocan iii</i>	27	<i>lurasidone</i>	18	<i>mercaptopurine</i>	9
<i>lidocan iv</i>	27	<i>luter a (28)</i>	48	<i>merzee</i>	48
<i>lidocan v</i>	27	LUXTURNA	51	<i>mesalamine</i>	39
<i>lidocort</i>	27	<i>lyleq</i>	46	<i>mesalamine with cleansing</i>	
<i>linezolid</i>	5	<i>lyllana</i>	46	<i>wipe</i>	39
LINZESS.....	39	LYNPARZA.....	9	MESNEX.....	7
<i>liothyronine</i>	37	LYSODREN.....	9	<i>metaxalone</i>	14
<i>lisdexamfetamine</i>	18	LYTGOBI	9	<i>metformin</i>	36, 37
<i>lisinopril</i>	21	LYUMJEV KWIKPEN U-100		<i>methadone</i>	15
<i>lisinopril-hydrochlorothiazide</i>		INSULIN	35	<i>methadose</i>	15
.....	21	LYUMJEV KWIKPEN U-200		<i>methamphetamine</i>	18
LITEAIRE MDI CHAMBER		INSULIN	35	<i>methazolamide</i>	51
.....	33	LYUMJEV TEMPO PEN(U-		<i>methenamine hippurate</i>	6
<i>lithium carbonate</i>	18	100)INSULN	35	<i>methenamine mandelate</i>	7
<i>lithium citrate</i>	18	LYUMJEV U-100 INSULIN		<i>methen-sod phos-meth blue-</i>	
<i>lofena</i>	16	.....	35	<i>hyos</i>	55

<i>methimazole</i>	32	<i>minoxidil</i>	21	<i>naproxen</i>	16
METHITEST.....	36	<i>miostat</i>	51	<i>naproxen sodium</i>	16
<i>methocarbamol</i>	14	<i>mirabegron</i>	55	<i>naproxen-esomeprazole</i>	16
<i>methotrexate sodium</i>	9	MIRENA.....	45	<i>naratriptan</i>	13
<i>methotrexate sodium (pf)</i>	9	<i>mirtazapine</i>	19	NATACYN.....	50
<i>methoxsalen</i>	25	<i>misoprostol</i>	40	<i>nateglinide</i>	37
<i>methscopolamine</i>	37	<i>mitoxantrone</i>	9	<i>natura-lax</i>	39
<i>methsuximide</i>	12	M-M-R II (PF).....	43	NAYZILAM.....	12
<i>methyl salicylate</i>	25	<i>m-natal plus</i>	56	<i>nebivolol</i>	21
<i>methyl dopa</i>	21	<i>modafinil</i>	19	<i>nebusal</i>	54
<i>methyl dopa-</i>		MODERNA COVID 23-		<i>necon 0.5/35 (28)</i>	49
<i>hydrochlorothiazide</i>	21	24(6M-11Y)PF.....	43	<i>nelarabine</i>	9
<i>methylergonovine</i>	50	<i>moexipril</i>	21	<i>neomycin</i>	5
<i>methylphenidate</i>	18	<i>molindone</i>	19	<i>neomycin-bacitracin-poly-hc</i>	51
<i>methylphenidate hcl</i>	18, 19	<i>mometasone</i>	29, 54	<i>neomycin-bacitracin-</i>	
<i>methylprednisolone</i>	32	<i>mondoxylene nl</i>	6	<i>polymyxin</i>	50
<i>methyltestosterone</i>	36	<i>mono-lynyah</i>	49	<i>neomycin-polymyxin b gu</i>	30
<i>metoclopramide hcl</i>	39	<i>montelukast</i>	54	<i>neomycin-polymyxin b-</i>	
<i>metolazone</i>	21	<i>morgidox</i>	6	<i>dexameth</i>	51
<i>metoprolol succinate</i>	21	<i>morphine</i>	15	<i>neomycin-polymyxin-</i>	
<i>metoprolol ta-hydrochlorothiaz</i>		<i>morphine concentrate</i>	15	<i>gramicidin</i>	50
.....	21	MOUNJARO.....	37	<i>neomycin-polymyxin-hc</i> ..	32, 52
<i>metoprolol tartrate</i>	21	MOVANTIK.....	39	<i>neo-polycin</i>	50
<i>metronidazole</i>	5, 26, 46	<i>moxifloxacin</i>	6, 50	<i>neo-polycin hc</i>	52
<i>metyrosine</i>	21	MRESVIA (PF).....	43	NERLYNX.....	9
<i>mexiletine</i>	20	MULTAQ.....	20	<i>neuac</i>	26
<i>mibelas 24 fe</i>	48	<i>multi-vitamin with fluoride</i> ..	56	NEUPRO.....	12
<i>miconazole-3</i>	46	<i>mupirocin</i>	27	NEVANAC.....	51
MICROCHAMBER.....	33	<i>mupirocin calcium</i>	27	<i>nevirapine</i>	4
<i>microgestin 1.5/30 (21)</i>	48	<i>mvc-fluoride</i>	56	<i>new day</i>	49
<i>microgestin 1/20 (21)</i>	49	<i>my choice</i>	49	<i>newgen</i>	56
<i>microgestin 24 fe</i>	49	<i>my way</i>	49	NEXPLANON.....	46
<i>microgestin fe 1.5/30 (28)</i>	49	MYALEPT.....	36	<i>niacin</i>	24
<i>microgestin fe 1/20 (28)</i>	49	<i>mycophenolate mofetil</i>	9	<i>nicardipine</i>	21
MICROSPACER.....	33	<i>mycophenolate sodium</i>	9	<i>nicorette</i>	31
<i>midazolam</i>	19	MYFEMBREE.....	46	NICORETTE.....	31
<i>midodrine</i>	30	MYLERAN.....	9	<i>nicotine</i>	31
<i>mifepristone</i>	36, 46	MYLOTARG.....	9	<i>nicotine (polacrilex)</i>	31
<i>migergot</i>	13	<i>mynatal</i>	56	NICOTROL NS.....	31
<i>miglitol</i>	37	<i>mynatal plus</i>	56	<i>nifedipine</i>	21
<i>miglustat</i>	36	<i>mynatal-z</i>	56	<i>nikki (28)</i>	49
<i>mili</i>	49	MYOBLOC.....	43	<i>nilutamide</i>	9
<i>milk of magnesia</i>	39	N		<i>nimodipine</i>	21
<i>milk of magnesia concentrated</i>		<i>nabumetone</i>	16	NINLARO.....	9
.....	39	<i>nadolol</i>	21	<i>nisoldipine</i>	22
<i>millipred</i>	32	<i>naftifine</i>	28	<i>nitazoxanide</i>	5
<i>millipred dp</i>	32	NAGLAZYME.....	36	<i>nitisinone</i>	30
<i>mimvey</i>	46	<i>naloxone</i>	16	<i>nitro-bid</i>	25
<i>minocycline</i>	6	<i>naltrexone</i>	16	<i>nitrofurantoin</i>	7

<i>nitrofurantoin macrocrystal</i> ... 7	<i>nyamyc</i>.....28	<i>onelax magnesium citrate</i>.....39
<i>nitrofurantoin monohyd/m-</i>	<i>nylia 1/35 (28)</i> .....49	ONIVYDE.....9
<i>cryst</i>.....7	<i>nylia 7/7/7 (28)</i>.....49	<i>opcicon one-step</i>.....49
<i>nitroglycerin</i> 25, 39	<i>nymyo</i>.....49	OPDIVO.....9
<i>nitro-time</i>.....25	<i>nystatin</i> 3, 28	OPDUALAG.....9
NITYR.....30	<i>nystatin-triamcinolone</i>.....28	OPILL.....46
<i>niva thyroid</i> .....37	<i>nystop</i>.....28	<i>opium tincture</i>.....37
NIVESTYM.....41	O	OPSUMIT.....54
<i>nizatidine</i> .....40	OBIZUR.....23	OPSYNVI.....54
<i>nora-be</i> .....46	OCALIVA.....39	OPTICHAMBER DIAMOND
<i>norelgestromin-ethin.estradiol</i>	<i>ocella</i> .....49	VHC.....33
.....46	OCREVUS.....42	<i>option-2</i>.....49
<i>noreth-ethinyl estradiol-iron</i> 49	<i>octreotide acetate</i> .....9	<i>oral saline laxative</i> .....39
<i>norethindrone (contraceptive)</i>	ODACTRA.....43	<i>oralone</i>.....31
.....46	ODEFSEY.....4	ORIAHNN.....46
<i>norethindrone acetate</i> .....46	ODOMZO.....9	ORLISSA.....36
<i>norethindrone ac-eth estradiol</i>	OFEV.....54	ORKAMBI.....54
.....46, 49	<i>ofloxacin</i> .....6, 31, 50	<i>ormalvi</i>.....14
<i>norethindrone-e.estradiol-iron</i>	OJEMDA.....9	<i>orphenadrine citrate</i>.....14
.....49	<i>olanzapine</i> .....19	<i>orphenadrine-asa-caffeine</i> ...14
<i>norgestimate-ethinyl estradiol</i>	<i>olanzapine-fluoxetine</i> .....19	<i>orphengesic forte</i>.....14
.....49	<i>olmesartan</i> .....22	ORSERDU.....10
<i>nortrel 0.5/35 (28)</i>.....49	<i>olmesartan-amlodipin-</i>	<i>oscimin</i>.....38
<i>nortrel 1/35 (21)</i>.....49	<i>hcthiamid</i>.....22	<i>oscimin sl</i>.....38
<i>nortrel 1/35 (28)</i>.....49	<i>olmesartan-</i>	<i>oseltamivir</i> .....4
<i>nortrel 7/7/7 (28)</i>.....49	<i>hydrochlorothiazide</i>.....22	OSPHENA.....46
<i>nortriptyline</i>.....19	<i>olopatadine</i>.....31, 51	OTEZLA.....45
NORVIR.....4	<i>omega-3 acid ethyl esters</i> ....24	OTEZLA STARTER.....45
NOVAVAX COVID 2023-	<i>omeprazole</i> .....40	<i>oxaprozin</i> .....16
24(PF)(EUA).....43	<i>omeprazole-sodium</i>	<i>oxazepam</i> .....19
NOVOEIGHT.....23	<i>bicarbonate</i>.....40, 41	<i>oxcarbazepine</i>.....12
NOVOLOG FLEXPEN U-100	OMNIPOD 5 G6 INTRO KIT	OXERVATE.....51
INSULIN.....35	(GEN 5).....34	<i>oxiconazole</i> .....28
NOVOLOG MIX 70-30 U-100	OMNIPOD 5 G6 PODS (GEN	<i>oxybutynin chloride</i> .....55
INSULN.....35	5).....34	<i>oxycodone</i> .....15
NOVOLOG MIX 70-	OMNIPOD CLASSIC PODS	<i>oxycodone-acetaminophen</i> ...15
30FLEXPEN U-100.....35	(GEN 3).....34	OXYCONTIN.....15
NOVOLOG PENFILL U-100	OMNIPOD DASH INTRO	<i>oxymorphone</i> .....15
INSULIN.....35	KIT (GEN 4).....34	OZURDEX.....52
NOVOLOG U-100 INSULIN	OMNIPOD DASH PODS	P
ASPART.....35	(GEN 4).....34	<i>pacerone</i> .....20
NOXAFIL.....3	OMNIPOD GO PODS 10	PACLITAXEL PROTEIN-
<i>np thyroid</i> .....37	UNITS/DAY.....34	BOUND.....10
NPLATE.....23	OMNITROPE.....41	<i>paliperidone</i>.....19
NUBEQA.....9	OMVOH.....39	PALYNZIQ.....36
NUCALA.....54	OMVOH PEN.....39	PANCREAZE.....39
NUCYNTA.....16	<i>ondansetron</i> .....39	<i>pantoprazole</i> .....41
NUCYNTA ER.....16	<i>ondansetron hcl</i>.....39	PARAGARD T 380A.....45
NUEDEXTA.....14	<i>one daily prenatal</i>.....56	<i>paricalcitol</i> .....36

<i>paroex oral rinse</i>	31	<i>pimtrea (28)</i>	49	<i>prednisolone sodium</i>	
<i>paromomycin</i>	5	<i>pindolol</i>	22	<i>phosphate</i>	32, 52
<i>paroxetine hcl</i>	19	<i>pioglitazone</i>	37	<i>prednisone</i>	32
<i>paroxetine</i>		<i>pioglitazone-glimepiride</i>	37	<i>prednisone intensol</i>	32
<i>mesylate(menop.sym)</i>	19	<i>pioglitazone-metformin</i>	37	<i>pregabalin</i>	12
PAXLOVID.....	4	PIQRAY.....	10	PREHEVBRIO (PF).....	43
<i>pazopanib</i>	10	<i>pirfenidone</i>	54	<i>prenal chew</i>	56
PEDIARIX (PF).....	43	<i>piroxicam</i>	16	<i>prenal pearl</i>	56
PEDVAX HIB (PF).....	43	<i>pitavastatin calcium</i>	24	<i>prenal true</i>	56
<i>peg 3350-electrolytes</i>	39	PLEGRIDY.....	42	<i>prenatabs fa</i>	56
<i>peg3350-sod sul-nacl-kcl-asb-c</i>		<i>plerixafor</i>	41	<i>prenatabs rx</i>	56
.....	39	PNEUMOVAX-23.....	43	<i>prenatal</i>	56
PEGASYS.....	41	<i>pnv-select</i>	56	<i>prenatal complete</i>	56
<i>peg-electrolyte soln</i>	39	POCKET CHAMBER.....	33	<i>prenatal multi-dha (algal oil)</i>	
PEMAZYRE.....	10	<i>podofilox</i>	25	.....	56
PENBRAYA (PF).....	43	<i>polycin</i>	50	<i>prenatal multivitamins</i>	57
<i>penciclovir</i>	28	<i>polyethylene glycol 3350</i>	39	<i>prenatal one daily</i>	57
<i>penicillamine</i>	45	<i>polymyxin b sulf-trimethoprim</i>		<i>prenatal plus</i>	57
<i>penicillin v potassium</i>	6	.....	50	<i>prenatal plus (calcium carb)</i>	57
PENTACEL (PF).....	43	POMALYST.....	10	<i>prenatal plus (calcium carb)</i>	57
<i>pentamidine</i>	5	PONVORY.....	42	<i>prenatal vit no.179-iron-folic</i>	
PENTASA.....	39	PONVORY 14-DAY		.....	57
<i>pentazocine-naloxone</i>	16	STARTER PACK.....	42	<i>prenatal vitamin</i>	57
<i>pentoxifylline</i>	23	<i>portia 28</i>	49	<i>prenatal vitamin with minerals</i>	
<i>perindopril erbumine</i>	22	<i>posaconazole</i>	3	.....	57
<i>periogard</i>	31	<i>potassium chloride</i>	56	<i>prevalite</i>	24
PERJETA.....	10	<i>potassium citrate</i>	55	PREVNAR 20 (PF).....	43
<i>permethrin</i>	30	<i>potassium iodide</i>	32	PREVYMIS.....	4
<i>perphenazine</i>	19	POTELIGEO.....	10	PREZCOBIX.....	4
<i>perphenazine-amitriptyline</i> ..	19	<i>powderlax</i>	39	PREZISTA.....	4
PHEBURANE.....	30	<i>pr natal 400</i>	56	PRIFTIN.....	5
<i>phenazopyridine</i>	56	<i>pr natal 400 ec</i>	56	<i>primaquine</i>	5
<i>phenelzine</i>	19	<i>pr natal 430</i>	56	PRIMEAIRE.....	33
<i>phenobarb-hyoscy-atropine-</i>		<i>pr natal 430 ec</i>	56	<i>primidone</i>	12
<i>scop</i>	38	PRALATREXATE.....	10	PRIORIX (PF).....	43
<i>phenobarbital</i>	12	<i>pramipexole</i>	12	<i>probenecid</i>	44
<i>phenohydro</i>	38	<i>prasugrel</i>	23	<i>probenecid-colchicine</i>	44
<i>phenoxybenzamine</i>	22	<i>pravastatin</i>	24	<i>procentra</i>	19
<i>phenylephrine hcl</i>	52	<i>praziquantel</i>	5	PROCHAMBER.....	33
<i>phenytoin</i>	12	<i>prazosin</i>	22	<i>prochlorperazine</i>	39
<i>phenytoin sodium extended</i> ..	12	PRECISION XTRA		<i>prochlorperazine maleate</i>	39
PHESGO.....	10	KETONE-GLUCOSE.....	34	PROCRIT.....	41
<i>philith</i>	49	PRECISION XTRA		<i>procto-med hc</i>	39
<i>phosphate laxative</i>	39	MONITOR.....	34	<i>proctosol hc</i>	39
PHOSPHOLINE IODIDE....	50	PRECISION XTRA TEST..	32	<i>proctozone-hc</i>	39
<i>phytonadione (vitamin k1)</i>	23	<i>prednicarbate</i>	29	PROFILNINE.....	23
<i>pilocarpine hcl</i>	30, 31, 50	<i>prednisolone</i>	32	<i>progesterone</i>	46
<i>pimecrolimus</i>	25	<i>prednisolone acetate</i>	52	<i>progesterone micronized</i>	46
<i>pimozide</i>	19			PROGRAF.....	10
				PROLASTIN-C.....	30

<i>prolate</i>	15	REBIF (WITH ALBUMIN).....	42	<i>rosadan</i>	26
PROLEUKIN	41	REBIF REBIDOSE	42	<i>rosula cleansing cloths</i>	26
PROMACTA.....	23	REBIF TITRATION PACK.....	42	<i>rosuvastatin</i>	24
<i>promethazine</i>	53	<i>reclipsen (28)</i>	49	ROTARIX	43
<i>promethazine vc</i>	53	RECOMBIVAX HB (PF)	43	ROTATEQ VACCINE.....	43
<i>promethazine-codeine</i>	53	REGANEX	26	<i>roweepra</i>	12
<i>promethazine-dm</i>	53	RELENZA DISKHALER	4	ROZLYTREK	10
<i>promethegan</i>	53	RELION NOVOLIN 70/30 ..	35	RUBRACA.....	10
<i>propafenone</i>	20	RELION NOVOLIN N	35	RUCONEST	54
<i>proparacaine</i>	51	RELION NOVOLIN R	35	<i>rufinamide</i>	12
<i>propranolol</i>	22	RELISTOR.....	39	RUXIENCE.....	10
<i>propranolol-</i>		RENACIDIN	55	RYDAPT	10
<i>hydrochlorothiazid</i>	22	<i>rena-vite</i>	57	RYKINDO.....	19
<i>propylthiouracil</i>	32	<i>repaglinide</i>	37	S	
PROQUAD (PF)	43	REPATHA PUSHTRONEX ..	24	<i>sajazir</i>	54
<i>protriptyline</i>	19	REPATHA SURECLICK	24	<i>salsalate</i>	16
<i>prudoxin</i>	25	REPATHA SYRINGE	24	SANTYL	30
<i>pulmosal</i>	54	RESTASIS MULTIDOSE ...	51	<i>sapropterin</i>	36
PULMOZYME.....	54	RETACRIT	41	SAVELLA.....	45
<i>purelax</i>	39	REVCOVI	30	<i>saxagliptin</i>	37
PURIXAN	10	REVLIMID	10	<i>saxagliptin-metformin</i>	37
<i>pyrazinamide</i>	5	REXTOVY	16	<i>scalacort</i>	29
<i>pyridostigmine bromide</i>	14	REXULTI.....	19	SCSEMBLIX.....	10
<i>pyrimethamine</i>	5	REYATAZ	4	<i>scopolamine base</i>	39
Q		REZDIFFRA	30	SEGLUROMET	37
QUADRACEL (PF).....	43	RIASTAP	23	<i>selegiline hcl</i>	13
QUAZEPAM.....	19	<i>ribavirin</i>	4, 41	<i>selenium sulfide</i>	25
<i>quetiapine</i>	19	RIDAURA.....	45	SELZENTRY	4
<i>quinapril</i>	22	<i>rifabutin</i>	5	SEMGLEE(INSULIN	
<i>quinapril-hydrochlorothiazide</i>		<i>rifampin</i>	5	GLARGINE-YFGN).....	35
.....	22	<i>riluzole</i>	30	SEMGLEE(INSULIN	
<i>quinidine gluconate</i>	20	<i>rimantadine</i>	4	GLARG-YFGN)PEN	35
<i>quinidine sulfate</i>	20	<i>ringer's</i>	30	<i>se-natal 19 chewable</i>	57
<i>quinine sulfate</i>	5	RINVOQ	45	<i>se-natal-19</i>	57
<i>quit 2</i>	31	RINVOQ LQ	45	<i>sertraline</i>	19
<i>quit 4</i>	31	<i>risedronate</i>	31, 44	<i>setlakin</i>	49
QVAR REDHALER.....	54	<i>risperidone</i>	19	<i>sevelamer carbonate</i>	38
R		<i>risperidone microspheres</i>	19	<i>sevelamer hcl</i>	38
RABAVERT (PF)	43	RITEFLO AEROCHAMBER		SEVENFACT	23
<i>rabeprazole</i>	41	.....	33	<i>sharobel</i>	46
RADICAVA.....	14	<i>ritonavir</i>	4	SHINGRIX (PF).....	43
RADICAVA ORS STARTER		<i>rivastigmine</i>	14	SIGNIFOR.....	10
KIT SUSP.....	14	<i>rivastigmine tartrate</i>	14	<i>sildenafil (pulm.hypertension)</i>	
RAGWITEK.....	43	<i>rivelsa</i>	49	.....	54
<i>raloxifene</i>	44	<i>rizatriptan</i>	13	<i>silodosin</i>	55
<i>ramelteon</i>	19	ROCTAVIAN	23	<i>silver sulfadiazine</i>	25
<i>ramipril</i>	22	<i>roflumilast</i>	54	SIMLANDI(CF)	
<i>ranolazine</i>	24	<i>romidepsin</i>	10	AUTOINJECTOR	45
<i>rasagiline</i>	13	<i>ropinirole</i>	13	<i>simliya (28)</i>	49

<i>simpesse</i>	49	STIOLTO RESPIMAT.....	54	<i>tadalafil</i>	55
SIMPONI	45	STIVARGA.....	10	<i>tadalafil (pulm. hypertension)</i>	
<i>simvastatin</i>	24	<i>stop smoking aid</i>	31	.....	54
<i>sirolimus</i>	10	STRENSIQ.....	36	TAFINLAR	10
SIRTURO.....	5	<i>stress formula with iron</i>	57	<i>tafluprost (pf)</i>	51
SIVEXTRO	5	<i>stress formula with iron(sulf)</i>	57	TAGRISO.....	10
SKYLA.....	45	STRIVERDI RESPIMAT	54	TAKHZYRO	54
SKYRIZI	25, 39	<i>strong iodine</i>	27, 56	TALTZ AUTOINJECTOR ..	25
SKYSONA	14	SUBLOCADE	15	TALTZ AUTOINJECTOR (2	
<i>smoothlax</i>	39	<i>subvenite</i>	12	PACK).....	25
<i>sodium chloride</i>	31, 54	<i>subvenite starter (blue) kit</i> ...	12	TALTZ AUTOINJECTOR (3	
<i>sodium chloride 0.9 %</i>	31	<i>subvenite starter (green) kit</i> .	12	PACK).....	25
<i>sodium citrate-citric acid</i>	55	<i>subvenite starter (orange) kit</i>	12	TALTZ SYRINGE	25
SODIUM OXYBATE	19	SUCRAID	39	TALZENNA.....	10
<i>sodium phenylbutyrate</i>	31	<i>sucralfate</i>	41	<i>tamoxifen</i>	10
<i>sodium polystyrene sulfonate</i>	38	<i>sulfacetamide sodium</i>	25, 52	<i>tamsulosin</i>	55
<i>sodium,potassium,mag sulfates</i>		<i>sulfacetamide sodium (acne)</i>	27	<i>tarina 24 fe</i>	49
.....	39	<i>sulfacetamide sodium-sulfur</i> .	27	<i>tarina fe 1/20 (28)</i>	49
<i>solifenacin</i>	55	<i>sulfacetamide-prednisolone</i> ..	52	TASIGNA.....	10
SOLIRIS.....	31	<i>sulfacleanse 8-4</i>	27	<i>tavaborole</i>	28
SOLTAMOX.....	10	<i>sulfadiazine</i>	6	TAVALISSE	23
SOMATULINE DEPOT	10	<i>sulfamethoxazole-trimethoprim</i>		<i>tazarotene</i>	27
SOMAVERT	36	.....	6	TDVAX	43
<i>sorafenib</i>	10	SULFAMYLON.....	27	TECENTRIQ.....	10
<i>sotalol</i>	20	<i>sulfasalazine</i>	40	TEGSEDI	14
<i>sotalol af</i>	20	<i>sulfatrim</i>	6	<i>telmisartan</i>	22
SOTYKTU	25	<i>sulindac</i>	16	<i>telmisartan-amlodipine</i>	22
SOTYLIZE.....	20	<i>sumatriptan</i>	13	<i>telmisartan-hydrochlorothiazid</i>	
SPACE CHAMBER.....	33	<i>sumatriptan succinate</i>	13	.....	22
SPEVIGO	25	<i>sumatriptan-naproxen</i>	13	<i>temazepam</i>	19
SPIKEVAX 2023-2024(12Y		<i>sunitinib malate</i>	10	TEMODAR	10
UP)(PF)	43	SUNOSI.....	19	<i>temozolomide</i>	10
<i>spinosad</i>	30	<i>super b maxi complex</i>	57	<i>temsirolimus</i>	10
SPINRAZA (PF)	14	<i>super b-50 complex</i>	57	<i>tencon</i>	15
SPIRIVA RESPIMAT	54	<i>super quintis</i>	57	TENIVAC (PF)	43
<i>spironolactone</i>	22	<i>syeda</i>	49	<i>tenofovir disoproxil fumarate</i> .	4
<i>spironolacton-</i>		SYLVANT	10	<i>terazosin</i>	22
<i>hydrochlorothiaz</i>	22	<i>symax fastabs</i>	38	<i>terbinafine hcl</i>	3
<i>sprintec (28)</i>	49	<i>symax-sl</i>	38	<i>terbutaline</i>	55
SPRYCEL	10	<i>symax-sr</i>	38	<i>terconazole</i>	46
<i>sps (with sorbitol)</i>	38	SYMDEKO	54	<i>teriflunomide</i>	42
<i>sronyx</i>	49	SYMLINPEN 120	37	<i>teriparatide</i>	44
<i>ssd</i>	25	SYMLINPEN 60	37	<i>testosterone</i>	36
<i>sss 10-5</i>	27	SYNAGIS.....	4	<i>testosterone cypionate</i>	36
<i>st joseph aspirin</i>	16	SYNJARDY	37	<i>testosterone enanthate</i>	36
STAMARIL (PF)	43	SYNJARDY XR.....	37	<i>tetrabenazine</i>	14
<i>stavudine</i>	4	T		<i>tetracaine hcl</i>	51
STEGLATRO.....	37	TABRECTA.....	10	<i>tetracycline</i>	6
STELARA.....	25	<i>tacrolimus</i>	10, 26	TEZSPIRE.....	55

THALOMID.....	10	<i>tretinoin</i>	27	TRUSTEX-RIA NON-LUB	
<i>theophylline</i>	55	<i>tretinoin (antineoplastic)</i>	11	CONDOMS	45
<i>thioridazine</i>	19	<i>tretinoin microspheres</i>	27	<i>tulana</i>	46
<i>thiothixene</i>	19	TRETTEN	23	<i>turqoz (28)</i>	50
<i>thyroid (pork)</i>	37	<i>triamcinolone acetonide</i> 29, 30,		TWINRIX (PF).....	43
<i>tiadylt er</i>	22	31		<i>tydemy</i>	50
<i>tiagabine</i>	12	<i>triamterene</i>	22	TYENNE	45
TIBSOVO.....	10	<i>triamterene-hydrochlorothiazid</i>		TYENNE AUTOINJECTOR	
TICOVAC	43	.....	22	.....	45
<i>tilia fe</i>	49	<i>triazolam</i>	20	TYMLOS.....	44
<i>timolol maleate</i>	22, 50	<i>tricon</i>	57	TYPHIM VI.....	43
<i>timolol maleate (pf)</i>	50	<i>tridacaine ii</i>	27	TYSABRI	14
<i>tinidazole</i>	5	<i>triderm</i>	30	TYVASO	55
<i>tiopronin</i>	31	<i>trientine</i>	31	TYVASO DPI	55
<i>tiotropium bromide</i>	55	<i>tri-estarylla</i>	49	TYVASO REFILL KIT.....	55
<i>tis-u-sol pentalyte</i>	30	<i>trifluoperazine</i>	20	TYVASO STARTER KIT ...	55
TIVICAY	4	<i>trifluridine</i>	50	U	
TIVICAY PD	4	<i>trihexyphenidyl</i>	13	<i>unithroid</i>	37
<i>tizanidine</i>	14	TRIJARDY XR	37	UNITUXIN.....	11
<i>tobramycin</i>	5, 50	TRIKAFTA	55	UPTRAVI.....	22
<i>tobramycin in 0.225 % nacl</i> ...	5	<i>tri-legest fe</i>	49	<i>uretron d-s</i>	55
<i>tobramycin-dexamethasone</i> ..	52	<i>tri-linyah</i>	49	<i>urimar-t</i>	55
<i>tolcapone</i>	13	<i>tri-lo-estarylla</i>	49	<i>uro-458</i>	55
<i>tolmetin</i>	17	<i>tri-lo-marzia</i>	49	<i>urogesic-blue</i>	55
<i>tolterodine</i>	55	<i>tri-lo-mili</i>	49	<i>uro-mp</i>	55
<i>tolvaptan</i>	36	<i>tri-lo-sprintec</i>	49	<i>uro-sp</i>	55
<i>topiramate</i>	12	<i>trimethobenzamide</i>	40	<i>ursodiol</i>	40
<i>topotecan</i>	10	<i>trimethoprim</i>	7	<i>uryl</i>	55
<i>toremifene</i>	11	<i>tri-mili</i>	49	V	
<i>toremide</i>	22	<i>trimipramine</i>	20	<i>valacyclovir</i>	4
TOUJEO MAX U-300		TRIMO-SAN JELLY	46	VALCHLOR	26
SOLOSTAR	35	<i>trinatal rx I</i>	57	<i>valganciclovir</i>	4
TOUJEO SOLOSTAR U-300		<i>trinatal</i>	57	<i>valproic acid</i>	12
INSULIN.....	35	TRINTELLIX.....	20	<i>valproic acid (as sodium salt)</i>	
<i>tovet emollient</i>	29	<i>tri-nymyo</i>	49	.....	12
TRACLEER	55	TRIPTODUR.....	11	<i>valsartan</i>	22
<i>tramadol</i>	17	<i>tri-sprintec (28)</i>	49	<i>valsartan-hydrochlorothiazide</i>	
<i>tramadol-acetaminophen</i>	17	TRIUMEQ.....	4	.....	22
<i>trandolapril</i>	22	TRIUMEQ PD.....	4	<i>vancomycin</i>	7
<i>trandolapril-verapamil</i>	22	<i>tri-vitamin with fluoride</i>	57	<i>vandazole</i>	46
<i>tranexamic acid</i>	46	<i>trivora (28)</i>	49	VAQTA (PF).....	43
<i>tranlycypromine</i>	19	<i>tri-vylibra</i>	49	<i>varenicline</i>	31
<i>travoprost</i>	51	<i>tri-vylibra lo</i>	49	VARIVAX (PF).....	43
TRAZIMERA.....	11	TROGARZO	4	VARUBI.....	40
<i>trazodone</i>	20	<i>tropicamide</i>	50	VAXCHORA VACCINE.....	43
TRECTOR.....	5	<i>trospium</i>	55	VAXELIS (PF).....	43
TRELEGY ELLIPTA	55	TRULANCE.....	40	VAXNEUVANCE (PF)	43
TREMFYA.....	25	TRULICITY.....	37	VCF CONTRACEPTIVE	
<i>treprostinil sodium</i>	22	TRUMENBA.....	43	FILM.....	47

VCF CONTRACEPTIVE GEL	VUMERITY	42	<i>yuvafem</i>	46
.....	<i>vyfemla (28)</i>	50	Z	
VECTIBIX	<i>vylibra</i>	50	ZADITOR	51
<i>veletri</i>	VYNDAMAX	24	<i>zafemy</i>	47
<i>velivet triphasic regimen (28)</i>	VYNDAMAX	24	<i>zafirlukast</i>	55
.....	VYXEOS	11	<i>zaleplon</i>	20
VELPHORO	VYZULTA	51	<i>zarah</i>	50
VEMLIDY	W		ZEJULA	11
VENCLEXTA	<i>wal-zyr (ketotifen)</i>	51	ZELBORAF	11
VENCLEXTA STARTING	<i>warfarin</i>	23	ZEMAIRA	31
PACK	<i>water for irrigation, sterile</i>	31	<i>zenatane</i>	27
<i>venlafaxine</i>	<i>wera (28)</i>	50	ZENPEP	40
VENOFER	<i>wesnatal dha complete</i>	57	<i>zenzedi</i>	20
<i>verapamil</i>	<i>wesnate dha</i>	57	ZEPATIER	4
VEREGEN	<i>westab plus</i>	57	ZEPOSIA	14
VERQUVO	<i>westgel dha</i>	57	ZEPOSIA STARTER KIT (28-	
VERZENIO	<i>wintergreen oil</i>	26	DAY)	14
<i>vestura (28)</i>	<i>wixela inhub</i>	55	ZEPOSIA STARTER PACK	
V-GO 20	<i>women's gentle laxative(bisac)</i>		(7-DAY)	14
V-GO 30 .....	.....	40	<i>zidovudine</i>	4
V-GO 40	<i>wymzya fe</i>	50	ZIEXTENZO	41
VIBERZI	X		<i>zileuton</i>	55
<i>vienna</i>	XALKORI	11	<i>ziprasidone hcl</i>	20
<i>vigabatrin</i>	XARELTO	23	ZIRABEV	11
<i>vigadrone</i>	XARELTO DVT-PE TREAT		ZOLADEX	11
<i>vigpoder</i>	30D START	23	<i>zoledronic acid</i>	36
VIJOICE	XDEMZY	51	<i>zoledronic acid-mannitol-water</i>	
<i>vilazodone</i>	XELJANZ	45	.....	31, 36
VIMIZIM	XELJANZ XR	45	ZOLGENSMA	14
VIOKACE	XEMBIFY	43	ZOLINZA	11
<i>viorele (28)</i>	XENPOZYME	31	<i>zolmitriptan</i>	13
VIRACEPT	XERESE	28	<i>zolpidem</i>	20
VIREAD	XERMELO	11	<i>zonisamide</i>	12
VISCO-3	XGEVA	7	ZONTIVITY	24
VISTOGARD	XIFAXAN	6	<i>zovia 1-35 (28)</i>	50
<i>vitamin b complex-folic acid</i>	XIGDUO XR	37	ZTALMY	12
.....	XIIDRA	51	ZTLIDO	27
<i>vitamin k</i>	XOLAIR	55	ZUBSOLV	17
<i>vitamin k1</i>	XOSPATA	11	ZULRESSO	20
<i>vitamins a,c,d and fluoride</i> ..	<i>xulane</i>	47	<i>zumandimine (28)</i>	50
VITRAKVI	XURIDEN	31	ZURZUVAE	20
VIVITROL	XYNTHA	23	ZYDELIG	11
VIVOTIF	XYNTHA SOLOFUSE	23	ZYKADIA	11
VIZIMPRO	XYWAV	20	ZYMFENTRA	40
<i>volnea (28)</i>	Y		ZYNTEGLO	41
VONJO	YERVOY	11	ZYNYZ	11
VONVENDI	YESCARTA	11		
<i>voriconazole</i>	YF-VAX (PF)	43		
VORTEX HOLDING	YONDELIS	11		
CHAMBER				



This formulary was updated on 9/1/2024. For more recent information or other questions, please contact The Health Plan Pharmacy Services at 1.800.624.6961 extension 7914, or visit www.heathplan.org.